### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

57 Min 7 M 5 M 7 M 5 M 5 M 5 M 5 M 5 M 5 M 5 M							
The C/OH Instruction	Guide explains how to com	plete this form	1 Filer ID(Etl	hics Comm	nission filers)	2 Total pages filed	
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFF	ICE USE ONLY	
OFFICEHOLDER	Dr.	Benjamin	L.	Ī	Date Received	t	
NAME	NICKNAME	LAST	SUFFIX		12/4/2015		
	Ben Hall	Hall	III				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP C	CODE			
OFFICEHOLDER	530 Lovett Blvd						
MAILING				Ī	Date Hand-delive	red or Date Postmarked	
ADDRESS	Houston TX 77006						
Change of address							
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION				
OFFICEHOLDER	(713) 942-9600						
PHONE							
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount	
TREASURER	Dr.	Benjamin	L.	Ī	Date Processe	ed e	
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 30th day be	fore election Fin	nal repport (Attach C/OH	1 - FR)	Exceeded \$500 limit		
9 REPORT TYPE	July 15 X 8th day before	ore election Ru	noff		15th day after campaigr	n treasurer appointment(officeholder only)	
10 PERIOD	Month Day	Year			Month	Day Year	
COVERED	9/25/2015	5	THROUGH		10/2	24/2015	
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE				
	Month Day Year	<u> </u>				_	
	11/3/2015	Primary	Ru	inoff	χ General	Special	
12 OFFICE	OFFICE HELD (if any)		13 OF	FFICE SOUGH	HT (if known)		
			М	layor			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

14 FILER NAME Benja	min L. Hall		15 Filer ID (Ethics Commission		
	expenditures may have	political contributions accepted or political expenditur been made without the candidate's or officeholder's lareceive notice of such expenditures.			
16 NOTICE FROM	COMMITTEE TYPE	COMMITTEE NAME			
POLITICAL COMMITTEE(S)	GENERAL	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	3		
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS NS, OR GUARANTEES OF LOANS), UI		\$	
	_	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$69,260.02	
EXPENDITURE FOTALS		AL EXPENDITURES OF \$100 OR LESS	•	\$	
	4 TOTAL POLITIO	AL EXPENDITURES		\$134,142.70	
CONTRIBUTION BALANCE	5 TOTAL POLITIC OF REPORTING	AL CONTRIBUTIONS MAINTAINED AS FPERIOD	OF THE LAST DAY	\$726,066.25	
OUTSTANDING LOAN FOTALS	6 TOTAL PRINCIF LAST DAY OF T	PAL AMOUNT OF ALL OUTSTANDING I HE REPORTING PERIOD	LOANS AS OF THE	\$850,000.00	
18 AFFIDAVIT		report is tru	affirm, under penalty of perjury ue and correct and includes all v me under Title 15, Election Co	nformation required to be	
			Benjamin L. H	all, III	
AFFIX.107.07.17	· A DOVE		Signature of Candidate	or Officeholder	
AFFIX NOT STAMP / SE  Sworn to and subscribed		d	, this the	day	
of	, 20	, to certify which, witness m	y hand and seal of office.		
Signature of officer admin	nistering oath	Print name of officer administerin	g oath Title of offi	cer administering oath	

SU	ΙB	TOTALS - COH	FORM C/OH		
			COVER SHEET PG 3		
19 F	FIL	ER NAME Benjamin L. Hall	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	NS		
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD				
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS			
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	F C/OH		
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	IBUTIONS		
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS R	ETURNED TO FILER		

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

FORM C/OH ADDENDUM

C/OH NAME Benjamin L. Hall

ACCOUNT # (Ethics Commission filers)

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

M	ONETAR	Y POLITICAL CONT	SCHEDULE A1		
The	e Instruction G	Guide explains how to comple	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 P	AC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Alan F. Levin	out of state P	PAC(ID# )	7 Amount of contributions (\$)
	10/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	\$1,500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Claude Foster	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	10/17/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77489	\$100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Dylan Marin	out of state P	I AC(ID# )	7 Amount of contributions (\$)
	10/5/2015	6 Contributor address;	City;	State; Zip Code	\$16.00
8	Principal occu Student	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor out of state PAC(ID# )			

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
		Osmin Bonilla			7 Amount of contributions (\$)
	10/5/2015	6 Contributor address;	City;	State; Zip Code	5.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Jamie Griffith	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/5/2015	6 Contributor address;	City;	State; Zip Code	30.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  Michael Wilk	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	25.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Mavis Kelsey	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	50.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  Magali Pener	out of state	PAC(ID# )	7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONTR	RIBUTIONS	6	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)
10/2/2015	6 Contributor address;	City;	State; Zip Code	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Ictions)
4 Date	5 Full name of contributor Imeida Alaniz	out of state F	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77012	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Ictions)
4 Date	5 Full name of contributor Lidin Calvillo	out of state F	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Sam Houston	State; Zip Code TX 77587	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor  Lucia Cruz	out of state F	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Sergio Solis	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	1.00
8	Principal occ Truck Driver	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Mario A. Rivas	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77017	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Sarai Rivas	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77017	1.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instruct	tions)		
4	Date	5 Full name of contributor  Maria M. Valdez	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77547	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1
Th	e Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
		Jose G. Valdez			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX 77547	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	CEO				
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Irma Valdez	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Galena Park	TX 77547	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	<u>I</u> tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Kimberly Rivas			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX 77017	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Ramon Valdez	out of state F	PAC(ID# )	7 Amount of contributions (\$)
		Kamuri Valuez			Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX 77547	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Hipolito Guelleo			7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONTE	RIBUTION	S	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)		
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor  Maria Alaniz	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77029	1.00
8 Principal od House Wife	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Alejandra Pena	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77029	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Olivia	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77013	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Lictions)

M	ONETAR'	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME I	Benjamin L. Hall	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Raquel Valdez	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City;	State; Zip Code	4.00
	10/2/2015		Houston	TX	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Maria Molina	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Irma M. Figueroa	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77034	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Eduardo Rodriguez	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE	<b>A</b> 1
The	Instruction G	uide explains how to complete	1 Total Pages Schedule A1:			
2 F	ILER NAME B	enjamin L. Hall			3 Filer ID (Ethics Commission filers)	
		Lorena Quiroz			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX 77029	1.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	L tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Humberto Gonzalez			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX	1.00	
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# )		
		Guadalupe Esparza			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX 77015	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	PAC(ID# )		
		Felipe Molina			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX	1.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I vitions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Nrry Cano			7 Amount of contributions (\$)	

MONETAR	RY POLITICAL CONTR	SCHEDULE A		
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	-
10/2/2015		Houston	TX 77057	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Evelyn Villatoro			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
10/2/2015		Houston	TX	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Pedro Lamadrid Cruz			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/2/2015		Houston	TX 77036	1.00
8 Principal oc	Ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Gilberto Chavez	Ц		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/2/2015				1.00
8 Principal od	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Lections)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Ivan I. Garcia	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City;	State; Zip Code TX 77056	1.00
	10/2/2010		Houston	17. 17.000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Jose Perez	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Marlyn Barahona	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77045	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Sonia Nolaseo	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE A1
The Instruc	tion Guide explains how to comple	1 Total Pages S	1 Total Pages Schedule A1:		
2 FILER NA	ME Benjamin L. Hall			3 Filer ID (Ethics Com	mission filers)
	Romilia Araujo			7 Amour	nt of contributions (\$)
10/2/201	6 Contributor address;	City; Houston	State; Zip Code	-	1.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instru	Inctions)	
4 Date	5 Full name of contributor Tomasa Herrera	out of state	PAC(ID# )	7 Amour	nt of contributions (\$)
10/2/201	6 Contributor address;	City; Houston	State; Zip Code	-	1.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instru	Lactions)	
4 Date	5 Full name of contributor  Vilma Saquic	out of state	PAC(ID# )	7 Amour	nt of contributions (\$)
10/2/201	6 Contributor address;	City; Houston	State; Zip Code TX 77083	-	1.00
8 Princip House	al occupation / Job title (See Instructions) Wife		9 Employer (See Instru	actions)	
4 Date	5 Full name of contributor Hermelinda Saquic	out of state	PAC(ID# )	7 Amour	nt of contributions (\$)
10/2/201	6 Contributor address;	City; Houston	State; Zip Code	-	1.00
8 Princip House	al occupation / Job title (See Instructions) Wife		9 Employer (See Instru	L actions)	
4 Date	5 Full name of contributor  Ana Poncio	out of state	PAC(ID# )	7 Amour	nt of contributions (\$)

M	ONETARY	POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME E	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor Silvia Flores	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor Francisco Gonzalez	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor Carlos Paz	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	uctions)

M	ONETAR	Y POLITICAL CONT	SCHEDULE A1		
The	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Nohemy Contreas	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77081	1.00
8	Principal occ House Wife	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Noel Soriano	out of state I	I PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Monica Hjuilar	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	1.00
8	Principal occ	ccupation / Job title (See Instructions)  9 Employer (See Instruc		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Carlos Ramirez	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77081	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETAR	Y POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME E	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
		Valenti Vasquez			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX 77031	1.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Dominic Smith			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Felipa Garcia			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Ruben Gonzalez			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/2/2015		Houston	TX 77071	1.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Yolanda Perez	_		7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONTE	RIBUTION	S	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)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor  Jaime Caiax	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77035	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor  Josue Valdez	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor  Jose Pena	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	I ctions)

M	ONETAR'	Y POLITICAL CONT	SCHEDULE A1		
The	e Instruction C	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Timotea	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Raquel Suarez	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77013	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Samuel Xolot	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX	1.00
8	Principal occi			9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Fredy Promotor	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE	<b>A</b> 1
Th	e Instruction G	duide explains how to comple	1 Total Pages Schedule A1:			
2 F	TILER NAME B	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)	
		Maria Ortiz	1		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX 77096	1.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Elias Tzuban	Ш		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX	1.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ruth Ixodon			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX 77035	1.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Martha Reyes	Ш		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/2/2015		Houston	TX	1.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ruth Leiva			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
The	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ptions)
4	Date	5 Full name of contributor  Miguel Sanchez Jr.	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Channelview	State; Zip Code TX 77530	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I otions)
4	Date	5 Full name of contributor  Eleuterio Saenz	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77029	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I otions)
4	Date	5 Full name of contributor Fabiana Par	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1.00
8	Principal occ	Cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)

MON	ETARY	POLITICAL CONTR	SCHEDULE A1		
The Inst	truction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER	R NAME B	enjamin L. Hall			3 Filer ID (Ethics Commission filers)
4 Da	ate	5 Full name of contributor	out of state i	PAC(ID# )	
		David Estrada	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
10/2	2/2015		Houston	TX	1.00
_	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4 Da	ate	5 Full name of contributor	out of state I	 PAC(ID# )	
		Vilma Elizabeth	П		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
10/2	2/2015				1.00
8 Pr	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
Ho	ouse Wife				
4 Da	ate	5 Full name of contributor	out of state I	PAC(ID# )	
		Marisa Garcia			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
10/2	2/2015		Houston	TX	1.00
8 Pr	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4 Da	ate	5 Full name of contributor	out of state I	PAC(ID# )	
		Wilber Valencia	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
10/2	2/2015		Houston	TX	1.00
8 Pr	rincipal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
Dr	river				
4 Da	ate	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTIONS	5		SCHEDULE	A1
The	e Instruction G	uide explains how to comple	1 Total Pages Schedule A1:				
2 F	ILER NAME B	Benjamin L. Hall			3 Filer ID (E	Ethics Commission filers)	
		Adrian Pezina	-		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/2/2015		Houston	TX 77049		1.00	
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# )			
		Erica Pezina			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/2/2015		Houston	TX 77049		1.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor Giuillermo Ramos	out of state	PAC(ID# )	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/2/2015		Houston	TX 77074		1.00	
8	Principal occu Store Manage	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor  Blanca Truiz	out of state	PAC(ID# )	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/2/2015		Channelview	TX 77530		1.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor  Maluz Romoro	out of state	PAC(ID# )	7	Amount of contributions (\$)	

MONETAR	RY POLITICAL CONTR	SCHEDULE A		
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	-
10/2/2015		Houston	TX 77049	1.00
8 Principal of House Kee	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Eliseo Romoro	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houson	State; Zip Code TX 77049	1.00
8 Principal od Truck Drive	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Inds Garcia	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77074	1.00
8 Principal od	ccupation / Job title (See Instructions)		9 Employer (See Instruc	_I ctions)
4 Date	5 Full name of contributor  Danny Ayala	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	1.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Jose G. Villerreal	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City;	State; Zip Code	1.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Luisa Roniedo	out of state	I PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	1.00
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Luis Lopez	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Stafford	State; Zip Code TX 77477	1.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Luciano Enriquez	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77089	1.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
	Vilma Avalos	<del></del>		7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77081	1.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor  Marleni Perez	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77036	1.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4 Date	5 Full name of contributor Pamela Mejao	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77040	1.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Liuis Rivera	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77081	1.00
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor Osualdo Alverez	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	S	SCHEDULE A			
Th	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:				
2 F	FILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)		
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code	1.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)		
4	Date	5 Full name of contributor  Laura Enamorado	out of state	PAC(ID# )	7 Amount of contributions (\$)		
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	1.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)		
4	Date	5 Full name of contributor  Delsy Zavala	out of state	PAC(ID# )	7 Amount of contributions (\$)		
	10/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77081	1.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I otions)		
4	Date	5 Full name of contributor Roy Rodney	out of state	PAC(ID# )	7 Amount of contributions (\$)		
	10/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	1,000.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)		

M	ONETARY	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to complet	te 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  David Harris	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77021	5,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Anthony Petkas	out of state f	PAC(ID# )	7 Amount of contributions (\$)
	10/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	2,000.00
8	Principal occu	Lupation / Job title (See Instructions) Shop		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Steve (Hasim) Khalil	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Eric Mullins	out of state R	I PAC(ID# )	7 Amount of contributions (\$)
	10/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77021	350.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
		Suzanne Heber			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/4/2015		Tomball	TX 77377	50.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Penelope Marie Cole			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/5/2015		Houston	TX 77021	50.00
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	per diem retir	ed R.N.			
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Joseph Gourrier			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	10/8/2015		Houston	TX 77006	1,000.00
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Attorney				
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Olaniyi Oyedele			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/18/2015		Richmond	TX 77407	50.00
8		upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
	Auditor				
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Malcolm Morris			7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	10/19/2015		Houston	TX 77019	5,000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Carolyn Hall Smith			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/19/2015		Columbia	SC 29203	25.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Barbara Josephson			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	10/19/2015		Houston	TX 77056	400.00
8		cupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
	Realtor				
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Jeremy Hodge			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	1
	10/20/2015		Rosenburg	TX 77471	15.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Waiter				

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to complet	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 Christine Varghese	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	25.00
8	Principal occu	upation / Job title (See Instructions) neduler		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Kayla Tennison	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	25.00
8		upation / Job title (See Instructions) n/Youth Pastor		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Michael Gallagher	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77004	2,000.00
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Frank Rush	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77065	100.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETARY	POLITICAL CONTI	RIBUTION	S	SCHEDULE	<b>A</b> 1
Th	e Instruction G	uide explains how to complet	1 Total Pages Schedule A1:			
2 F	FILER NAME B	enjamin L. Hall			3 Filer ID (Ethics Commission filers)	
		Manson B Johnson			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/22/2015		Houston	TX 77004	500.00	
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# )		
		Keion Henderson	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/23/2015		Humble	TX 77396	1,000.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Elmo Johnson			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/22/2015		Houston	TX 77019	100.00	
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# )		
		Frankie L. Cade			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/24/2015		Houston	TX 77047	250.00	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Linda F. Scurlock	_		7 Amount of contributions (\$)	

M	ONETAR'	Y POLITICAL CONT	SCHEDULE A1		
Th	e Instruction C	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 I	FILER NAME I	Benjamin L. Hall			3 Filer ID (Ethics Commission filers)
	10/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77045	100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Claude Foster  6 Contributor address;	out of state F		7 Amount of contributions (\$)
	10/24/2015	o contributor address,	City; Missouri City	•	150.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor Charles N. Grichar	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	5,000.00
8	·	upation / Job title (See Instructions) nnacle Legal Funding, LLC		9 Employer (See Instruc	etions)
		ATTACH ADDITION	ONAL COPIES (	F THIS SCHEDUL	E AS NEEDED
		If contributor is out-of-state PA	AC, please see instr	uction guide for addition	onal reporting requirements

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					SCHEDULE A			
The Instruction Guide explains how to complete this form.					1	Total Pages Sci	hedule A2:	
2 F	ILER NAME E	Benjamin L. Hall			3 Fi	ler ID (Ethics Commi	ssion filers)	
4 T	OTAL OF UN	ITEMIZED IN-KIND POLITIC	CAL CONTRIBUT	TIONS	\$42	,757.02		
5	Date	6 Full name of contributor	out of state F	PAC(ID# )				
3		Richard Johnson		,	8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/5/2015		Houston	TX 77029		1500.00	Office	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		
5	Date	6 Full name of contributor	out of state F	PAC(ID# )				
		Gary Oradat	Ш		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/8/2015		Houston	TX 77043		300.00	Breakfast	
						Check if travel outsi Schedule T	ide of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		
5	Date	6 Full name of contributor	out of state F	PAC(ID# )				
		Daysi Marin	Ц		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/17/2015		Sugarland	TX 77498		325.00	Decorations/Utensils	
						Check if travel outsi Schedule T	I ide of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					SCHEDULE A2			
The Instruction Guide explains how to complete this form.					1	Total Pages Scl	hedule A2:	
2 F	FILER NAME E	Benjamin L. Hall	, ,		3 Fi	ler ID (Ethics Commi	ssion filers)	
4 7	TOTAL OF UN	ITEMIZED IN-KIND POLITIC	CAL CONTRIBUT	TIONS	\$42	2,757.02		
5	Date	6 Full name of contributor	out of state I	PAC(ID# )				
3		Elias Duran		,	8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/17/2015		Houston	TX 77096		5000.00	Television/Univision	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		
5	Date	6 Full name of contributor	out of state I	PAC(ID# )				
		Mauricio & Daysi Marin	Ш		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/16/2015		Sugarland	TX 77498		9000.00	Commercials	
						Check if travel outsi Schedule T	ide of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		
5	Date	6 Full name of contributor	out of state I	PAC(ID# )				
		Lucy Duran			8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/17/2015		Houston	TX 77096		5000.00	Television/Univision	
						Check if travel outsi Schedule T	I ide of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						SCHEDULE A2		
		Guide explains how to comple	te this form.		1	Total Pages Scl	nedule A2:	
2 F	FILER NAME E	Benjamin L. Hall			3 Fi	ler ID (Ethics Commi	ssion filers)	
4 7	TOTAL OF UN	ITEMIZED IN-KIND POLITIC	AL CONTRIBU	TIONS	\$42	2,757.02		
5	Date	6 Full name of contributor	out of state	PAC(ID# )				
		Dia Martin			8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/17/2015		Sugarland	TX 77479		140.73	Food	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		
5	Date	6 Full name of contributor	out of state	PAC(ID# )				
		Pastor Luis Larrinaga	Ц		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/17/2015		Houston	TX 77015		375.00	Food	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		
5	Date	6 Full name of contributor	out of state	PAC(ID# )				
		Roy Davis			8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	-			
	10/17/2015		Pearland	TX 77584		800.00	Sound	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					SCHEDULE AZ		
	e Instruction G		1	Total Pages Scl	nedule A2:		
2 F	FILER NAME E	Benjamin L. Hall			3 F	iler ID (Ethics Commi	ssion filers)
4 -	TOTAL OF UN	ITEMIZED IN-KIND POLITICA	AL CONTRIBU	TIONS	\$42	2,757.02	
5	Date	6 Full name of contributor	out of state	PAC(ID# )			
5		Mohamed Allan		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/17/2015		Richmond	TX 77407		500.00	Primetime Sports Grill Venue
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instr	uction	is)	
5	Date	6 Full name of contributor	out of state	PAC(ID# )			
		Cliff Edwards	Ш		8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/17/2015		Houston	TX 77004		1500.00	Photography
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instr	uction	as)	
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	-		
	10/18/2015		Houston	TX 77093		1000.00	Office
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instr	uction	s)	

		TARY (IN-KIND) PO			SCHEDULE A2		
	CONTRIBUTIONS  The Instruction Guide explains how to complete this form.				1	Total Pages Sci	hedule A2:
2 F	ILER NAME E	Benjamin L. Hall			3 Fi	iler ID (Ethics Commi	ssion filers)
4 T	OTAL OF UN	ITEMIZED IN-KIND POLITICA	AL CONTRIBUT	IONS	\$42	2,757.02	
5	Date	6 Full name of contributor	out of state F	PAC(ID# )			
		Tom Horan		,	8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/21/2015		Houston	TX 77019		300.00	Advertisement Purchase
						Check if travel outsi Schedule T	ide of Texas, complete
10 Principal occupation / Job title (See Instructions)			11 Employer (See Instru	uction	is)		
5	Date	6 Full name of contributor	out of state P	PAC(ID# )			
		Claude Foster			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/17/2015		Missouri City	TX 77489		114.00	Cell Phone Hot Spot Usage
						Check if travel outsi Schedule T	ide of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	is)	
5	Date	6 Full name of contributor	out of state P	PAC(ID# )			
		Levi Benton			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/1/2015		Houston	TX 77002		152.29	Breakfast Meeting
						Check if travel outsi Schedule T	ide of Texas, complete
10	Principal occu	upation / Job title (See Instructions)		11 Employer (See Instru	uction	is)	

	NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						SCHEDULE A2
		uide explains how to comple	te this form.		1	Total Pages Sci	hedule A2:
2 F	FILER NAME E	Benjamin L. Hall			3 Fi	ler ID (Ethics Commi	ssion filers)
4 7	TOTAL OF UN	ITEMIZED IN-KIND POLITIC	AL CONTRIBU	TIONS	\$42	,757.02	
5	Date	6 Full name of contributor	out of state	PAC(ID# )			
J		Janette Lowry		,	8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/17/2015		Houston	TX 77096		5,000.00	Television/Univision
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uction	s)	
5	Date	6 Full name of contributor	out of state	 PAC(ID# )	Τ		
		Rebecca Duran	Ш		8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/17/2015		Houston	TX 77096		5000.00	Television/Univision
						Check if travel outsi Schedule T	de of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uction	s)	
5	Date	6 Full name of contributor	out of state	PAC(ID# )			
		Sunny Duran			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State; Zip Code	-		
	10/17/2015		Houston	TX 77096		5000.00	Television/Univision
						Check if travel outsi Schedule T	ide of Texas, complete
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uction	s)	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						SCHEDULE A2		
	The Instruction Guide explains how to complete this form.				1	Total Pages Sci	hedule A2:	
2 F	FILER NAME B	Benjamin L. Hall			3 Fi	ler ID (Ethics Commi	ssion filers)	
4 7	TOTAL OF UNI	TEMIZED IN-KIND POLITIC	AL CONTRIBUT	TIONS	\$42	2,757.02		
5	Date	6 Full name of contributor	out of state F	PAC(ID# )				
5	Dute	Claude Foster	out or state i	7.0(1511)	8	Amount of	9 In-Kind contribution	
						contributions (\$)	description	
		7 Contributor address;	City;	State; Zip Code				
	10/24/2015		Missouri City	TX 77489		500.00	Mail-In Ballots	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ıction	s)		
5	Date	6 Full name of contributor	out of state F	PAC(ID# )	Τ			
		Rosemary Smith	Ц		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code	•			
	10/24/2015		Houston	TX 77237		500.00	Mail-In Ballots	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ıction	s)		
5	Date	6 Full name of contributor	out of state F	PAC(ID# )				
		Daysi Marin	Ш		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code				
	10/24/2015		Sugarland	TX 77498		250.00	Mail-In Ballots	
						Check if travel outsi Schedule T	ide of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	ıction	s)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						SCHEDULE		
Th	The Instruction Guide explains how to complete this form.					Total Pages Sch	nedule A2:	
2 F	TILER NAME	Benjamin L. Hall			3 F	iler ID (Ethics Commis	ssion filers)	
4 T	OTAL OF U	NITEMIZED IN-KIND POLITIC	CAL CONTRIBU	TIONS	\$42	2,757.02		
5	Date	6 Full name of contributor  Mauricio Marin	out of state	PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description	
	10/24/2015	7 Contributor address;	City; Sugarland	State; Zip Code		250.00	Mail-In Ballots	
						Check if travel outsi Schedule T	de of Texas, complete	
10	Principal oc	cupation / Job title (See Instructions)		11 Employer (See Ins	struction	ns)		
5	Date	6 Full name of contributor  Ron Jackson	out of state	PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code				
	10/24/2015		Houston	TX 77221		250.00  Check if travel outsi Schedule T	Mail-In Ballots de of Texas, complete	
10	Principal oc	cupation / Job title (See Instructions)		11 Employer (See Ins	struction	ns)		
		ATTACH ADDIT	IONAL COPIES	OF THIS SCHEDU	ILE A	S NEEDED		
		If contributor is out-of-state P	AC nlesse see ins	truction quide for addi	tional	reporting requiremen	nte	

LC	LOANS						SCHEDULE E		
	The	Instruction Guide explains ho	w to complete this	form.		1	Total Pages Schedule E:		
2 F	ILER NAME Ber	njamin L. Hall				3	Filer ID (Ethics Commission filers)		
4	TOTAL (	OF UNITEMIZED LOANS:	=> => =>	:> => =	>		850,000.00		
5	Date of loan	7 Name of lender	out of state PAC(II	D# )					
		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	TX	77024				
	Institution?					11	Maturity date		
	No								
12	Principal occu	upation / Job title (See Instru	ctions)	13 Empl	oyer (See Instr	uction	ns)		
	Attorney			Self-Emp	oloyed				
14	Description o	f collateral		15	Check if perso		unds were deposited into political account		
	None				- (See instruction	)iio)			
16	GUARANTOR	17 Name of guarantor		-		19	Amount Guaranteed (\$)		
	INFORMATION								
		18 Guarantor address;	City;	State;	Zip Code	1			
	not applicable								
20	Principal Occu	<u> </u>		21 Emp	loyer	<u> </u>			
	·	•			•				
		ATTACH ADDITION	NAL COPIES OF	THIS SC	HEDULE A	S NE	EDED		
		If lender is out-of-state PAC, p	lease see instruction	guide for	additional rep	ortin	g requirements		

	The Instruction Guide ex	plains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Benjamin L. Ha	3 Filer ID (Ethics Commission filers)					
4 Date	5 Payee name						
10/18/2015	Dove Marketing or Ricky Far	ley					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
3,950.00							
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Advertising Expense						
9 Complete ONLY if direct	Candidate / Officehoder name	Office sought office held					
expendituree to benefit C/OH							
4 Date	5 Payee name						
10/2/2015	Our News						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
150.00							
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Advertising Expense						
	Advertising 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					
28.32							
20.32							
	() 0						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Benjamin L. Hall Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder 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 9/28/2015 Daysi Marin 7 Payee address; 6 Amount (\$) Zip Code City; State; 32.77 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Food/Beverage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Benjamin L. Ha	]	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/28/2015	Daysi Marin		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
138.91			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Food/Beverage Expense		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/7/2015	S.H.A.P.E.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
250.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Contributions/Donations		
	Made By		
	Candidate/Officeholder/Political Committee		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/2/2015	Perry Wooten		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,000.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Benjamin L. Hall Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/2/2015 Anotonio Deleon 7 Payee address; City; 6 Amount (\$) Zip Code State; 1,000.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide e	xplains how to complete this form	n
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Benjamin L. H	all	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/2/2015	Chaney Ellis		
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 T	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Salaries/Wages/Contract		
	Labor		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/7/2015	Anotonio Deleon		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00			
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
	Salaries/Wages/Contract		
	Labor		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
experioraree to benefit 6/011			
4 Date	5 Payee name		
10/8/2015	WRI-AEW Lone Star Renta	il Portfolio, LLC	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,500.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Benjamin L. Hall Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/8/2015 WRI-AEW Lone Star Rentail Portfolio, LLC 6 Amount (\$) 7 Payee address; Zip Code City; State; 1,500.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Benjamin L. Ha	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
10/13/2015	D.S.W. Equipment, Inc.	
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, officeholder 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	
9/29/2015	All For Hall Committee	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
605.00		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Petty Cash	
	. only cash	
9 Complete ONLY if direct	Candidate / Officehoder name	I office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
10/1/2015	Tomaro Bell	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5,000.00		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Benjamin L. Hall Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/2/2015 Daysi Marin 7 Payee address; 6 Amount (\$) Zip Code City; State; 2,000.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

I KOM I OLIHOAL	00111111100110110	
	The Instruction Guide	explains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Benjamin L. I	Hall 3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
10/2/2015	JPBE Consulting	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
300.00		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Salaries/Wages/Contract	
	Labor	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
10/2/2015	JPBE Consulting	
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, officeholder living expense
	Salaries/Wages/Contract	
	Labor	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
experidituree to benefit 6/011		
4 Date	5 Payee name	
10/16/2015	Mauricio Marin	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
1,500.00		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Benjamin L. Hall Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/25/2015 All Print & Office Supply, Inc. 6 Amount (\$) 7 Payee address; City; State; Zip Code 921.05 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide or	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Benjamin L. Ha	· · · · · · · · · · · · · · · · · · ·	Filer ID (Ethics Commission filers)
4 Date	5 Payee name		, , , , , , , , , , , , , , , , , , , ,
10/23/2015			
	Chaney Ellis	Otata 7'n Oada	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,100.00			
		T	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	
		Check if Austin, TX, officehold	er living expense
	Advertising Expense		
	0 11 1 10 11 1		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offic	ce held
4 Date	5 Payee name		
10/21/2015 6 Amount (\$)	Tomaro Bell	State; Zip Code	
	7 Payee address; City;	State; Zip Code	
1,000.00			
a DUDDOOF OF EVDENDITUDE	(-) 0-1	(h) December the	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	or consists Orbertals T
		Check if travel outside of Texa	
		Check if Austin, TX, officehold	er living expense
	Fees		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office	ce held
expendituree to benefit C/OH	Candidate / Cincender name	Sinos sought Sino	as note
4 Date	5 Payee name		
10/23/2015	Rosalie Cedillo		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00			
000.00			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	(,)	1,.,	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Benjamin L. Hall Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/16/2015 Panell Charlot 7 Payee address; 6 Amount (\$) Zip Code City; State; 2,000.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

### POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Benjamin L. Hall 4 Date 5 Payee name 10/26/2015 Daysi Marin **6** Amount (\$) 7 Payee address; City; State: Zip Code 2,000.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/24/2015 Hiram Style 7 Payee address; 6 Amount (\$) City; State; Zip Code 100,000.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Media 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

#### **EXPENDITURES MADE BY CREDIT CARD** SCHEDULE F4 The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) Total pages Schedule F4: FILER NAME Benjamin L. Hall TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$\$666.65 5 Date 6 Payee name 9/29/2015 Office Depot City; **7** Amount (\$) 8 Payee address; State: Zip Code 33.04 9 **TYPE OF EXPENDITURE** Political Non-Political PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Office Supplies Office Overhead/Rental Expense Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Date 6 Payee name 9/29/2015 Chevron **7** Amount (\$) Payee address; City; State; Zip Code 52.20 TYPE OF EXPENDITURE Political Non-Political PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this (b) Description schedule) Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Transportation Equipment & Gas Related Expense Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 5 Date 6 Payee name 9/29/2015 Sam's Club Amount (\$) 8 Payee address; City; State; Zip Code

E	KPENDITURES MA	١C	DE BY CREDIT CA	RD			SCHEDULE	F4
	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME Benjamin L. Hall 3 Filer ID (Ethics Commission filers)						
4	TOTAL OF UNITEMIZED EXPE	NE	DITURES CHARGED TO A CREE	DIT CARD	)	\$\$666.65		
	38.74							
9	TYPE OF EXPENDITURE		X Political			Non-Political		
10	PURPOSE OF EXPENDITURE	١,	a) Category (See Categories listed at the chedule)  Food/Beverage Expen		(b) D	Check if travel outside of Texas, complete Schedu Check if Austin, TX, officeholder living expense Campaign Kitchen Supplies	le T	
11	Complete ONLY if direct expendituree to benefit C/OH	С	Candidate / Officehoder name			office sought offic	e held	
5	Date	6	Payee name					_
	9/29/2015		Sam's Club					
7	Amount (\$) 80.58	8	Payee address; City;	·	Sta	ite; Zip Code		
9	TYPE OF EXPENDITURE		X Political			Non-Political		
10	PURPOSE OF EXPENDITURE		a) Category (See Categories listed at the chedule)  Food/Beverage Expen		(b) D	Check if travel outside of Texas, complete Schedu Check if Austin, TX, officeholder living expense Campaign Kitchen Supplies	le T	
11	Complete ONLY if direct expendituree to benefit C/OH	С	Candidate / Officehoder name			office sought office	e held	
5	Date	6	Payee name					
	9/29/2015		Pizza Hut					
7	Amount (\$) 51.50	8	Payee address; City;	,	Sta	te; Zip Code		

E	EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4							
				The Instruction Guide explains	how	to complete this form.		
1	Total pages Schedule F4:	2		FILER NAME Benjamin L. Ha	II	3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED EXPE	LENDITURES CHARGED TO A CREDIT CARI			)	\$\$666.65		
9	TYPE OF EXPENDITURE		Х	Political		Non-Political		
10	PURPOSE OF EXPENDITURE		) Ca	Food/Beverage Expense	(b) [	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Food for Volunteers		
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name office sought office held						
5	Date	6		Payee name				
	9/29/2015			Sam's Club				
7	Amount (\$) 410.59	8		Payee address; City;	Sta	ite; Zip Code		
9	TYPE OF EXPENDITURE		Х	Political		Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense		(b) [	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Kitchen Supplies			
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	and	date / Officehoder name	1	office sought office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXP	PENDITURES	SCHEDULE G
MADE FROM PI	ERSONAL FUNDS	
	The Instruction Guide explains how	to complete this form.
1 Total Pages Schedule G:	<sup>2</sup> FILER NAME Benjamin L. Hall	3 FilerID (Ethics Commission filers)
4 Date	5 Payee name	-
10/23/2015	Jerome Walton	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
500.00		
Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF	Transportation Equipment & Related Expense	Gas
EXPENDITURE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH		· ·
4 Date	5 Payee name	
10/17/2015	Tony Deleon	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
500.00		
Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF	Transportation Equipment & Related Expense	Gas
EXPENDITURE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held
expenditure to benefit C/OH	_aa.a.to / atonoido. namo	Zimos dougini
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEEDED