### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

CAMI AICH I III	ANOL ILLI OILI					VER SHEET I G
The C/OH Instruction	n Guide explains how to con	nplete this form	1 Filer ID(Eth	nics Comn	nission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OF	FICE USE ONLY
OFFICEHOLDER	Mr.	Bill			Date Receive	ed
NAME	NICKNAME	LAST	SUFFIX		12/4/2015	
		King				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY;	STATE; ZIP C	ODE		
OFFICEHOLDER	5900 Memorial					
MAILING	101-B				Date Hand-deliv	ered or Date Postmarked
ADDRESS	Houston TX 77007					
Change of address						
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(832) 203-8660					
PHONE						
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount
TREASURER	Ms.	Paula			Date Process	sed
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
		Arnold				
7 CAMPAIGN	STREET ADDRESS (No PO Box Plea	ase);	APT/SUITE #;		CITY; STATE;	ZIP CODE
TREASURER	1520 Tulane St.					
ADDRESS						
(Residence)	Houston TX 77008					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 962-1905					
	January 15 30th day be	efore election Final r	repport (Attach C/OH	- FR)	Exceeded \$500 limit	
9 REPORT TYPE						
	July 15 8th day bef	fore election X Runoff	f		15th day after campai	gn treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month	Day Year
COVERED	10/25/201	5	THROUGH		12	2/2/2015
11 ELECTION	ELECTION DATE	ELECTION T	YPE			
	Month Day Year				П.	<b>□</b> •
	12/12/2015	Primary	X Rur	noff	General	Special
12 OFFICE	OFFICE HELD (if any)	1	13 OF	FICE SOUG	HT (if known)	
	Mayor					

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

14 FILER NAME Bill K	ing		15 Filer ID (Ethics Com	mission Filers)
	expenditures may have	political contributions accepted or political expenditures n been made without the candidate's or officeholder's know receive notice of such expenditures.	nade by political committees to support the vledge or consent. Candidates and office	e candidate / officeholder. These holders are required to report this
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME		
FROM	_			
POLITICAL	GENERAL	COMMITTEE ADDRESS		
COMMITTEE(S)				
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
additional pages COMMITTEE CAMPAIGN TREASURER ADDRESS				
Ladditional pages				
17 CONTRIBUTION	1 TOTAL POLITIC	I AL CONTRIBUTIONS OF \$50 OR LESS (C	OTHER THAN	
TOTALS	PLEDGES, LOAI	NS, OR GUARANTEES OF LOANS), UNLE	ESS ITEMIZED	\$365.00
	2 TOTAL POLITIC	AL CONTRIBUTIONS		
	_		. ( 0 4 1 10 )	\$1,381,193.80
	·	PLEDGES, LOANS, OR GUARANTEES OF	, 	
EXPENDITURE TOTALS	3 TOTAL POLITIC.	AL EXPENDITURES OF \$100 OR LESS, U	INLESS ITEMIZED	\$131.10
	4 TOTAL POLITIC	AL EXPENDITURES		\$1,272,967.90
				, , , , , , , , , , , , , , , , , , , ,
CONTRIBUTION BALANCE	5 TOTAL POLITICATION OF REPORTING	AL CONTRIBUTIONS MAINTAINED AS OF PERIOD	THE LAST DAY	\$331,134.66
BALANCE				1,101.00
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIP LAST DAY OF T	AL AMOUNT OF ALL OUTSTANDING LOA HE REPORTING PERIOD	ANS AS OF THE	\$650,000.00
TOTALS				\$000,000.00
18 AFFIDAVIT				
10 ALLIDAVII		Lewear or affi	rm, under penalty of perjury, th	at the accompanying
		report is true a	and correct and includes all info e under Title 15, Election Code	rmation required to be
		reported by mi	e under Tille 13, Liection Code	
			Bill King	
			Signature of Candidate or	Officeholder
AFFIX NOT STAMP / SE	AL ABOVE		C	
		I	, this the	day
		, to certify which, witness my ha		
		,,,		
Signature of officer admir	nistering oath	Print name of officer administering o	ath Title of officer	administering oath
		<u> </u>		

#### **SUBTOTALS - COH** FORM C/OH **COVER SHEET PG 3** 19 FILER NAME Bill King 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1374179.84 1. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. 6649.24 SCHEDULE B: PLEDGED CONTRIBUTIONS 3. SCHEDULE E: LOANS 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. 1272836.84 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD 8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. 650 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER 12.

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

FORM C/OH ADDENDUM

C/OH NAME Bill King

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	ONETARY	POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	e Instruction G	uide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor William Hill	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Self	tions)
4	Date	5 Full name of contributor Raj Rangwani	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77068	300
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  Beth Robertson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Charles Berdon Lawrence	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77251	2500
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# )	

M	ONETAR	Y POLITICAL CONT	<b>TRIBUTION</b>	S		SCHEDULE	<b>A</b> 1
Th	e Instruction (	Guide explains how to compl	ete this form.		1 Total F	Pages Schedule A1:	
2 F	FILER NAME	Bill King			3 Filer ID (Eth	nics Commission filers)	
		Robert Lemer			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/27/2015		Houston	TX 77079		2000	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc N/A	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Steven Howell	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/27/2015		Houston	TX 77098		100	
8	Principal occ	cupation / Job title (See Instructions)	<u> </u>	9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Mandel Selber III	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/27/2015		Houston	TX 77096		100	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		J. Philip McCormick	Ц		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	10/27/2015		Houston	TX 77025		450	
8	Principal occ	L cupation / Job title (See Instructions)	)	9 Employer (See Instruc	tions)		
	Retired			N/A			
4	Date	5 Full name of contributor  Gulf States Toyota Inc. State Pa		PAC(ID# )	7	Amount of contributions (\$)	
		Jan Statos royota mo. State 17			Ι.	ιοα οι σοιπιωατίστο (ψ)	

MONE	TARY	POLITICAL CONTR	SCHEDULE A1		
The Instr	uction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER	NAME E	Bill King			3 Filer ID (Ethics Commission filers)
10/26/	/2015	6 Contributor address;	City; Houston	State; Zip Code	2500
8 Prir	ncipal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Dat	e	5 Full name of contributor  R.L. Waltrip	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/27/	/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77219	5000
	ncipal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Service Corporation Intl.	
4 Dat	e	5 Full name of contributor Wayne Fox	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/26/	/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	5000
	·	Ipation / Job title (See Instructions) Real Estate		9 Employer (See Instruction WCF Development	I ctions)
4 Dat	e	5 Full name of contributor  Mavis Sanders	out of state	PAC(ID# )	7 Amount of contributions (\$)
10/26/	/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	50
8 Prir	ncipal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	rtions)

MONETAR	RY POLITICAL CONTE	RIBUTIONS	5	SCHEDULE A1
The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Bill Wong		, ,	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/26/2015		Bellaire	TX 77401	200
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Martha Jee Wong	Ц		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/26/2015		Houston	TX 77046	100
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruct	Lions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Bob Davee			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/27/2015		Taylor Lake Village	UT 77586	100
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
Partner			Mills Shirley LLP	
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Richard C. Haass	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/27/2015		San Antonio	TX 78258	250
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
сто			Linebarger, Goggan, Bla	ir & Sampson

M	ONETARY	POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Dick Milstead	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/26/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77386	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Milstead Automotive	tions)
4	Date	5 Full name of contributor  Randall Hale	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/26/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Rock Hill Capital Group,	
4	Date	5 Full name of contributor Charles Collins	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	250
8	Principal occu	upation / Job title (See Instructions) Real Estate		9 Employer (See Instruction Jones Lang LaSalle	L tions)
4	Date	5 Full name of contributor Charles Collins	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	250
8	Principal occu	upation / Job title (See Instructions) Real Estate		9 Employer (See Instruction Jones Lang LaSalle	Itions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE	Α1
Th	e Instruction G	Guide explains how to complete	te this form.		1 Total Pages Schedule A1:	
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Stephen Sweet			7 Amount of contributions (\$)	
	10/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	rtions)	
0	Real Estate	pation / 500 title (See Instructions)		Alliance Residential Co.		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Emily Crosswell	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/25/2015		Houston	TX 77057	500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Community vo	olunteer		N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Claire Fonteno			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code	-	
	10/28/2015		Pasadena	CA 91105	250	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Homemaker			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Fayez Sarofim			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code	-	
	10/28/2015		Houston	TX 77010	5000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Investor			Fayez Sarofim & Co.		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Riad Chehlaoui			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	10/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000
8	Principal occu Senior VP	upation / Job title (See Instructions)		9 Employer (See Instruction Wells Fargo Advisors	Letions)
4	Date	5 Full name of contributor  Katherine Treistman	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Susman Godfrey	I ctions)
4	Date	5 Full name of contributor  Cornelia Long	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor  Meredith Long	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Meredith Long Gallery	etions)

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  David Blomstrom	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/28/2015	6 Contributor address;	City; Richmond	State; Zip Code TX 77469	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct Self	tions)
4	Date	5 Full name of contributor Peter Lauzon	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	350
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Peal Processing Inc	L tions)
4	Date	5 Full name of contributor  Valentina Ugolini, M.D.	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	750
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct Methodist Hospital	L tions)
4	Date	5 Full name of contributor  David Martin	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	25
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct NRG Energy	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE A	41
Th	e Instruction G	uide explains how to complete	e this form.		1 Total Pages Schedule A1:	
2 F	FILER NAME B	ill King			3 Filer ID (Ethics Commission filers)	
		Mark Ward			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/28/2015		Houston	TX 77040	1000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Real Estate			Self		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Faye Amini			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/28/2015		Houston	TX 77063	100	
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# )		
		Beirne, Maynard & Parsons, LLP	Ц		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/29/2015		Houston	TX 77056	750	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
		_				
4	Date	5 Full name of contributor  Howard Holsenbeck	out of state	PAC(ID# )	7 Amount of contributions (\$)	
		Tioward Tioisenbeck			Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/29/2015		Houston	TX 77074	300	
8	Principal occu	Pation / Job title (See Instructions)		9 Employer (See Instruc	L tions)	
	Real Estate			Holsenbeck Realty		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Abigail Owen-Pontez			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	10/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction N/A	tions)
4	Date	5 Full name of contributor  Jeffrey Baker	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	25
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Self	I trions)
4	Date	5 Full name of contributor  Anne Dale Owen	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Self	Litions)
4	Date	5 Full name of contributor  Neil M Bremner	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc Bike Barn	otions)

M	ONETARY	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Joel Scott	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City;	State; Zip Code TX 77056	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Leonard Bedell	out of state I	I PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77255	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Mobil Steel	Litions)
4	Date	5 Full name of contributor  Diane Kiecke	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Mary Shindler	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	25
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 A1
Th	e Instruction G	uide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME B	ill King			3 Filer ID (Ethics Commission filers)
		Amy Watkins	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		jDickinson	TX 77539	50
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# )	
		Sharon Roark	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		Houston	TX 77055	100
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# )	
		Ralph Clinard	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		Houston	TX 77082	50
8	Principal occu	Lagranian pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Retired			N/A	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Joan Schnitzer Levy			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		Houston	TX 77019	500
8	Principal occu	Pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Philanthropist			N/A	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Suzanne Page-Pryde			7 Amount of contributions (\$)

MON	ETAR'	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Ins	truction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILEF	R NAME I	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
10/3	0/2015		Houston	TX 77056	100
8 Pi	rincipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4 D:	ate	5 Full name of contributor	out of state	PAC(ID# )	
		Keith Stevenson			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
10/3	0/2015		Houston	TX 77057	500
8 Pi	rincipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
As	sset Manag	ement		Sequent Asset Manager	ment
4 Da	ate	5 Full name of contributor	out of state	PAC(ID# )	
		Guillermo Arriaga	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
10/3	0/2015		Houston	TX 77077	50
8 Pi	rincipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Da	ate	5 Full name of contributor	out of state	PAC(ID# )	
		John Braun			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
10/2	9/2015		Houston	TX 77059	25
8 Pi	rincipal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)

M	ONETARY	POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	uide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor  Amegy Bank of Texas PAC	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City;	State; Zip Code	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Harris James Pappas	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code Tx 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Pappas Bros	tions)
4	Date	5 Full name of contributor  Trish Millard	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	4000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Old Republic Title Comp	
4	Date	5 Full name of contributor Paula Dyer	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	25
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Fred Flickinger			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		Kingwood	TX 77345	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Robert Chovanec	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		Houston	TX 77018	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Director			RPR Products Inc	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Philip Navratil			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/30/2015		Houston	TX 77098	250
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
		leen (	11	DAG(ID(I))	
4	Date	5 Full name of contributor  DHS Investments	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Austin	State; Zip Code TX 78752	200
	10/00/2010		Addin	TX 70702	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		The Brass Maiden	<del></del>		7 Amount of contributions (\$)

M	ONETARY	Y POLITICAL CONTE	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	-
	10/30/2015		Houston	TX 77098	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4	Date	5 Full name of contributor Patricia Gayle Fallon	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instru N/A	ctions)
4	Date	5 Full name of contributor Reginald Wilson Gregory, Jr.	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	2500
8	Principal occu	upation / Job title (See Instructions) Developer		9 Employer (See Instru Robinhood Properties L	
4	Date	5 Full name of contributor  Robert L. McClain	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4	Date	5 Full name of contributor  Robinhood Properties LP Shoppin Center	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	IBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Michael Grivon	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Swiss Garage	Letions)
4	Date	5 Full name of contributor  David Modlin	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77386	1500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Modlin Custom Homes	Letions)
4	Date	5 Full name of contributor  Raymond Hooker	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETAR'	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Carol Cantrell	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/31/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	250
8	Principal occ Attorney	upation / Job title (See Instructions)		9 Employer (See Instruction Cantrell & Cantrell, PLLC	
4	Date	5 Full name of contributor Stanley Jones	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	10/31/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Helen Callier	out of state R	PAC(ID# )	7 Amount of contributions (\$)
	10/31/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77325	150
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Gretchen Reed	out of state f	PAC(ID# )	7 Amount of contributions (\$)
	10/31/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	100
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	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A	1،
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Ed Bosarge	12.2		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/1/2015		Houston	TX 77006	2000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Quantlab Financial	tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		_
		Ellie Francisco			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/2/2015		Houston	TX 77024	100	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Self	I tions)	
4	Date	5 Full name of contributor Sam Gianukos	out of state	PAC(ID# )	7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/2/2015		Houston	TX 77009	100	
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# )		_
		Michael Holthouse			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/2/2015		Houston	TX 77027	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	_
	Entrepreneur			Holthouse Interests		
4	Date	5 Full name of contributor Theresa Wanat	out of state	PAC(ID# )	7 Amount of contributions (\$)	
		i			İ	

M	ONETARY	POLITICAL CONTR	IBUTIONS	3	SCHEDULE A1
Th	e Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77004	25
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	L vitions)
4	Date	5 Full name of contributor  Mary Mischer	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	11/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	I upation / Job title (See Instructions)		9 Employer (See Instruction Mischer Investments	I tions)
4	Date	5 Full name of contributor Walter Mischer	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruc Mischer Investmensts Li	
4	Date	5 Full name of contributor  Harris Construction Co. Ltd.	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77040	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	uide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Bill Gross	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500
8	Principal occu	upation / Job title (See Instructions) sor		9 Employer (See Instruction Wells Fargo	tions)
4	Date	5 Full name of contributor  Larry Buck	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Self	I tions)
4	Date	5 Full name of contributor Fund for the Future	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/3/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Claire Waltrip	out of state	PAC(ID# )	7 Amount of contributions (\$)
	10/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77219	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	3		SCHEDULE	A1
The	e Instruction	Guide explains how to comple	ete this form.		1 Total Pa	ages Schedule A1:	
2 F	ILER NAME	Bill King			3 Filer ID (Ethio	cs Commission filers)	
		Norman Jolly			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/3/2015		Houston	TX 77007		1500	
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# )			
		James T. McSpadden, Jr.	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/3/2015		Houston	TX 77077		100	
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# )			
		Richard Allen	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/4/2015		League City	TX 77573		100	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state F	PAC(ID# )			
		John Arnold			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/4/2015		Houston	TX 77056		5000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Retired			N/A			
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	7	Amount of contributions (f)	
		Ken Arnold			7	Amount of contributions (\$)	

M	MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1							
The	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:					
2 F	ILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)					
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77043	1000			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct K Arnold Cosulting	ctions)			
4	Date	5 Full name of contributor  Laura Arnold	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction N/A	etions)			
4	Date	5 Full name of contributor  Jack Baber	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	200			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I trions)			
4	Date	5 Full name of contributor Gerry Barnett	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	50			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)			

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	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor  Barton Bentley			7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	100
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor nanik bhagia	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; katy	State; Zip Code TX 77450	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Alan Blackburn	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct GulfStar Group	L tions)
4	Date	5 Full name of contributor Steve Blair	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Austin	State; Zip Code TX 78746	5000
8	Principal occ	upation / Job title (See Instructions)  E&P		9 Employer (See Instruction Capitan Energy Inc.	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE	Α1
The	e Instruction	Guide explains how to comple	1 Total	Pages Schedule A1:			
2 F	ILER NAME	Bill King			3 Filer ID (E	thics Commission filers)	
		Jonathan Bode	1		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/4/2015		Houston	TX 77081		50	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Marc Boom			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/4/2015		Bellaire	TX 77401		1000	
8	Principal occ	cupation / Job title (See Instructions) xecutive		9 Employer (See Instruc Methodist Hospital	tions)		
4	Date	5 Full name of contributor Sam Bowen	out of state	PAC(ID# )	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/4/2015		Houston	TX 77098		250	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		FJ Bradford	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/4/2015		Houston	TX 77056		100	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Fred Bullough	_		7	Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	TILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/4/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77339	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	trions)
4	Date	5 Full name of contributor  James Calaway	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Calaway Investments	ations)
4	Date	5 Full name of contributor  Greg Cizik	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	500
8		upation / Job title (See Instructions)  Real Estate Broker		9 Employer (See Instructional Colliers International	tions)
4	Date	5 Full name of contributor  Ralph Clinard	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77082	50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1
The	e Instruction G	Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Rick Cloutier	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Anna Maria	State; Zip Code FL 34216	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Michael Eaker	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4	Date	5 Full name of contributor Travis Fite	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Bradley Freels	out of state F	L PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	2500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct Midway Companies	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction (	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Cody Fulford	,		7 Amount of contributions (\$)
	44/4/0045	6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77008	50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Walter Goff			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77084	250
8	8 Principal occupation / Job title (See Instructions) 9 Employer (See In		9 Employer (See Instruct	I tions)	
	Sales			Self	
4	Date	5 Full name of contributor Leda Goodwin	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		The Woodlands	TX 77380	25
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		William Gordon			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77063	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		1	1 1		1

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A	41
The	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Don Graubart	1		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/4/2015		Houston	TX 77056	500	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc Self-employed	tions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ollabelle Hall			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/4/2015		Houston	TX 77027	100	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Itions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Chris Hanslik	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/4/2015		Houston	TX 77025	250	
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# )		
		Franklin Harberg Jr			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/4/2015		Houston	TX 77027	500	
8	Principal occi	Lupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Attorney			Harberg Huvard Jacobs	Wadler LLP	
4	Date	5 Full name of contributor  James Harris	out of state	PAC(ID# )	7 Amount of contributions (C)	
		James Hains			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code	500
				To = 1 (0 )	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Linebarger, Goggan, Bla	
4	Date	5 Full name of contributor  Michael Hendryx	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Mark Hodges	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Andrews Kurth LLP	I etions)
4	Date	5 Full name of contributor  Ben Hulsey	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occ Retired	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	etions)

M	ONETAR'	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	Instruction C	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME I	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Randal Jones			7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Michael Kitchen	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Santa Fe	State; Zip Code TX 77517	25
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Kathy Klein	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occ			9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  John Landrum	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct AMG Capital	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETARY	POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
The	Instruction G	uide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
	,	Michael Lee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Kingwood	TX 77325	100
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# )	
		Bob Lupher	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77055	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc Lupher LLC	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Karen Martin			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77079	100
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# )	
		Robert Martin	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77062	100
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# )	
		Robert Morse III	_		7 Amount of contributions (\$)

MONE	ETAR	Y POLITICAL CONTR	SCHEDULE A		
The Instr	ruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER	NAME E	Bill King	,		3 Filer ID (Ethics Commission filers)
11/4/	/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	5000
	ncipal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Crain Caton	I otions)
4 Dat	te	5 Full name of contributor Gary Moss	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/4/	2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	250
8 Prii	ncipal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I otions)
4 Dat	te	5 Full name of contributor  Mark Murrah	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/4/	/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	. 50
8 Prii	ncipal occı	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4 Dai	te	5 Full name of contributor  Gary Oradat	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/4/	/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77043	1000
	ncipal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Oradat & Associates PC	

M(	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Imogen Papadopoulos	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Susan Parker	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Camille Reiser	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct Upstream Brokers	tions)
4	Date	5 Full name of contributor Thomas Reiser	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct Upstream Brokers	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONETA	RY POLITICAL CONT	RIBUTION	5	SCHEDULE A1
The Instruction	n Guide explains how to compl	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	E Bill King			3 Filer ID (Ethics Commission filers)
	Beverly Roberts	,		7 Amount of contributions (\$)
11/4/2015	6 Contributor address;	City; Houston	State; Zip Code	300
			-	
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Sunil Sahai			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
11/4/2015		Cypress	TX 77429	25
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Shawn Salyers			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
11/4/2015		Houston	TX 77091	50
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
4 Date	Enrique Santen	U out of state	17.6(12.11)	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
11/4/2015		Houston	TX 77027	50
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Laura Schlameus	Ш		7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Robert Shults	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instructure Lugenbuhl, Wheaton, Pe	
4	Date	5 Full name of contributor Charles Simmons	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77253	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	Letions)
4	Date	5 Full name of contributor Chavonne Slovak	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	5000
8	Principal occ	cupation / Job title (See Instructions)  Coordinator		9 Employer (See Instruction Harris County	I etions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1	
The	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Trent Slovak	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	5000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor  R. John Stanton, Jr.	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Stanton Interests	I tions)	
4	Date	5 Full name of contributor Stuart Stedman	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instructions) Stedman West Interests, Inc.		
4	Date	5 Full name of contributor Terry Townsend	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	50	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )		

MONETAR	Y POLITICAL CONT	ribution	S	SCHEDULE A1
The Instruction	Guide explains how to compl	ete this form.		1 Total Pages Schedule A1:
2 FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	Jeffery Tucker	1		7 Amount of contributions (\$)
11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100
8 Principal oc	cupation / Job title (See Instructions)	1	9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor C. Nicolas Verburgt	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	. 150
8 Principal oc	L cupation / Job title (See Instructions)	<u> </u>	9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor  Jonathan Wasserberg	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000
8 Principal oc Owner	cupation / Job title (See Instructions)	1	9 Employer (See Instruc Waterhill Companies Lin	
4 Date	5 Full name of contributor  Jim Weston	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	. 50
8 Principal oc	cupation / Job title (See Instructions)	·	9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor  Norman Wigington	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	IBUTION	S	SCHEDULE A1
The	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Jim Windham	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	1000
8	Principal occ	cupation / Job title (See Instructions)  Advisor		9 Employer (See Instruction Windham Capital Advisor	
4	Date	5 Full name of contributor  Douglas Atnipp	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Greenberg Traurig	I tions)
4	Date	5 Full name of contributor  Lauren Bednar	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	. 25
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		David Dunlap		. ,	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77057	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
	Attorney			Jackson Walker LLP	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Paul Dunphey			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77021	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
	President			Dunphey Petroleum Serv	rices, Inc.
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		The Furst Group-Real Estate Services			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77048	75
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Richard Haass			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		San Antonio	TX 78258	1500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	ions)
	СТО			Linebarger, Goggan, Bla	ir & Sampson

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	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Jay Karahan	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code	50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Pedro Lagos	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	35
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Ralph Love	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	50
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Doug McMurrey	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	50
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 CONTR	RIBUTION	S	SCHEDULE A1
The	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Walter Mischer	1		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77046	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Investing			Mischer Investments, L.F	o.
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Greg Nelson			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77002	2000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	Lions)
	Partner			Paul Hasting LLP	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Norton Rose Fulbright US LLP Texas Committee	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77010	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Staman Ogilvie	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX 77056	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	EVP			Hines	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONETA	ARY POLITICAL CONT	ribution:	8	SCHEDULE A1
The Instructi	on Guide explains how to compl	1 Total Pages Schedule A1:		
2 FILER NAI	ME Bill King			3 Filer ID (Ethics Commission filers)
	ART PEABODY			7 Amount of contributions (\$)
11/5/2015	6 Contributor address;	City; HOUSTON	State; Zip Code TX 77056	100
8 Principa	I al occupation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4 Date	5 Full name of contributor Rick Russler	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	500
8 Principa Treasur	I occupation / Job title (See Instructions)		9 Employer (See Instruction Willbros	I tions)
4 Date	5 Full name of contributor  Jim R. Smith	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8 Principa Chairma	I al occupation / Job title (See Instructions)		9 Employer (See Instruction Smithco Development	Letions)
4 Date	5 Full name of contributor Sherry Smith	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
	al occupation / Job title (See Instructions) nity Volunteer		9 Employer (See Instruction N/A	Litions)
4 Date	5 Full name of contributor Ron Woods	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	100
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Michael Bell	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	. 50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Daniel L. Boggio	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruction PBK	Letions)
4	Date	5 Full name of contributor  Robert Carney	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Publications, In	

M	ONETAR'	Y POLITICAL CONT	RIBUTIONS	8	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Steven Finkelman	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	500
8	Principal occ Apparel Man	upation / Job title (See Instructions) ufacturing		9 Employer (See Instruct Scope Imports, Inc.	tions)
4	Date	5 Full name of contributor  HA Forouzan	out of state F	L PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	1000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Gupta & Associates	I tions)
4	Date	5 Full name of contributor  Vesta Gaubert	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77379	500
8	Principal occ			9 Employer (See Instructives Rea & Associates	
4	Date	5 Full name of contributor  Robert Haworth	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77004	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Victoria Lea Herrin			7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Lawrence Kagan	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occ	eupation / Job title (See Instructions)  Real Estate		9 Employer (See Instruc Kagan Realty Investors	I tions)
4	Date	5 Full name of contributor Thomas Kelsey	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Attorney	Letions)
4	Date	5 Full name of contributor  Luz Ortiz	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Natixis	L trions)
4	Date	5 Full name of contributor  John Knox	out of state	PAC(ID# )	7 Amount of contributions (\$)

М	ONETAR	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Kemah	TX 77565	100
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Katherine Krehbiel			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77098	250
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I utions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Max Levit	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77027	5000
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Real Estate			2ML Real Estate Interes	sts, Inc.
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Rochelle Levit			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/6/2015		Houston	TX 77027	5000
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Psychologis	st		Self	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Hunter L. Martin, Jr.	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Don McAdams	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Center for Reform of Sch	
4	Date	5 Full name of contributor  Dan Moody, Jr.	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	1000
8	Principal occu			9 Employer (See Instruct Moody Rambin	Litions)
4	Date	5 Full name of contributor Christina Moore	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	lions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDU	JLE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Sally Nelson	-		7 Amount of contributions (	\$)
		6 Contributor address;	City;	State; Zip Code		
	11/6/2015		Huntsville	TX 77340	100	
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# )		
		Larry Neuhaus	Ш		7 Amount of contributions (	\$)
		6 Contributor address;	City;	State; Zip Code		
	11/6/2015		Houston	TX 77056	2000	
8	Principal occu	upation / Job title (See Instructions)  Management		9 Employer (See Instruction Newhouse Investment	Litions)	
4	Date	5 Full name of contributor  Lynn Russell	out of state	PAC(ID# )	7 Amount of contributions (	\$)
		6 Contributor address;	City;	State; Zip Code		
	11/6/2015		Houston	TX 77057	500	
8	Principal occi Real Estate	upation / Job title (See Instructions)		9 Employer (See Instruction Greenwood King Properties)		
4	Date	5 Full name of contributor BJ SHELL	out of state	PAC(ID# )	7 Amount of contributions (	\$)
		6 Contributor address;	City;	State; Zip Code		
	11/6/2015		HOUSTON	TX 77007	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Neal Hamil Agency	Litions)	
4	Date	5 Full name of contributor  B. Douglas Simpkins	out of state	PAC(ID# )	7 Amount of contributions (	\$)

M	ONETAR	RY POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code	1000
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	Chairman a	and CEO		Simpkins Group	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		W Singleton	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/6/2015		Houston	TX 77098	100
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Peggy B. Smith	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77046	100
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Frank C. Smith, Jr.	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77056	5000
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Retired			N/A	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Cynthia Stevenson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Donald Stevenson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	[ tions)
4	Date	5 Full name of contributor  D.C. Ullrich	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	101
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Sid Weiss	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8		cupation / Job title (See Instructions)  Management		9 Employer (See Instruction Weiss Realty Group	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King	. ,		3 Filer ID (Ethics Commission filers)
		J. Frederick Welling			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77007	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Real Estate			Fred Welling and Sons	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Kenneth Williams			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77008	50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Shelley Wisner			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	TX 77024	200
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		George Farish			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/7/2015		Houston	TX 77256	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
•		Lynn Sherrill		, ,	7 Amount of contributions (\$)

M	ONETAF	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	TILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/7/2015	6 Contributor address;	City; Kingwood	State; Zip Code	31.5
	11/1/2013		Kingwood	17/1/339	31.3
8	Principal od	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Ted Dom			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/8/2015		Houston	TX 77019	100
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I trions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Steven Larimore			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/8/2015		Houston	TX 77077	150
8	Principal oc	Ccupation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Andrews & Kurth LLP			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77002	5000
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  John Barineau	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Radney Management	tions)
4	Date	5 Full name of contributor  Mark Brown	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	200
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Richard Carlson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  Jean Hancock Chernosky	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	300
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE	A1
Th	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		James Crownover			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/9/2015		Houston	TX 77010	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Retired			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		James Davidson			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/9/2015		Houston	TX 77024	50	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Mischelle Foss	Ш		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/9/2015		Houston	TX 77042	200	
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# )		
		Antonio Grijalva			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/9/2015		Houston	TX 77055	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
	CEO			G&A Partners		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		David Grimes	_		7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction (	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	5000
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruction TortSmart, LLC	Letions)
4	Date	5 Full name of contributor Windi Grimes	out of state		7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	5000
8	Principal occ	supation / Job title (See Instructions)  Volunteer		9 Employer (See Instruc	I stions)
4	Date	5 Full name of contributor Frank Law	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	500
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc Allegiance Bank	I tions)
4	Date	5 Full name of contributor  Donna Merola	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77036	30
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETARY	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	Instruction G	Guide explains how to complete	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Harvin Moore	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Space Services Inc.	tions)
4	Date	5 Full name of contributor Richard Nelson	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Dana OÕBrien	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction CenterPoint Energy	Litions)
4	Date	5 Full name of contributor Clive Runnells	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77227	750
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	8	SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Mary Ann Smith			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77062	25
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	
		Macedonio Villarreal	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Sugar Land	TX 77479	5000
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruc Precision Task Group, Ir	
	<u> </u>			Frecision Task Group, ii	
4	Date	5 Full name of contributor Richard Weekley	out of state F	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77055	5000
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Real Estate			Weekley Properties	
4	Date	5 Full name of contributor  Meg Weekley	out of state F	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/9/2015		Houston	TX 77055	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	Litions)
4	Date	5 Full name of contributor  Donna Wilson	out of state F	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME Bill King					3 Filer ID (Ethics Commission filers)
	11/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Martha Turner Sotheby	
4	Date	5 Full name of contributor  Norman Adams	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Adams Insurance Service	
4	Date	5 Full name of contributor Sidney Adger	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	. 50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I otions)
4	Date	5 Full name of contributor Tom Allen	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	500
8		upation / Job title (See Instructions)  nt City Attorney		9 Employer (See Instruc City of Houston	otions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Thomas Arcidiacono	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77220	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Start Trucking, Inc.	tions)
4	Date	5 Full name of contributor Harold Armstrong	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Armstrong/Weatherly As	
4	Date	5 Full name of contributor Terry Baca	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Susan G. Baker	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	2000
8	Principal occu	upation / Job title (See Instructions) /olunteer		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		Allen J. Becker	-		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77056	2500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct PACE Entertainment	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Allen J. Becker	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77056	2500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct PACE Entertainment	I tions)
4	Date	5 Full name of contributor Richard Berry	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Magnolia	TX 77355	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4	Date	5 Full name of contributor Richard Berry	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Magnolia	TX 77355	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct N/A	I tions)
4	Date	5 Full name of contributor  Susan Bischoff	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/10/2015	6 Contributor address;	City;	State; Zip Code	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	otions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Holly Blair			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77254	150
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Patrick Canterbury	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77027	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
	President			Hibernia Resources	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Robyn Lee Canterbury			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77027	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Homemaker			N/A	

M	ONETARY	POLITICAL CONTI	RIBUTIONS	3	SCHEDULE A1
Th	e Instruction G	duide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor DON CLOVER	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; RICHMOND	State; Zip Code TX 77469	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Clover Tool	tions)
4	Date	5 Full name of contributor  Kent Cook	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Ross M. Davis	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Davis Holdings, LP	L tions)
4	Date	5 Full name of contributor  Jerry H. Deutser	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	2000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Deutser & Weil	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHE	DULE A1
Th	e Instruction G	uide explains how to comple	te this form.		1 Total Pages Schedule A1	1:
2 F	FILER NAME B	ill King			3 Filer ID (Ethics Commission filers)	
		John H. Duncan, Jr.	<del></del>		7 Amount of contribution	ons (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77024	2500	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
	Chairman			Title Houston Holdings		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		David Dunwoody			7 Amount of contribution	ons (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77002	100	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Philip Easterling			7 Amount of contribution	ons (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77056	100	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
	Software Syst	ems Engineer		SAS Institute		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		John Ebeling			7 Amount of contributio	ns (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77024	2500	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
	retired			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Robert Esenwein			7 Amount of contribution	ns (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/10/2015	6 Contributor address;	City; Hockley	State; Zip Code TX 77447	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Cardno	tions)
4	Date	5 Full name of contributor  Patti Everett	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occ	cupation / Job title (See Instructions) volunteer		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  C. Richard Everett	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Daniel Fishman	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77071	. 18
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ztions)

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	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Dan Fleckman	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  David Foyt	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	150
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Bill Freeman	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77345	150
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  E. French	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77255	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Equities Realty	I tions)
4	Date 5 Full name of contributor out of state PAC(ID# )				

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A	ւ1
Th	e Instruction G	duide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)	
		Cheryl Gajeske			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77077	5000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	_
	Architect			PGAL		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		_
		Kelly Gerland			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77018	200	
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# )		
		Malcolm Gibson			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77027	2500	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	_
	Attorney			MD Gibson & Associates	s, PC	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Leon Goldstein			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77056	2000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	_
	Retired			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		_
		Meredith Griffis			7 Amount of contributions (\$)	

M	ONETAR	RY POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King	3 Filer ID (Ethics Commission filers)		
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77079	100
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	trions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Patricia Hair			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77019	100
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Thomas Harper III			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77027	1000
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	Retired			N/A	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Michael Hays			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77027	300
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	

M	ONETARY	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor William Helms	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct BBVA Compass	tions)
4	Date	5 Full name of contributor  Robert Herrin III	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Kenneth Jacobson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	1000
8	Principal occu	cupation / Job title (See Instructions)		9 Employer (See Instruction Hometrust Mortgage Co.	
4	Date	5 Full name of contributor  E.M. Jonesi	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Marvin Kaplan			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77056	1000
8	Principal occ	Loupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
	Retired			N/A	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Albert Keller			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Katy	TX 77450	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	Energy			BP America	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Deborah Korenek	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	11/10/2015		Houston	TX 77095	200
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Natalie Letterman			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Hockley	TX 77447	100
8	Principal occ	Cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
7	_ 5.0	Bob Lewis		- ( )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
The	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Pearland	TX 77581	25
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Tracie Lane Logan			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77059	10
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Brenda Mabry	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77024	25
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Beth Madison			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77056	1000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Managing Dir	rector		Higginbotham & Associa	ates

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction (	Guide explains how to comple		1 Total Pages Schedule A1:	
2 F	ILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Edward McAllister	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City;	State; Zip Code	50
				To 5	
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Jerry McClain	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	50
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Kent McGaughy	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  James McGrath	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc Begala-McGrath LLC	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		A.W. Downing Mears, Jr.			7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code	1000
				_	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Mosbacher Power Amer	
4	Date	5 Full name of contributor  Donna Merola	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77036	25
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I trions)
4	Date	5 Full name of contributor  L.R. Merola	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77036	. 25
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ptions)
4	Date	5 Full name of contributor  John Merrill	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	200
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ptions)
4	Date	5 Full name of contributor  Eunice Meyer	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	. 250
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor  Dick Milstead	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77386	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Milstead Group	I ctions)
4	Date	5 Full name of contributor  Denman Moody	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	<b>.</b> 50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor Thomas Moore	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	otions)

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Moe Naraghi	П		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77024	200
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	Γ
•		Walter Nelson		- (	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		The Woodlands	TX 77381	2500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Real Estate	Development		Newland Real Estate Gr	oup
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		TONY NGUYEN	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		HOUSTON	TX 77206	50
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# )	
		Anne Dale Owen	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77056	2500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Investor			Self	

M	ONETARY	POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1	
The	e Instruction G	duide explains how to complete	te this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Patrick Oxford	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Bracewell & Giuliani LLP		
4	Date	5 Full name of contributor  Jeanine Piskurich	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct BP America	L tions)	
4	Date	5 Full name of contributor George Pontikes	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77041	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instructions) Satterfield Pontikes		
4	Date	5 Full name of contributor  David Powers	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Richmond	State; Zip Code TX 77406	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Homes By David Powers		
4	Date	5 Full name of contributor	out of state F	PAC(ID# )		

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	6	SCHEDULE A1
The	e Instruction (	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Robert Rada			7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City;	State; Zip Code SC 29928	300
			Island		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Graham Ramsay			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Houston	TX 77091	25
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Jean Rauckman	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Kemah	TX 77565	250
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Human Reso	purces		Ricetec	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Chris Richardson	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/10/2015		Hempstead	TX 7745	500
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Attorney			Strawn & Richardson, Po	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETARY	Y POLITICAL CONT	RIBUTION	S	SCHEDULI	E A1
Th	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Aaron Scheffler			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77008	200	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Diamond Offshore	Lions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Charles Schneider	Ц		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Pearland	TX 77581	100	
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# )		
		Dan Silvestri	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77055	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Lions)	
	Real Estate Ir	nvestment		Silvestri Investments		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Sue Sloan			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/10/2015		Houston	TX 77074	100	
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# )		
		Stephen Smith			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 I	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	. 15
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Lon Stern	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	50
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor Wade Taylor	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  James Tribble	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc Tribble & Stephens Con	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1	
Th	e Instruction (	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:	
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Bill Turner	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code	100	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor Cindy Vincent	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77345	50	
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)	
4	Date	5 Full name of contributor  Michael Vitek	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	100	
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor  Jim Walzel	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	250	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )		

M	ONETAR	Y POLITICAL CONTR	IBUTIONS	3		SCHEDULE	A1
Th	ne Instruction Guide explains how to complete this form.					ages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Eth	ics Commission filers)	
		Robert Watson			7	Amount of contributions (\$)	
	11/10/2015	6 Contributor address;	City; Montgomery	State; Zip Code		500	
	11/10/2013		Montgomery	17 77330		300	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Self	tions)		
4	Date	5 Full name of contributor	out of state F	PAC(ID# )			
		Wayne Webb	Ц		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/10/2015		Houston	TX 77059		250	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)		
4	Date	5 Full name of contributor	out of state F	PAC(ID# )			
		Linda Webster			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/10/2015		Houston	TX 77002		5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Community V	olunteer		N/A			
4	Date	5 Full name of contributor	out of state F	PAC(ID# )			
		Steven Webster			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/10/2015		Houston	TX 77002		5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Investor			Avista Capital Partner			
4	Date	5 Full name of contributor	out of state F	PAC(ID# )			
		S. Conrad Weil, Jr.			7	Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Bill King	3 Filer ID (Ethics Commission filers)		
	11/10/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Real Estate a	and Investments		Self	
4	Date	5 Full name of contributor nancy woods	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/10/2015	6 Contributor address;	City; houston	State; Zip Code TX 77077	. 20
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor Tim Austin	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	. 50
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Peregrine Oil & Gas LLC	,
4	Date	5 Full name of contributor Bradley Bailey	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77207	1500
8		upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Electricity & L	ighting Distribution		Lighting Inc.	

M	ONETARY	POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
Th	e Instruction G	uide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor out of state PAC Alberto Cardenas		PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code	50
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Ernest Cockrell	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Cockrell Interests	I tions)
4	Date	5 Full name of contributor  James Dannenbaum	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Dannenbaum Engineering)	,
4	Date	5 Full name of contributor  Jeff Dinerstein	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Jones Day	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A	<b>41</b>
Th	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)			
		Ron Drees	1		7 Amount of contributions (\$)	_
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	50	
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# )		
		Nijad Fares	_		7 Amount of contributions (\$)	
	11/11/2015	6 Contributor address;	City;	State; Zip Code	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	ctions)	
4	Date	5 Full name of contributor Bradley Fish	out of state	PAC(ID# )	7 Amount of contributions (\$)	
	11/11/2015	6 Contributor address;	City;	State; Zip Code	5000	
	11/11/2015		Houston	17 77001	3000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Sullair of Houston	ctions)	
4	Date	5 Full name of contributor Steve Goodman	out of state	PAC(ID# )	7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/11/2015		Houston	TX 77056	2500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Goodman Financial Cor		
4	Date	5 Full name of contributor  Melinda Hildebrand	out of state	PAC(ID# )	7 Amount of contributions (\$)	

M	ONETAR'	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	ne Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 I	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77251	5000
8	Principal occ	upation / Job title (See Instructions) /olunteer		9 Employer (See Instruc	ptions)
4	Date	5 Full name of contributor  David B. Jones	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Dinispheris	I etions)
4	Date	5 Full name of contributor  Joan Levy	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occ	upation / Job title (See Instructions) t		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor Andrew Lopez	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77017	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction (	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor out of state PAC(ID# )  Evelyn Merz		PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77061	100
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Charles Neath	out of state		7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct John Daugherty Realtors	
4	Date	5 Full name of contributor  Edwin J. Roland	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	25
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Matthew Rotan	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	2500
8	Principal occ	upation / Job title (See Instructions) visory		9 Employer (See Instruct ARA Newmark	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MC	NETARY	POLITICAL CONTR	RIBUTION	S		SCHEDULE A1
The	Instruction G	uide explains how to complete	1 Total Pages S	chedule A1:		
2 FI	LER NAME B	ill King			3 Filer ID (Ethics Comr	mission filers)
		William Sherrill			7 Amount	t of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/11/2015		Houston	TX 77429		1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Electrical cont	racting		SECO Industrial		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Thomas Simmons	_		7 Amount	t of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/11/2015		Houston	TX 77056		2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Executive con	sulting		Spencer Stuart		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		keith stevenson			7 Amount	t of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/11/2015		Houston	TX 77057		5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Asset Manage	ement		Sequent Asset Managen	nent	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Patricia Sturdivant			7 Amount	t of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/11/2015		Houston	TX 77007		100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Nick Swyka			7 Amount	t of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Bill King	3 Filer ID (Ethics Commission filers)		
	11/11/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occ Retired	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	etions)
4	Date	5 Full name of contributor  Mickey Altman	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	1000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Viva Cinema	I trions)
4	Date	5 Full name of contributor Sanford Aron	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Hunington Properties, In	,
4	Date	5 Full name of contributor  John R. Blocker, Jr.	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occ Energy	upation / Job title (See Instructions)		9 Employer (See Instruction Blocker Energy	etions)

M	ONETARY	POLITICAL CONTI	RIE	BUTIONS	5		SCHEDULE A1
The	he Instruction Guide explains how to complete this form.					1	Total Pages Schedule A1:
2 F	ILER NAME E	Bill King				3 File	er ID (Ethics Commission filers)
		5 Full name of contributor  Bracewell & Giuliani Committee		out of state P	AC(ID# )	7	Amount of contributions (\$)
	11/12/2015	6 Contributor address;		City; Houston	State; Zip Code TX 77002		5000
8	Principal occu	upation / Job title (See Instructions)			9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor Stephen Brice		out of state P	PAC(ID# )	7	Amount of contributions (\$)
	11/12/2015	6 Contributor address;		City; Houston	State; Zip Code TX 77027		500
8	Principal occu	upation / Job title (See Instructions)			9 Employer (See Instruct Brice Company	tions)	
4	Date	5 Full name of contributor Paul Broussard		out of state P	PAC(ID# )	7	Amount of contributions (\$)
	11/12/2015	6 Contributor address;		City; Houston	State; Zip Code TX 77056		1500
8	·	upation / Job title (See Instructions) portation Logistics			9 Employer (See Instruct Broussard Logistics	tions)	
4	Date	5 Full name of contributor john cabaniss	L	out of state P	I PAC(ID# )	7	Amount of contributions (\$)
	11/12/2015	6 Contributor address;		City; houston	State; Zip Code TX 77057		500
8	Principal occu	upation / Job title (See Instructions)			9 Employer (See Instruct Andrews Kurth	tions)	
4	Date	5 Full name of contributor	×	out of state P	AC(ID# 506733 )		

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	3	SCHEDULE A	41
Th	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Cadence Bank, NA PAC			7 Amount of contributions (\$)	
	11/12/2015	6 Contributor address;	City; Birmingham	State; Zip Code AL 35203	2500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )		
		W. Patrick Cantrell	Ц		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/12/2015		Houston	TX 77019	500	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Attorney			Cantrell & Cantrell, PLLC	C	
4	Date	5 Full name of contributor  Daniel Clinton	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/12/2015		Houston	TX 77024	500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Retired			N/A		
4	Date	5 Full name of contributor  Heidi Dugan	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/12/2015		Houston	TX 77005	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Real Estate A	Agent		Greenwood King		
4	Date	5 Full name of contributor Holloway Frost	out of state F	PAC(ID# )	7 Amount of contributions (\$)	

MONE	TARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Instru	uction Gu	uide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER N	NAME Bi	ill King			3 Filer ID (Ethics Commission filers)
44/40/5	2045	6 Contributor address;	City;	State; Zip Code	5000
11/12/2	2015		Houston	TX 77001	5000
8 Princ Retir		pation / Job title (See Instructions)		9 Employer (See Instruct N/A	I tions)
4 Date	)	5 Full name of contributor Claus Gundlach	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/12/2		6 Contributor address;	City; Houston	State; Zip Code TX 77056	500
	cipal occup	pation / Job title (See Instructions)		9 Employer (See Instruct Salzgitter Mannesmann	
4 Date	)	5 Full name of contributor  John Hartman	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/12/2		6 Contributor address;	City; Houston	State; Zip Code TX 77007	150
8 Princ	cipal occup	pation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4 Date	)	5 Full name of contributor Jeffrey Kent Hill	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/12/2		6 Contributor address;	City; Houston	State; Zip Code TX 77055	1000
	cipal occup	pation / Job title (See Instructions)		9 Employer (See Instruct Texan Floor Service	tions)
4 Date	•	5 Full name of contributor  Houston Associated General Contractors PAC	out of state	PAC(ID# )	7 Amount of contributions (\$)

MONETA	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Instruction	n Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAM	E Bill King			3 Filer ID (Ethics Commission filers)
	6 Contributor address;	City;	State; Zip Code	
11/12/2015		Houston	TX 77092	5000
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	IEC Texas Gulf Coast PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/12/2015		Houston	TX 77007	10000
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	John Kirksey	Ц		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
11/12/2015		Houston	TX 77019	2000
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Architectu	re		Kirksey Architecture	
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Truett Latimer			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	•
11/12/2015		Houston	TX 77027	250
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Klinka Lollar	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  John McMahan	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Higman Marine Services	
4	Date	5 Full name of contributor  Robert McNair	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77054	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instructions) Houston Texans	
4	Date	5 Full name of contributor  Janice McNair	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions) /olunteer		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONTR	IBUTIONS	3	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
		Trinidad Mendenhall			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/12/2015		Houston	TX 77098	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Investor			Self	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Edward Rammrath			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/12/2015		Houston	TX 77007	500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Real Estate [	Development		Rammrath Realty Ventu	res
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Sorthern Producers Services LLC			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/12/2015		Houston	TX 77024	500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Nancy Spitler	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/12/2015		Houston	TX 77063	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Retired			N/A	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Antonio Villarreal	_		7 Amount of contributions (\$)

M	ONETAR'	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	30
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	1
		Kathaleen Wall	П		7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77001	5000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction N/A	I etions)
4	Date	5 Full name of contributor  Lorine Wallace	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor  Kane C. Weiner	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77256	2000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc Texas Crude Energy Inc	

MONETAI	RY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
The Instruction	Guide explains how to complete this form.	1 Total Pages Schedule A1:	
2 FILER NAMI	E Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor out of s	state PAC(ID# )	
	Chris Williams		7 Amount of contributions (\$)
	6 Contributor address; City;	State; Zip Code	-
11/12/2015	Houston	TX 77079	250
8 Principal c	ccupation / Job title (See Instructions)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor out of s	state PAC(ID# )	
	Associated Builders & Contractors of Greater Houston PAC		7 Amount of contributions (\$)
	6 Contributor address; City;	State; Zip Code	-
11/13/2015	Houston	TX 77098	10000
8 Principal o	Ccupation / Job title (See Instructions)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor out of s	state PAC(ID# )	
	Leonard Bedell		7 Amount of contributions (\$)
	6 Contributor address; City;	State; Zip Code	-
11/13/2015	Houston	TX 77255	500
8 Principal o	ccupation / Job title (See Instructions)	9 Employer (See Instru	ctions)
Steel frabr	ication	Mobil Steel	
4 Date	5 Full name of contributor out of s	state PAC(ID# )	
	Jean Hancock Chernosky		7 Amount of contributions (\$)
	6 Contributor address; City;	State; Zip Code	-
11/13/2015	Houston	TX 77007	2500
8 Principal o	ccupation / Job title (See Instructions)	9 Employer (See Instru	ctions)
Retired		N/A	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Raymond Chilton	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Ralph Clinard	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77082	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  John Dillman	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	200
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Tyson Dunn	out of state I	I PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77010	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Dunn Exploration Compa	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1
Th	e Instruction G	uide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
		Alan Feinsilver	-		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/13/2015		Houston	TX 77056	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc Self	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Laura Freudenberger			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/13/2015		Houston	TX 77096	200
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Paul W. Hobby			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/13/2015		Houston	TX 77019	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Managing Par	rtner		Genesis Park	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Brian S. Holt			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/13/2015		Washington	TX 77880	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	President			Wwatertech, Inc.	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		David Hoyer, Jr.			7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc Self	etions)
4	Date	5 Full name of contributor  David Kaiser	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Self	I ctions)
4	Date	5 Full name of contributor  Deborah Keyser	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	2000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Attorney	I ctions)
4	Date	5 Full name of contributor  John Lodge III	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77213	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Lodge Lumber Co., Inc.	otions)

M	ONETARY	POLITICAL CONT	RIBUTIO	NS	SCHEDULE A1
Th	e Instruction G	uide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Beth Madison	out of st	ate PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	4000
8	Principal occu	pation / Job title (See Instructions) ector		9 Employer (See Instruc Higginbotham & Associa	
4	Date	5 Full name of contributor  Robert McDowell	out of st	ate PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	250
8	Principal occu	pation / Job title (See Instructions) ces		9 Employer (See Instruc W. M. Dewey & Son, Inc	
4	Date	5 Full name of contributor  Darl Petty	out of st	ate PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77030	200
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I vitions)
4	Date	5 Full name of contributor Kevin Roberts	out of st	ate PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1300
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc Transwestern	I tions)
4	Date	5 Full name of contributor	out of st	ate PAC(ID# )	

M	ONETARY	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
		Dick Rogers	,		7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
	Dringinglood	unation / lab title (Coe Instructions)		O Employer (See Instrue	tions)
8	Retired	upation / Job title (See Instructions)		9 Employer (See Instruc	aions)
4	Date	5 Full name of contributor  Manuel Sanchez III	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc CB&I	I tions)
4	Date	5 Full name of contributor Fred Swerdlin	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	111.11
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Rob Todd	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Amplified Solutions	I tions)
4	Date	5 Full name of contributor Kathleen Yates	out of state I	PAC(ID# )	7 Amount of contributions (\$)

MONETAR	Y POLITICAL CONTR	SCHEDULE A1		
The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
11/13/2015	6 Contributor address;	City; Houston	State; Zip Code	200
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Gary Crum	Ь		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/14/2015		Houston	TX 77019	5000
8 Principal oc Retired	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	I etions)
4 Date	5 Full name of contributor  Sylvie Crum	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/14/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8 Principal oc Retired	ccupation / Job title (See Instructions)		9 Employer (See Instruc N/A	I utions)
4 Date	5 Full name of contributor  Dana Cutts	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/14/2015	6 Contributor address;	City; Houston	State; Zip Code	100
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETARY	POLITICAL CONT	RIBUTIONS	3	SCHEDULE A1
The	Instruction G	duide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Nancy Kinder	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/14/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction	l tions)
4	Date	5 Full name of contributor Richard Kinder	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/14/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	I upation / Job title (See Instructions) airman		9 Employer (See Instruct Kinder Morgan	I tions)
4	Date	5 Full name of contributor Stephen Adger	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occu Sr. Sales Rep	upation / Job title (See Instructions) presentative		9 Employer (See Instructions) RR Donnelley	
4	Date	5 Full name of contributor Ramsay Elder	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

MC	ONETARY	POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
The	Instruction G	uide explains how to complet	1 Total Pages Schedule A1:		
2 F	LER NAME B	ill King			3 Filer ID (Ethics Commission filers)
		Stephen Esses			7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Self	tions)
4	Date	5 Full name of contributor Edward Goldsberry	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	100
8	Principal occu	Legation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4	Date	5 Full name of contributor Miguel Hernandez, Jr	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Seabrook	State; Zip Code TX 77586	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Bastion Technologies	Letions)
4	Date	5 Full name of contributor  Alan Hill	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc N/A	I etions)
4	Date	5 Full name of contributor Patricia Holmes	out of state	PAC(ID# )	7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONT	RIBUTION	IS	SCHEDULE A1
The Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
11/15/2015	6 Contributor address;	City; Houston	State; Zip Code	500
8 Principal oo Retired	ccupation / Job title (See Instructions)		9 Employer (See Instruc N/A	ctions)
4 Date	5 Full name of contributor Charles Miller	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Retired			N/A	
4 Date	5 Full name of contributor  Dan Montgomery	out of state	e PAC(ID# )	7 Amount of contributions (\$)
11/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	50
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor  Jason Austin	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	500
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Corporate A	Attorney		GDF SUEZ Energy	
4 Date	5 Full name of contributor  Michael J. Bagstad	out of state	e PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	City: State: Zip Code Houston TX 77005  City: State: Zip Code The TX 77005  City: State: Zip Code Houston TX 77005  City: State: Zip Code Houston TX 77008  City: State: Zip Code Richmond TX 77469  100		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015			TX 77380	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	Engineering			Zarinkelk Engineering S	Services
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Drew Berkman			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	11/16/2015		Houston	TX 77005	250
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instru	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		James Brett Binkley			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	11/16/2015		Houston	TX 77008	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	Engineer			Binkley & Barfield	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		David Blomstrom	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	11/16/2015		Richmond	TX 77469	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)

M	ONETARY	POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	uide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Peck Boswell	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77040	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction BRH-Garver Construction	
4	Date	5 Full name of contributor  Lyda Boyer	out of state R	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77065	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Self	I tions)
4	Date	5 Full name of contributor  Mark Boyer	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77064	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Boyer, Inc.	I tions)
4	Date	5 Full name of contributor  James Braniff III	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Arthur Gallagher Risk Ma	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTION	S		SCHEDULE A	1،
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Tota	al Pages Schedule A1:	
2 F	FILER NAME B	Bill King			3 Filer ID (	(Ethics Commission filers)	
		Alan Jeffrey Bricker			7	Amount of contributions (\$)	\1
		6 Contributor address;	City;	State; Zip Code			
	11/16/2015		Houston	TX 77071		5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		_
	Principal			Page Southerland Page,	, Inc.		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		Clyde Burleson	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/16/2015		Houston	TX 77027		100	
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# )			_
		David Carter			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/16/2015		Cypress	TX 77429		1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		_
	Real estate			Colliers Realty			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Paul Chapman			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/16/2015		Houston	TX 77019		1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		_
	Director			Human Capital			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		Cecil Conner			7	Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor O.H. Crosswell	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	5000
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc Griggs Corp.	Letions)
4	Date	5 Full name of contributor Harry H. Cullen	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77253	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction HHC Exploration, Inc.	Letions)
4	Date	5 Full name of contributor Rosanette S. Cullen	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77253	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	etions)

M	ONETARY	POLITICAL CONTR	RIBUTIONS		SCHEDULE A1
The	The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King		3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Randall Curry	out of state P	AC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct DBR Engineering Consu	
4	Date	5 Full name of contributor Adi Dajani	out of state P	I AC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4	Date	5 Full name of contributor Fred Dally	out of state P	AC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77459	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4	Date	5 Full name of contributor Louis DelHomme, Jr.	out of state P	AC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Louis DelHomme Marine	
4	Date	5 Full name of contributor	out of state P	AC(ID# )	

MONEI	ARY POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Real estate finance  Grandbridge Real Estate  Date  5 Full name of contributor  Connie Dyer  6 Contributor address;  City;  State;  Zip Code  11/16/2015	1 Total Pages Schedule A1:			
2 FILER N	AME Bill King			3 Filer ID (Ethics Commission filers)
	Willis Dunkum III			7 Amount of contributions (\$)
11/16/20				1000
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Real	estate finance		Grandbridge Real Estate	e
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Connie Dyer			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/16/20	115	Houston	TX 77024	500
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	Lions)
Comm	nunity Volunteer		N/A	
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Truman C. Edminster III	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/16/20	115	Houston	TX 77006	5000
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Engin	eer		EHRA	
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Alan S. Finger			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/16/20	15	Houston	TX 77024	200
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Nicholas Florescu			7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FILER NAME Bill King  6 Contributor address; City: State: Zip Code 11/16/2015  8 Principal occupation / Job title (See Instructions) CEO  4 Date 5 Full name of contributor Lorn Frazier, Jr. 6 Contributor address; City: State: Zip Code Houston TX 77037  7  6 Contributor address; City: State: Zip Code Houston TX 77037  8 Principal occupation / Job title (See Instructions) Contractor  4 Date 5 Full name of contributor Contractor  6 Contributor address: City: State: Zip Code Houston TX 77037  7  6 Contractor  6 Contributor address: Out of state PAC(ID# )  7  6 Contributor address: City: State: Zip Code Houston TX 77056  8 Principal occupation / Job title (See Instructions) Full name of contributor Full name of con	3 Filer ID (Ethics Commission filers)				
	11/16/2015	6 Contributor address;		•	2500
8		upation / Job title (See Instructions)			I:tions)
4	Date		out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;		•	2500
8		upation / Job title (See Instructions)			Itions)
4	Date		out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;		,	250
8		upation / Job title (See Instructions)			I:tions)
4	Date	5 Full name of contributor  Cynthia Fremaux	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	200
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	utions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	8	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King		3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor C.M. Garver	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct BRH Garver	tions)
4	Date	5 Full name of contributor V.K. Gupta	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Plano	State; Zip Code TX 75093	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Gupta & Associates, Inc.	
4	Date	5 Full name of contributor  Kenneth J. Gurry,Jr.	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Webster	State; Zip Code TX 77598	1000
8		upation / Job title (See Instructions) ing Contractor		9 Employer (See Instruction Gurry Mechanical	I tions)
4	Date	5 Full name of contributor  Darrell Hancock	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77339	60
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETARY	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	Bill King			3 Filer ID (Ethics Commission filers)
		Vasant Hariani	-		7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code	<b>.</b> 2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
0	Eningeering	apation / Job title (See Instructions)		Infrastructure Associate	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	
		Richard F. Harris	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Houston	TX 77024	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Retired			N/A	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	
		Howard Holsenbeck			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Houston	TX 77074	1500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Real Estate			Holsenbeck Realty	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	
		HOUCONPAC			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Houston	TX 77292	10000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	
		R.O. Hunton			7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King		3 Filer ID (Ethics Commission filers)	
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
	President & C	CEO		The Hunton Group	
4	Date	5 Full name of contributor Steven Jarvis	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction	I ctions)
4	Date	5 Full name of contributor  I.M Jawdat, MD	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	250
8	Principal occi Physician	upation / Job title (See Instructions)		9 Employer (See Instruction Houston Heart Clinic	etions)
4	Date	5 Full name of contributor  David Johnson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Aircraft mana	agement		Self	

	inotraction (	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FII	LER NAME	Bill King	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Walter E. Johnson			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Houston	TX 77056	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	Founder and	d Chairman		Amegy Bank	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		James R. Kimbrough II			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Houston	TX 77055	2000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	Brick sales			Upchurch Kimbrough	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Michael Brooks Lee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Houston	TX 77001	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	Attorney			Cokinos, Bosien & Young	g
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Linebarger, Goggan, Blair & Sampson, LLP			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/16/2015		Austin	TX 78760	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)

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	Bill King			3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor  Lance Livingston	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc Texas Rodeo Production		
4	Date	5 Full name of contributor  J.W. Lodge	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77013	100	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
4	Date	5 Full name of contributor  John Lodge III	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77213	1000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct Lodge Lumber Co., Inc.		
4	Date	5 Full name of contributor Chris Matlock	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	11/16/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	250	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	l tions)	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )		

M	ONETAR	Y POLITICAL CONT	<b>TRIBUTION</b>	S	SCHEDULE A1
Th	e Instruction	Guide explains how to compl	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Jarl W. Molander			7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Magnolia	State; Zip Code TX 77354	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Knudson & Associates	btions)
4	Date	5 Full name of contributor  Darrell Morrison	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Pasadena	State; Zip Code TX 77505	2500
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruction Self	etions)
4	Date	5 Full name of contributor Anthony Nims	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occ	L cupation / Job title (See Instructions)	)	9 Employer (See Instruc Linebarger Goggan Blai	
4	Date	5 Full name of contributor  Ralph OÕConnor	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc Ralph S. OÕConnor & A	
4	Date	5 Full name of contributor Sandra Parker	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occ	L cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Jeannine Perrot	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	30
8		cupation / Job title (See Instructions) Software Analyst		9 Employer (See Instruction Paradigm Geophysical	tions)
4	Date	5 Full name of contributor  Neal Pleasant	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Kemah	State; Zip Code TX 77565	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Esther Polland	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Bellaire	State; Zip Code TX 77401	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	rtions)

M	ONETARY	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	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Joe Pyne	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77251	5000
8	Principal occu	upation / Job title (See Instructions) es		9 Employer (See Instruct Kirby Corp	I tions)
4	Date	5 Full name of contributor Tina Pyne	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77251	5000
8	Principal occu	upation / Job title (See Instructions)  /olunteer		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Donna Range	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77049	1000
8	Principal occu	upation / Job title (See Instructions)	pation / Job title (See Instructions)  9 En		I tions)
4	Date	5 Full name of contributor Esmeralda Rodriguez	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Pearland	State; Zip Code TX 77581	15
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	TRIBUTION	S	SCHEDULE A	1
Th	e Instruction (	Guide explains how to compl	1 Total Pages Schedule A1:	_		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)	_
		J. Russ			7 Amount of contributions (\$)	_
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	5000	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc	ctions)	
4	Date	5 Full name of contributor G.A. Samper	out of state	PAC(ID# )	7 Amount of contributions (\$)	_
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruction Security Lighting Service		_
4	Date	5 Full name of contributor  David Saperstein	out of state	PAC(ID# )	7 Amount of contributions (\$)	_
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc Self	ctions)	_
4	Date	5 Full name of contributor  Maury Saunders	out of state	PAC(ID# )	7 Amount of contributions (\$)	
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	250	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc	Letions)	_
4	Date	5 Full name of contributor Timothy Seay	out of state	PAC(ID# )	7 Amount of contributions (\$)	_

MONETAR	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The Instruction (	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
11/16/2015	6 Contributor address;	City; The Woodlands	State; Zip Code TX 77380	200
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Greater Houston Emerg	
4 Date	5 Full name of contributor Chuck Silverman	out of state F		7 Amount of contributions (\$)
11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	100
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor  Hoover Slovacek LLP	out of state F	PAC(ID# )	7 Amount of contributions (\$)
11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77210	1000
8 Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor  David O. Stevens	out of state F	PAC(ID# )	7 Amount of contributions (\$)
11/16/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77399	500
8 Principal occ Attorney	cupation / Job title (See Instructions)		9 Employer (See Instruction Self	I tions)
4 Date	5 Full name of contributor  Clark G. Thompson, Jr.	out of state F	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE		
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Bill King	,		3 Filer ID (Ethics Commission filers)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code	. 250
_					
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor  Barbara Upchurch	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	300
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  Betty Vann	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	500
8	Principal occ Retired	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	I ctions)
4	Date	5 Full name of contributor  D. Howard Watson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	500
8	Principal occ President	upation / Job title (See Instructions)		9 Employer (See Instruction	ctions)

M	ONETARY	Y POLITICAL CONTI	SCHEDULE A1		
The	e Instruction G	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Joe Wheat	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Self	tions)
4	Date	5 Full name of contributor  Lora Jean Kilroy	out of state l	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Patricia Wilson	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Seabrook	State; Zip Code TX 77586	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Wallace S. Wilson	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
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	ONETAR	Y POLITICAL CONT	RIBUTION	5	SCHEDULE A1
Th	e Instruction C	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
		Melvyn Wolff	-		7 Amount of contributions (\$)
	11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77218	1500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	Chairman			Star Furniture	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Sanjay Agrawal			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/17/2015		Dallas	TX 75248	2500
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	President			AG&E Structural Engen	uity
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Bob Brooks			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/17/2015		Houston	TX 77025	200
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Project Mana	agement Consultant		BPM Group	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Julie Chenn			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/17/2015		Houston	TX 77077	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Bryan D'Agostino			7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE /		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 I	FILER NAME E	Bill King	,		3 Filer ID (Ethics Commission filers)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code	500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Randall Davis	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Randall Davis Company	
4	Date	5 Full name of contributor  Nevzat Demirbas	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77478	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Original Group LLC	Letions)
4	Date	5 Full name of contributor  Robert Dickinson	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Kelsey-Seybold Clinic	tions)

M	ONETARY	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Yunus Dogan	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Katy	State; Zip Code TX 77494	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Atlas Group	tions)
4	Date	5 Full name of contributor Fred Flickinger	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77345	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Liberty Contract Services	
4	Date	5 Full name of contributor  Edward Griffin	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Griffin Partners, Inc.	I tions)
4	Date	5 Full name of contributor  HAA Better Government Fund	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77041	10000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	l tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A	<b>41</b>
Th	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)	
		MARK IUPPENLATZ			7 Amount of contributions (\$)	
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Group 1 Automotive	ctions)	
4	Date	5 Full name of contributor  Ann Iverson	out of state	PAC(ID# )	7 Amount of contributions (\$)	
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	100	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
4	Date	5 Full name of contributor  Land Tejas Companies, LTD	out of state	PAC(ID# )	7 Amount of contributions (\$)	
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	1000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
4	Date	5 Full name of contributor  Karl Marshall	out of state	PAC(ID# )	7 Amount of contributions (\$)	
	11/17/2015	6 Contributor address;	City; Cypress	State; Zip Code TX 77429	2500	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Salas OÕBrien	ctions)	
4	Date	5 Full name of contributor LeRoy Mehan	out of state	PAC(ID# )	7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/17/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77345	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  John Moody	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Parkside Capital	tions)
4	Date	5 Full name of contributor  Mehmet Okumus	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Stafford	State; Zip Code TX 77477	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Rain Drop Foundation	tions)
4	Date	5 Full name of contributor Gregory Pappas	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Pappas Restaurants	rtions)

M	ONETARY	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor ricardo perusquia	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; houston	State; Zip Code TX 77056	1000
8	Principal occu	upation / Job title (See Instructions) ector		9 Employer (See Instruct Global Financial Service	
4	Date	5 Full name of contributor Betty Shindler	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Martha Turner Sotheby  O	
4	Date	5 Full name of contributor Christy Smith	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	25
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  E. Ashley Smith	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHED	ULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		M.Brandon Waddell	-		7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	11/17/2015		Dallas	TX 75201	2000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
	Attorney			Vincent Lopez, et. al.		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		John W. Wall III			7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	11/17/2015		Houston	TX 77005	150	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Barrett Webster			7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	11/17/2015		Houston	TX 77027	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
	Managing Pa	rtner		Kestrel Capital LP		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Cherry Whitley			7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	11/17/2015		Houston	TX 77057	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	ions)	
	Retired			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Alan Williams			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	Bill King		3 Filer ID (Ethics Commission filers)	
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Self	etions)
4	Date	5 Full name of contributor  David Woodward	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77339	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I trions)
4	Date	5 Full name of contributor Onder Yaltir	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77478	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc Realy Associates	I tions)
4	Date	5 Full name of contributor  Muhammet Yavuz	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Stafford	State; Zip Code TX 77477	1000
8	Principal occ Professor	upation / Job title (See Instructions)		9 Employer (See Instruction University of Houston	tions)

M	ONETARY	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Morrie K. Abramson	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Martha Adger	out of state I	I PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Martha Turner Sotheby's	
4	Date	5 Full name of contributor Sidney Adger	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	ltions)
4	Date	5 Full name of contributor Kurt Adkins	out of state I	I PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Summit Management, LL	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

MONET	ARY POLITICAL CONTR	RIBUTIONS	8	SCHEDULE A1
The Instruc	ction Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER N	AME Bill King			3 Filer ID (Ethics Commission filers)
	EDUARDO AGUIRRE			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/18/20	115	HOUSTON	TX 77077	250
8 Princip	pal occupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4 Date	5 Full name of contributor	out of state F	PAC(ID# )	
	Tarek Amine			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/18/20	115	Sugar Land	TX 77479	500
	pal occupation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4 Date	5 Full name of contributor Gary Anderson	out of state I	I PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/18/20	115	Houston	TX 77027	500
8 Princip	pal occupation / Job title (See Instructions)		9 Employer (See Instruction Gary Anderson Consulting	,
4 Date	5 Full name of contributor  Antonio Ballesca	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/18/20	115	Houston	TX 77027	1000
8 Princip Real E	pal occupation / Job title (See Instructions) Estate		9 Employer (See Instruction Vapa Ltd	Litions)
4 Date	5 Full name of contributor  James Bartley	out of state F	PAC(ID# )	7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	IBUTIONS	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77099	2000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction DA Mid South	etions)
4	Date	5 Full name of contributor  John Beeson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Beeson Properties	etions)
4	Date	5 Full name of contributor  Mark Bettencourt	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	Jupation / Job title (See Instructions) Services		9 Employer (See Instruction Bettencourt Tax Advisor	
4	Date	5 Full name of contributor Susan Boss LLC	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETARY	POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Bill Boyar	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Boyar Miller	tions)
4	Date	5 Full name of contributor  Louis Brandt	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Eddie Burke, Jr.	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	400
8	8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Omega Transactions Corp.		
4	Date	5 Full name of contributor  Neil Bush	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8		upation / Job title (See Instructions) Business Development		9 Employer (See Instruct Self	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONETAI	RY POLITICAL CON	TRIBUTIONS	5	SCHEDULE A1
The Instruction	n Guide explains how to comp	1 Total Pages Schedule A1:		
2 FILER NAMI	E Bill King			3 Filer ID (Ethics Commission filers)
	Alice Butrum			7 Amount of contributions (\$)
11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	250
8 Principal o	occupation / Job title (See Instructions	)	9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor	out of state I	PAC(ID# )	
	Betty Clamp			7 Amount of contributions (\$)
11/18/2015	6 Contributor address;	City;	State; Zip Code	500
8 Principal o	occupation / Job title (See Instructions	)	9 Employer (See Instruction) N/A	tions)
4 Date	5 Full name of contributor  Carl Davis	out of state I	PAC(ID# )	7 Amount of contributions (\$)
11/18/2015	6 Contributor address;	City; Houston	State; Zip Code	5000
8 Principal o	occupation / Job title (See Instructions	1	9 Employer (See Instruc	tions)
Retired	occupation / oob title (occ manucions	)	N/A	AUTO 13)
4 Date	5 Full name of contributor Amjed Dhukka	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
11/18/2015		Sugar Land	TX 77479	1000
8 Principal o	Coccupation / Job title (See Instructions	)	9 Employer (See Instruc Texas Pearl, Inc.	Etions)
4 Date	5 Full name of contributor Richard Diehl	out of state I	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77258	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Diehl Chemical	tions)
4	Date	5 Full name of contributor William Dore	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occuprinting service	upation / Job title (See Instructions) ces		9 Employer (See Instruction 3dprintlabs.com	etions)
4	Date	5 Full name of contributor  James Doyle	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Doyle, Restrepo, Harvin	
4	Date	5 Full name of contributor  Daniel DuBose	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	duide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Suzanne Ebrahimi	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	2000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Cheryl Ford	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	250
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Kirk Franceschini	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Austin	State; Zip Code TX 78701	1000
8 Principal occupation / Job title (See Instructions)  Car Dealer		9 Employer (See Instruction Paramount Automotive C	,		
4	Date	5 Full name of contributor Gary Gibson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruct Star Furniture	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE A1
Th	e Instruction (	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME	Bill King			3 Filer ID (	Ethics Commission filers)
		Malcolm Gibson			7	Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code		1000
8	Principal occ Attorney	cupation / Job title (See Instructions)		9 Employer (See Instruction MD Gibson & Associate		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		William Gipson	_		7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/18/2015		Houston	TX 77019		250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	retired			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Guillermo Guefen			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/18/2015		Houston	TX 77027		1000
8	Principal occ	L cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	CEO			Guefen Development		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ben Guill			7	Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code		
	11/18/2015		Houston	TX 77019		5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)	
	Managing Pa	artner		White Deer Energy		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ima Jean Harrison			7	Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	IBUTIONS	5	SCHEDULE A1
Th	e Instruction G	uide explains how to complete		1 Total Pages Schedule A1:	
2 F	FILER NAME B	ill King			3 Filer ID (Ethics Commission filers)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  Haynes & Boone PAC	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Richardson	State; Zip Code TX 75082	. 1500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I otions)
4	Date	5 Full name of contributor  Lawrence Hill	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Sumner Realy Corp.	I ctions)
4	Date	5 Full name of contributor Theodore Hirtz	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Self	etions)

M	ONETARY	POLITICAL CONTI	RIBUTION	NS	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Lee Hogan	out of stat	e PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Crown Castle Internation	
4	Date	5 Full name of contributor Thomas Horan	out of stat	re PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	25
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Guy Jackson	out of stat	e PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Anahuac	State; Zip Code TX 77514	100
8	Principal occu	upation / Job title (See Instructions) e Agent		9 Employer (See Instruc Chambers County Abstr	·
4	Date	5 Full name of contributor Stewart Kepper	out of stat	e PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of stat	re PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE A	1
Th	e Instruction	Guide explains how to comple	ete this form.		1 Tota	al Pages Schedule A1:	_
2 F	ILER NAME	Bill King			3 Filer ID	(Ethics Commission filers)	_
		Eric Khan			7	Amount of contributions (\$)	_
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code		1000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Self	ctions)		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			-
		Charlotte Leach	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77024		50	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		_
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		G.T. Leach Constructors, LLC	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77019		2500	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)		_
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		Victor Lee			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Bellaire	TX 77401		1000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)		-
	Architect			STOA			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			-
		Barry Lewis			7	Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction C	Guide explains how to complete		1 Total Pages Schedule A1:	
2 F	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	2000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc Golden Eye, Inc.	etions)
4	Date	5 Full name of contributor  Kyle Lippman	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	2500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction Newquest Crosswell	I ctions)
4	Date	5 Full name of contributor Imtiyaz Maredia	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77389	<b>.</b> 250
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor  Michael McFarlane	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	7
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction NASA	ctions)

M	ONETARY	POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	uide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Kathleen Millunzi	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Willis	State; Zip Code TX 77318	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Millunzi & Associates Inc	
4	Date	5 Full name of contributor Faisal Momin	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Richmond	State; Zip Code TX 77407	3500
8	Principal occu	Ipation / Job title (See Instructions) ministrator		9 Employer (See Instruct Baylor College of Medici	
4	Date	5 Full name of contributor Bruce Ross	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct OFS Energy Fund	I tions)
4	Date	5 Full name of contributor Pat Rutherford	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Rutherford Oil Corp.	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE	A1
Th	e Instruction G	Guide explains how to comple	te this form.		1 Total P	ages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Eth	ics Commission filers)	
		Philip Schneidau			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77027		2500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Property man	agement		BMS Management, Inc.			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		William Schweinle, Jr.			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77059		100	
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# )			
		Fernando Somoza	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77024		1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Auto dealer			Self			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		William Thomas			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/18/2015		Houston	TX 77098		2000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Chairman			EOG Resources			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Claire Tilton			7	Amount of contributions (\$)	

M	ONETARY	POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	TILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	-
	11/18/2015		Houston	TX 77027	200
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instru	Inctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		David M. Underwood, Jr.			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	11/18/2015		Houston	TX 77019	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instru	Inctions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Wade Upton			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	11/18/2015		West University	TX 77005	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instru	Luctions)
	Retired			N/A	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Armando Waterland	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	-
	11/18/2015		Houston	TX 77024	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instru	uctions)
	President			Inbesa	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Ricardo Weitz	_		7 Amount of contributions (\$)

M	ONETARY	Y POLITICAL CONTR	SCHEDULE A		
Th	ne Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 I	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Summit Management, L	
4	Date	5 Full name of contributor Chery Whitley	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor  Daniel Arguijo, Jr.	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	500
8		upation / Job title (See Instructions)		9 Employer (See Instruction Dow Chemical Company	
4	Date	5 Full name of contributor  Dionel Aviles	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Aviles Engineering Com	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Trent Campbell	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Santiago Castaneda	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77339	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Omega Engineers	I tions)
4	Date	5 Full name of contributor  Clark, Love & Hutson, GP	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Gregory Compean	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Compean Funeral Home	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	Instruction G	uide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	ill King			3 Filer ID (Ethics Commission filers)
		Greg Dalton			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Katy	TX 77494	200
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I trions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Leon Freedman	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77094	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Pediatrician			Texas Childrens Pediatr	rics
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		David Gibbs			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77005	1000
8	Principal occu	Pation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Real Estate			David K. Gibbs Associat	tes
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Patrick Hall			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/19/2015		Houston	TX 77062	40
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	T
4	Date	John Hernandez	Unit of State	1 / O(ID# )	7 Amount of contributions (\$)
					(4)

M	ONETARY	POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 I	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	316
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Joanne H. Hook	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor  Dariuosh Kermany	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Katy	State; Zip Code TX 77450	5000
8	Principal occu	I upation / Job title (See Instructions)		9 Employer (See Instruc	I utions)
4	Date	5 Full name of contributor  James McIngvale	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Gallery Furniture	otions)

M	ONETARY	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Linda McIngvale	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	tions)
4	Date	5 Full name of contributor  David Nini	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	750
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Lantana Energy Advisors	
4	Date	5 Full name of contributor  Alan Sadeghpour	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Prozign Architects	I tions)
4	Date	5 Full name of contributor Cindy Villarreal	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/19/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc J. Jill	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MC	NETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	Instruction G	uide explains how to comple	1 Total Pages Schedule A1:		
2 FIL	ER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		Joe B. Allen			7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction N/A	ctions)
4	Date	5 Full name of contributor Shahla Ansary	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc N/A	etions)
4	Date	5 Full name of contributor Hushang Ansary	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc Stewart & Stevenson, Li	
4	Date	5 Full name of contributor Tino Bekhradi	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Swiss Builders	Letions)
4	Date	5 Full name of contributor  Maurice Berchon	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME Bill King					3 Filer ID (Ethics Commission filers)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Styles Jewelers	Letions)
4	Date	5 Full name of contributor  Robert Burrows	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	25
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Greg Cain	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	. 25
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
4	Date	5 Full name of contributor  Deniz Cevik	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	500
8	Principal occi Manager	upation / Job title (See Instructions)		9 Employer (See Instruction Houston Internation Hos	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple		1 Total Pages Schedule A1:	
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Bill Chen	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Pennington-Chen Interest	
4	Date	5 Full name of contributor Richard Domercq	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  David Durham	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston,	State; Zip Code TX 77080	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Esther Emrick	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77087	50
8	Principal occi	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 CONT	RIBUTION	S	SCHEDULE A
The	e Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Bill King	3 Filer ID (Ethics Commission filers)		
		Turgay Faki			7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Merih Cotton Corp.	ctions)
4	Date	5 Full name of contributor  Larry Finder	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77081	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor Ralph Fite	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc River Oaks Financial Gr	
4	Date	5 Full name of contributor Charles Fox	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Windy Cove Energy, LL	
4	Date	5 Full name of contributor  H. Scott Galloway	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME Bill King					3 Filer ID (Ethics Commission filers)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	2500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Executive Ma	anagin Director		HFF, Inc.	
4	Date	5 Full name of contributor  Kate Gay	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Dickinson	State; Zip Code TX 77539	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Gay Family Auto	I trions)
4	Date	5 Full name of contributor Pat Gilbert	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; houston	State; Zip Code TX 77056	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc Gibert Co.	I ctions)
4	Date	5 Full name of contributor victor grinshtein	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; houston	State; Zip Code TX 77035	2000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Tech			Xvand	

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	3	SCHEDULE A1
The	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Gregory Hamer	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Morgan City	State; Zip Code LA 70381	500
8	Principal occurestaurant su	upation / Job title (See Instructions)		9 Employer (See Instruction Big Food Enterprises LL	
4	Date	5 Full name of contributor  Betsy Harris	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77074	75
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Georga Finley Harrison	out of state F	I PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor  Nina Hendee	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions) /olunteer		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

MONETA	RY POLITICAL CONT	<b>TRIBUTION</b>	S	SCHEDULE A1
The Instructio	n Guide explains how to compl	1 Total Pages Schedule A1:		
2 FILER NAM	IE Bill King			3 Filer ID (Ethics Commission filers)
	Jackelyn lloff		,	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor  Larry Johnson	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
	occupation / Job title (See Instructions) and CEO		9 Employer (See Instruction Johnson Development (	
4 Date	5 Full name of contributor Suzanne Johnson	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8 Principal of Homemak	occupation / Job title (See Instructions)		9 Employer (See Instruction N/A	etions)
4 Date	5 Full name of contributor  Ramesh Kalluri	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	1000
8 Principal of Engineer	occupation / Job title (See Instructions)		9 Employer (See Instruc KGI Inc.	etions)
4 Date	5 Full name of contributor  Lester Kastleman	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	IBUTIONS	6	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	300
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  John Knox, Jr.	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77459	1000
8	Principal occu	upation / Job title (See Instructions) vices		9 Employer (See Instruction Self	I trions)
4	Date	5 Full name of contributor Wendy Susan Lewis	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Self	Letions)
4	Date	5 Full name of contributor  Kenneth Margolis	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction   Kauff McGuire & Margol	

M	ONETARY	POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple		1 Total Pages Schedule A1:	
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Michael Massey	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Craddock Massey LLP	tions)
4	Date	5 Full name of contributor Roy Montalbano	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Dr. Jim Moore	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; houston	State; Zip Code TX 77056	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Brian Morrison	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct R&B Group, Inc.	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CON	TRIBUTIONS	5	SCHEDULE A1
Th	e Instruction (	Guide explains how to compl	lete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Roy Owens, Jr.	,		7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77021	5000
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruction Self	ctions)
4	Date	5 Full name of contributor  Parke Patterson	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77487	100
8	Principal occ	upation / Job title (See Instructions	)	9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor  Lupe Rivera	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Friendswood	State; Zip Code TX 77546	30
8	Principal occ	Leupation / Job title (See Instructions)	)	9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor Sharon Roark	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	100
8	Principal occ	supation / Job title (See Instructions)	)	9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor Richard Rothfelder	out of state F	PAC(ID# )	7 Amount of contributions (\$)

MONETARY	Y POLITICAL CONTR	SCHEDULE A		
The Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code	. 250
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Rothfelder & Falick, LLF	
4 Date	5 Full name of contributor Paula Runte	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	100
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor  David Sadeghpour	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	5000
8 Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruction Scientech Engineers	I otions)
4 Date	5 Full name of contributor  Jay Sears	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77040	5000
8 Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction NewQuest Properties	etions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Michael Sharp	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Jim Smith, Jr.	out of state		7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Smithco Development	I tions)
4	Date	5 Full name of contributor  George Stark	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Stark Capital Manageme	·
4	Date	5 Full name of contributor  Brad Tucker	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Mustang Cat	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S		SCHEDULE A	1
Th	e Instruction (	Guide explains how to comple	te this form.		1 Tota	l Pages Schedule A1:	_
2 F	FILER NAME	Bill King			3 Filer ID (	Ethics Commission filers)	_
		Stephanie Tucker	<del></del>		7	Amount of contributions (\$)	_
	11/20/2015	6 Contributor address;	City;	State; Zip Code		5000	
	11/20/2015		Houston	1		3000	
8	Principal occ Director of C	cupation / Job title (See Instructions)  Operations		9 Employer (See Instruction  Jewish Family Service	ctions)		_
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		C. Richard Vermillion, Jr.	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/20/2015		Houston	TX 77027		5000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)		_
	CEO			Fulcrum Analytics			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Peter Wareing			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/20/2015		Houston	TX 77098		5000	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)		_
	Co-Founder	and Partner		Wareing, Athon & Comp	oany		
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		Wade Whilden			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	11/20/2015		Houston	TX 77024		100	
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		_
4	Date	5 Full name of contributor	out of state	PAC(ID# )			_
		Zack Yazici	ш		7	Amount of contributions (\$)	

M	ONETAR'	Y POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction C	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)
	11/20/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	1000
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruction autobyzack Inc.	etions)
4	Date	5 Full name of contributor Richard Zapalac	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/20/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77478	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Ralph Clinard	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77082	50
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Douglas Havlik	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	25
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Itions)

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Carl Schmulen	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/21/2015	6 Contributor address;	City; Houston	State; Zip Code	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor robert wiemer	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/21/2015	6 Contributor address;	City; houston	State; Zip Code TX 77005	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Michael Grogan	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  John Hawkins	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Porter Hedges	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONETAF	RY POLITICAL CONT	RIBUTIONS	3		SCHEDULE A1
The Instruction	Guide explains how to comple	te this form.		1 Total Pages So	chedule A1:
2 FILER NAME	E Bill King			3 Filer ID (Ethics Comm	nission filers)
	Thomas OConnor			7 Amount	of contributions (\$)
11/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006		100
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4 Date	5 Full name of contributor  Cadence Bank, NA PAC	X out of state I	PAC(ID# 506733 )	7 Amount	of contributions (\$)
11/23/2015	6 Contributor address;	City; Birmingham	State; Zip Code AL 35203		2500
8 Principal or	ccupation / Job title (See Instructions)		9 Employer (See Instruc	L tions)	
4 Date	5 Full name of contributor Peter Dienna	out of state I	I PAC(ID# )	7 Amount	of contributions (\$)
11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056		5000
8 Principal or Real Estate	ccupation / Job title (See Instructions) e		9 Employer (See Instruction DNA Partners, Ltd.	I tions)	
4 Date	5 Full name of contributor  James Floyd	out of state I	PAC(ID# )	7 Amount	of contributions (\$)
11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024		1000
8 Principal or Energy	ccupation / Job title (See Instructions)		9 Employer (See Instruc Cabot Oil & Gas	I tions)	
4 Date	5 Full name of contributor Harry Jones, Jr.	out of state I	PAC(ID# )	7 Amount	of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Self	tions)
4	Date	5 Full name of contributor  C. Berdon Lawrence	out of state		7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77251	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Self	I trions)
4	Date	5 Full name of contributor  James Ledbetter	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Higginbotham	I tions)
4	Date	5 Full name of contributor  Doris Looper	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	5000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	etions)

M	ONETARY	Y POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Terry Looper	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Texon	[ tions)
4	Date	5 Full name of contributor  Brenda Mainwaring	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77389	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Susan McLeland	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77087	25
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Audra Oden	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruction Self	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	<b>TRIBUTION</b>	S	SCHEDULE	A1
Th	e Instruction (	Guide explains how to compl	1 Total Pages Schedule A1:			
2 F	FILER NAME	Bill King	3 Filer ID (Ethics Commission filers)			
		Keith Oden			7 Amount of contributions (\$)	
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc	ctions)	
Ü	President	,		Camden Property Trust		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Charles Tate	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/23/2015		Houston	TX 77019	5000	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc	etions)	
	Chairman			Capital Royalty LP		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Judy Tate			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/23/2015		Houston	TX 77019	5000	
8	Principal occ	cupation / Job title (See Instructions)	)	9 Employer (See Instruc	etions)	
	Investor			Self		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		James Thompson			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/23/2015		Houston	TX 77056	5000	
8	Principal occ	Lupation / Job title (See Instructions)	)	9 Employer (See Instruc	tions)	
	Engineering			AECOM		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Paula Walter			7 Amount of contributions (\$)	

MC	NETARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The	Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 FIL	ER NAME B	ill King			3 Filer ID (Ethics Commission filers)
	44/00/0045	6 Contributor address;	City;	State; Zip Code	
	11/23/2015		Houston	TX 77002	5000
8	Principal occu Community Vo	pation / Job title (See Instructions)		9 Employer (See Instruction N/A	ctions)
4	Date	5 Full name of contributor  J.C. Walter, III	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occu President	pation / Job title (See Instructions)		9 Employer (See Instruction Walter Oil & Gas	ctions)
4	Date	5 Full name of contributor  Aaron Webster	out of state	PAC(ID# )	7 Amount of contributions (\$)
,	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	5000
8	Principal occu	pation / Job title (See Instructions) mber		9 Employer (See Instruction Webster Foods LLC	ctions)
4	Date	5 Full name of contributor Stanley Weinstein	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	250
8	Principal occu Accountant	pation / Job title (See Instructions)		9 Employer (See Instruction Weinstein Spira & Co.	ctions)
4	Date	5 Full name of contributor  Political Action Committee of Winstead PC	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETARY	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/23/2015		Dallas	TX 75201	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor BAC-PAC	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Adam Bakir	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occu	upation / Job title (See Instructions) Development		9 Employer (See Instructions Incredible Renovations	I tions)
4	Date	5 Full name of contributor  David Dewhurst	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Falcon Seaboard	I trions)

M	ONETARY	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Patricia Dewhurst	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct N/A	tions)
4	Date	5 Full name of contributor William Dickey	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Self	I tions)
4	Date	5 Full name of contributor Susan Gray	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor  John J. Gray, III	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	upation / Job title (See Instructions) evelopment		9 Employer (See Instruction Grayco Partners	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		Edward Griffin			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Houston	TX 77019	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Real Estate			Griffin Partners, Inc.	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		HOME-PAC Greater Houston Builders Assoc.	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Houston	TX 77064	10000
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# )	
		Larry Lambertz	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Houston	TX 77008	50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	Litions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		H Dean Lane, Jr.	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Houston	TX 77024	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	Partner			NewQuest Crosswell	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
		Jim Lemming			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Houston	TX 77040	3000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Construction			Partners in Building	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Mike Moody			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Houston	TX 77042	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	Real Estate D	Development		Newmark Homes House	tn, LLC
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Roy G. Shaw, Jr.			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Bacliff	TX 77518	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
	Chairman and	d CEO		Shaw Systems Associate	es, Inc.
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Texas Association of Realtors Political Action Committee	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/24/2015		Austin	TX 78768	8000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	lions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR'	Y POLITICAL CONT	RIBUTION	IS	SCHEDULE	Α1
Th	e Instruction C	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)	
		David Weekley			7 Amount of contributions (\$)	
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code	2500	
				_ <del>_</del>		
8	Principal occ	upation / Job title (See Instructions) Development		9 Employer (See Instruction David Weekley Homes	ctions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Mickey Ables			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/25/2015		Houston	TX 77005	500	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Retired			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Elizabeth Altschuler			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/25/2015		Houston	TX 77024	500	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	ptions)	
	Homemaker			N/A		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Jlm Bartley			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code	•	
	11/25/2015		Houston	TX 77099	500	
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	Owner			Newbart Products Inc.		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Deborah Cannon			7 Amount of contributions (\$)	

M	ONETARY	Y POLITICAL CONTR	SCHEDULE A		
The	e Instruction G	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code	1000
8	Principal occu CEO	upation / Job title (See Instructions)		9 Employer (See Instruction Houston Zoo	otions)
4	Date	5 Full name of contributor  Cathy Cleary	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)		
	Community V	olunteer		N/A	
4	Date	5 Full name of contributor  Joseph A. Cleary, Jr.	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Harvey Builders	ctions)
4	Date	5 Full name of contributor Richard E. Fant	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction New Process Steel Corp	
4	Date	5 Full name of contributor  Greater Houston Restaurant Association PAC	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1		
Th	The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code	5000
	Dringing	unation / Joh title (Con Instructions)		O Faralavan (Can Instruc	tion a)
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Kenneth Guidry	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	250
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruction PKF Texas	Letions)
4	Date	5 Full name of contributor Sippi Khurana	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Self	I tions)
4	Date	5 Full name of contributor George Morris	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occu	upation / Job title (See Instructions) anker		9 Employer (See Instruction Morris Energy Advisors	

MO	NETARY	POLITICAL CONTI	RIBUTIONS	3	SCHEDULE A1			
The I	nstruction G	uide explains how to complet	e this form.		1 Total Pages Schedule A1:			
2 FILI	ER NAME B	ill King			3 Filer ID (Ethics Commission filers)			
4	Date	5 Full name of contributor  Megan Oden	out of state F	PAC(ID# )	7 Amount of contributions (\$)			
1.	1/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77401	5000			
8	Principal occu Artist	pation / Job title (See Instructions)		9 Employer (See Instruct	l tions)			
4	Date	5 Full name of contributor  Travis Oden	out of state F	PAC(ID# )	7 Amount of contributions (\$)			
1	1/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77401	5000			
8	Principal occu	pation / Job title (See Instructions) agement		9 Employer (See Instruct Campden Property Trust				
4	Date	5 Full name of contributor Ralph Parr	out of state F	PAC(ID# )	7 Amount of contributions (\$)			
1	1/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	250			
8	Principal occu Sales Associa	pation / Job title (See Instructions) te		9 Employer (See Instruction Coldwell Bnker United	9 Employer (See Instructions) Coldwell Bnker United			
4	Date	5 Full name of contributor  Ernest Pekmezaris	out of state F	PAC(ID# )	7 Amount of contributions (\$)			
1.	1/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	200			
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)			
4	Date	5 Full name of contributor	out of state F	PAC(ID# )				

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		William E. Penland, Jr.			7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	tions)
4	Date	5 Full name of contributor  Cassye Provost	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77045	150
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Jeffrey Rawson	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Merrick Capital Corp.	Letions)
4	Date	5 Full name of contributor  Glen Rosenbaum	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction & Elkins LLP	L trions)
4	Date	5 Full name of contributor  John Sullivan	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	RIBUTIONS	8	SCHEDULE A1
Th	e Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 F	TILER NAME B	sill King			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/25/2015		Galveston	TX 77552	100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Vinson & Elkins Texas Political Action Committee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/25/2015		Houston	TX 77002	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Terry Burton			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/26/2015		Houston	TX 77015	15
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
7	24.0	Michael Sandeen		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/26/2015		Houston	TX 77005	1000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
	Financial Advi	sor		Self	
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	
		Roy Beery, III	<u> </u>		7 Amount of contributions (\$)

M	ONETAR'	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 I	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
	11/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	. 50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor  Mark Cover	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	2500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Hines	Letions)
4	Date	5 Full name of contributor thomas mims	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/27/2015	6 Contributor address;	City; houston	State; Zip Code TX 77006	50
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  David Moore	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction BlingGuard LLC	etions)

M	ONETARY	POLITICAL CONT	SCHEDULE A1				
The	e Instruction G	uide explains how to comple	te this form.		1 Total Pages Schedule A1:		
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Lee Neathery	out of state I	PAC(ID# )	7 Amount of contributions (\$)		
	11/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	1000		
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)		
4	Date	5 Full name of contributor Gregg Falgout	out of state R	PAC(ID# )	7 Amount of contributions (\$)		
	11/28/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500		
8	Principal occu			9 Employer (See Instruct Island Operating Co.			
4	Date	5 Full name of contributor arlene hoffman	out of state I	PAC(ID# )	7 Amount of contributions (\$)		
	11/28/2015	6 Contributor address;	City; houston	State; Zip Code TX 77024	5000		
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions) Steel Supply LP			
4	Date	5 Full name of contributor Charles Kramer	out of state I	PAC(ID# )	7 Amount of contributions (\$)		
	11/28/2015	6 Contributor address;	City; Spring	State; Zip Code TX 77379	1000		
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Randall Reed Planet For			
4	Date	5 Full name of contributor	out of state F	PAC(ID# )			

MONETAR	RY POLITICAL CONT	IRIBUTION	S	SCHEDULE A1
The Instruction	Guide explains how to compl	1 Total Pages Schedule A1:		
2 FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	Mitra Kashani			7 Amount of contributions (\$)
11/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	100
8 Principal oc	ccupation / Job title (See Instructions)	)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	kevin whited			7 Amount of contributions (\$)
11/29/2015	6 Contributor address;	City;	State; Zip Code	200
8 Principal oc	ecupation / Job title (See Instructions)	)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor  John Young	out of state	PAC(ID# )	7 Amount of contributions (\$)
11/29/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77005	150
8 Principal oc	ccupation / Job title (See Instructions)	)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor Gilbert Baker	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
11/30/2015		Houston	TX 77007	100
8 Principal oc	ccupation / Job title (See Instructions)	)	9 Employer (See Instru	ctions)
4 Date	5 Full name of contributor  A.L. Ballard	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A		
Th	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction	tions)
4	Date	5 Full name of contributor H.R. Bowers	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77256	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Self	tions)
4	Date	5 Full name of contributor  T.M. Cassin	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	<b>.</b> 50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor  Mary Alys Cherry	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77062	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ztions)

M	ONETARY	Y POLITICAL CONT	SCHEDULE A1					
Th	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:			
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)			
4	Date	5 Full name of contributor  Marshall Preston Cloyd	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	250			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)			
	o.pa. ooo							
4	Date	5 Full name of contributor  Hank Coleman	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	1000			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Self	9 Employer (See Instructions) Self			
4	Date	5 Full name of contributor  David Cryan	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/30/2015	6 Contributor address;	City; Sealy	State; Zip Code TX 77474	300			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction In Ranch Country Custom In				
4	Date	5 Full name of contributor  T.H. Dinerstein	out of state	PAC(ID# )	7 Amount of contributions (\$)			
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	1000			
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction DMC Developers	I tions)			
4	Date	5 Full name of contributor	out of state	PAC(ID# )				

M	ONETAR	Y POLITICAL CONT	SCHEDULE A1			
Th	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:	-
2 F	FILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	-
		Robert Fuller			7 Amount of contributions (\$)	-
		6 Contributor address;	City;	State; Zip Code		
	11/30/2015		Seabrook	TX 77586	100	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc LYC Concours Corp	I tions)	-
4	Date	5 Full name of contributor  Houston Westside PAC	out of state	PAC(ID# )	7 Amount of contributions (\$)	
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77242	1000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	-
4	Date	5 Full name of contributor  Korsh Jafarnia	out of state	PAC(ID# )	7 Amount of contributions (\$)	-
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Houston Methodist	tions)	-
4	Date	5 Full name of contributor  Barry Kahan	out of state	PAC(ID# )	7 Amount of contributions (\$)	-
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	100	
8		upation / Job title (See Instructions)  Transportation		9 Employer (See Instruc Self	I tions)	-
4	Date	5 Full name of contributor  Jay Karkowsky	out of state	PAC(ID# )	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	Bill King			3 Filer ID (Ethics Commission filers)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	140
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I :tions)
4	Date	5 Full name of contributor Robert Komorn, MD	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Self	
4	Date	5 Full name of contributor Frann Lichtenstein	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occ	cupation / Job title (See Instructions)  Volunteer		9 Employer (See Instruc	
4	Date	5 Full name of contributor  Robert Lordi	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I:tions)

M	ONETARY	POLITICAL CONTI	SCHEDULE A		
Th	e Instruction G	uide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor  Macey Family Properties, LTD	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Steven Mach	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77219	1000
8	Principal occu			9 Employer (See Instruct Mach Industrial Group Li	
4	Date	5 Full name of contributor William Mathis	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct Self	I tions)
4	Date	5 Full name of contributor  Donald McFall	out of state l	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruct McFall Breitbeil & Eidma	
4	Date	5 Full name of contributor	out of state I	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	ribution	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to compl	1 Total Pages Schedule A1:		
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Wiley Mossy			7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occ	cupation / Job title (See Instructions)	1	9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor  Jahangir Nazemian	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Purchase	State; Zip Code NY 10577	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Carlyle Devellopment G	
4	Date	5 Full name of contributor  Jerome Pennington	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77059	1000
8	Principal occ	L cupation / Job title (See Instructions)		9 Employer (See Instruction Pennington Chen Interes	
4	Date	5 Full name of contributor  Heshi Amin Peyrovi	out of state	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  Ellen Prelle	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	3	SCHEDULE A1		
Th	e Instruction G	uide explains how to complete	this form.		1 Total Pages Schedule A1:	
2 F	FILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)	
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	100	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor Bill Roach	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77084	1000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Self	Itions)	
4	Date	5 Full name of contributor Virginia Simmons	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	5000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I:tions)	
4	Date	5 Full name of contributor  DS Chisolm General Partners	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	11/30/2015	6 Contributor address;	City; San Antonio	State; Zip Code TX 78216	5000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ıtions)	

M	ONETARY	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Lisa Steen	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Self	tions)
4	Date	5 Full name of contributor Betty Vann	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	1000
8	Principal occu	upation / Job title (See Instructions)	pation / Job title (See Instructions)  9 Employer (See Instructions)  N/A		I tions)
4	Date	5 Full name of contributor  Elizabeth Wareing	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	11/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Melvyn Anhalt, MD	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027	500
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	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A	.1
Th	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:	_		
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	_
		Glenn Bauguss			7 Amount of contributions (\$)	_
	12/1/2015	6 Contributor address;	City;	State; Zip Code	1000	
8	Principal occu Landlord	upation / Job title (See Instructions)		9 Employer (See Instruction Bauguss Turner Properties		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		_
		David Begala	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77245	2000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	etions)	_
	President			Texas Coasts Interests,	Inc.	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		_
		Giorgio Borlenghi			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77024	5000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)	_
	Real Estate D	Pevelopment		The Interfin Companies		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		_
		Dr. Dina Bramipour			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77019	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	_
	Endodontist			Self		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		David Chiles			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	Bill King			3 Filer ID (Ethics Commission filers)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	. 25
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	ptions)
4	Date	5 Full name of contributor Timothy Connolly	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Credit Suisse	Letions)
4	Date	5 Full name of contributor  Ben Crabb	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77008	. 20
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4	Date	5 Full name of contributor  Michael Curran	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	2500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Curran Holdings	etions)

M	ONETARY	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	Bill King			3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Irma Diaz-Gonzalez	out of state F	PAC(ID# )	7 Amount of contributions (\$)	
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	l tions)	
4	Date	5 Full name of contributor  Tony Essalih	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	250	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Cornerstone Government		
4	Date	5 Full name of contributor  Tracy Faulkner	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	1000	
8	•	upation / Job title (See Instructions) telations Manager		9 Employer (See Instruct		
4	Date	5 Full name of contributor  Kathleen Gahm	out of state I	PAC(ID# )	7 Amount of contributions (\$)	
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	200	
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	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A
Th	e Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
		Elliot Gershenson			7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code	360
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
O	CEO	edpation, oob tile (occ instructions)		Interfaith Ministries	Alons,
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Richard Hogan, Jr.	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/1/2015		Houston	TX 77024	1000
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Lawyer			Hogan & Hogan	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Clay Hoster			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/1/2015		Houston	TX 77005	250
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Banker			Independent Bank	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Patrick Hughes			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/1/2015		Houston	TX 77381	500
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Attorney			Haynes & Boone	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Robert Husmann			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	Bill King			3 Filer ID (Ethics Commission filers)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Husmann Architecture, F	
4	Date	5 Full name of contributor  Marianne Ibrahim	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	500
8	Principal occ Attorney	cupation / Job title (See Instructions)		9 Employer (See Instruction Baker Hughes	tions)
4	Date	5 Full name of contributor  J.R. Jones	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Jones Engineering Solut	
4	Date	5 Full name of contributor Georgia Jones	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	rtions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	8	SCHEDULE A1
Th	e Instruction (	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Enrique Loya	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct OTC Global Holdings	tions)
4	Date	5 Full name of contributor Floyd Mahanay	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; League City	State; Zip Code TX 77573	250
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor  Barry Margolis	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct McGladrey LLP	I tions)
4	Date	5 Full name of contributor  MHM Consultant	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77040	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID# )	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A	<b>\1</b>
The	e Instruction G	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)	
		Demetrius Navarro			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77024	1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	_
	Insurance			Navarro Insurance Grou	р	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Stephen Pitt	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77027	100	
8	Principal occu	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Bradley Radoff			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77027	5000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)	
	Investment M	lanagement		Self		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ali Rasouli			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	12/1/2015		Houston	TX 77227	2500	
8	Principal occu			9 Employer (See Instruc	tions)	
	President			PNR Management Inc		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Ali Rasouli			7 Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Bill King			3 Filer ID (Ethics Commission filers)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77227	2500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I utions)
4	Date	5 Full name of contributor  Homer Bruce Sallee	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc TX Petroleum Investmen	
4	Date	5 Full name of contributor  Jaleh Sallee	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occ Retail Store	cupation / Job title (See Instructions) Owner		9 Employer (See Instruction Lerant	I etions)
4	Date	5 Full name of contributor  Mandel Selber III	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor SIMA of Houston	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state f	PAC(ID# )	
		Elahe Taghdisi  6 Contributor address;	City;	State; Zip Code	7 Amount of contributions (\$)
	12/1/2015	o communicación address,	Houston	TX 77024	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Plush Home	tions)
4	Date	5 Full name of contributor Kimberly Van belle-ebel	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct KVBE Designs LLC	I tions)
4	Date	5 Full name of contributor Virginia Seale Watt	out of state I	PAC(ID# )	7 Amount of contributions (\$)
	12/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	100
8	Principal occu	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 CONT	RIBUTION	S		SCHEDULE	<b>A</b> 1
Th	e Instruction G	duide explains how to comple	te this form.		1 Total Page	es Schedule A1:	
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics	Commission filers)	
		Margaret Williams	-		7 An	nount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	12/1/2015		Houston	TX 77019		1000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Philanthropist			N/A			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Robert Wittman	_		7 An	nount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	12/1/2015		Houston	TX 77007		1000	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	CEO			Forward Science			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Stephen Yamin			7 An	nount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	12/1/2015		Houston	TX 77056		1000	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Lions)		
	Oil Service			Texas Black Iron			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		Douglas Atnipp			7 An	nount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	12/2/2015		Houston	TX 77024		2500	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	l tions)		
	Attorney			Greenberg Traurig			
4	Date	5 Full name of contributor	out of state	PAC(ID# )			
		nanik bhagia			7 An	nount of contributions (\$)	

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A		
The Instru	ction Guide expl	ains how to complete	this form.		1 Total Pages Schedule A1:		
2 FILER N	AME Bill King				3 Filer ID (Ethics Commission filers)		
	6 Contribu	utor address;	City;	State; Zip Code			
12/2/20	015		katy	TX 77450	50		
8 Princi	Lipal occupation / Job	title (See Instructions)		9 Employer (See Instruc	Itions)		
4 Date		ne of contributor	out of state	PAC(ID# )			
	James Bl	ackburn, Jr			7 Amount of contributions (\$)		
	6 Contribu	itor address;	City;	State; Zip Code			
12/2/20	015		Houston	TX 77004	500		
8 Princi	ipal occupation / Job	title (See Instructions)		9 Employer (See Instruc	Litions)		
Attorr	ney			Blackburn & Carter			
4 Date	5 Full nam	ne of contributor	out of state	PAC(ID# )			
	Frederick	Brazelton	_		7 Amount of contributions (\$)		
	6 Contribu	itor address;	City;	State; Zip Code			
12/2/20	015		Houston	TX 77024	250		
8 Princi	ipal occupation / Job	title (See Instructions)		9 Employer (See Instruc	Litions)		
Presid	dent			Platform Partners			
4 Date	5 Full nam	ne of contributor	out of state	PAC(ID# )			
	Catherine	Brock	_		7 Amount of contributions (\$)		
	6 Contribu	utor address;	City;	State; Zip Code			
12/2/20	015		Houston	TX 77019	400		
8 Princi	ipal occupation / Job	title (See Instructions)		9 Employer (See Instruc	ctions)		

M	ONETARY	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
The	e Instruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME E	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor gary brock	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; houston	State; Zip Code TX 77019	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Fondren Orthopedic Gro	
4	Date	5 Full name of contributor Greg Cain	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	25
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor  James Crump	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Jane Page Design Grou	
4	Date	5 Full name of contributor  Todd Emmerton	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77042	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc Stryker Fuel LLC	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

MONETAI	RY POLITICAL CONT	TRIBUTION	IS	SCHEDULE A
The Instruction	Guide explains how to compl	ete this form.		1 Total Pages Schedule A1:
2 FILER NAMI	E Bill King			3 Filer ID (Ethics Commission filers)
	George Farish			7 Amount of contributions (\$)
12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77256	100
8 Principal o	occupation / Job title (See Instructions)	)	9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID# )	
	Mario Frosinini	Ц		7 Amount of contributions (\$)
12/2/2015	6 Contributor address;	City; Houston	State; Zip Code	100
8 Principal o	occupation / Job title (See Instructions)	1	9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Sam Gianukos	out of state	PAC(ID# )	7 Amount of contributions (\$)
12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77009	100
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor john hagerman	out of state	PAC(ID# )	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
12/2/2015		spring	TX 77386	100
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Charles Hall	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTIONS	6	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King	,		3 Filer ID (Ethics Commission filers)
	12/2/2015	6 Contributor address;	City; League City	State; Zip Code TX 77574	2000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc N/A	I tions)
4	Date	5 Full name of contributor  James Hilton	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; kingwood	State; Zip Code TX 77345	50
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I trions)
4	Date	5 Full name of contributor  Raymond Hooker	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc Remax	I tions)
4	Date	5 Full name of contributor  Jeff Krug	out of state F	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77293	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruction Neopal LLC	otions)

M	ONETARY	POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	Instruction G	duide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Brian Lang	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Alton	State; Zip Code Illinois 62002	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Geo Specialty Chemicals	
4	Date	5 Full name of contributor Susan Lewis	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77401	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor  Moez Mangalji	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Westmont Hospitality Gr	,
4	Date	5 Full name of contributor Sultana Mangalji	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77024	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETARY	POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
The	e Instruction G	uide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
		Grozer Nikolaey			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Katy	TX 77450	20
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# )	
		Chris O'Sullivan	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77002	1500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Paloma Resources	I tions)
4	Date	5 Full name of contributor Charles Ofner	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77019	3000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Oasis Petroleum	I tions)
4	Date	5 Full name of contributor William Pickett	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77057	2500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Horseshoe Group Inc.	I tions)
4	Date	5 Full name of contributor Hal Pontez	out of state	PAC(ID# )	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction (	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	Bill King	,		3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77060	5000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I etions)
	President an	d CEO		НРІ	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Terry Puster			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77006	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	President			TPRB Advertising	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Laura Rodriguez			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77027	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
	Consultant			Self	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		John Rosenfeld			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/2/2015		Houston	TX 77056	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETARY	POLITICAL CONT	RIBUTIONS	S	SCHEDULE A1
The	Instruction G	duide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME B	Bill King			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Khaled Salem	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	2500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Williamsburg Enterprises	
4	Date	5 Full name of contributor Fayez Sarofim	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77010	5000
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction See Sarofim & Co.	I tions)
4	Date	5 Full name of contributor Susan Sarofim	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor  Douglas Schnitzer	out of state	PAC(ID# )	7 Amount of contributions (\$)
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77046	5000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Senterra Real Estate Gro	
4	Date	5 Full name of contributor	out of state	PAC(ID# )	

M	ONETAR'	Y POLITICAL CONTI	RIBUTION	S	SCHED	ULE A1
The	e Instruction (	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:	
2 F	ILER NAME I	Bill King			3 Filer ID (Ethics Commission filers)	
		Jerome Simon			7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	12/2/2015		Houston	TX 77042	2500	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Managing Dir	rector		Northern Trust		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Tadd Tellepsen	_		7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	12/2/2015		Houston	TX 77024	1000	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Construction			Tellepsen Construction		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Howard Tellepsen, Jr.			7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	12/2/2015		Simonton	TX 77476	1000	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Owner			Tellepsen Construction		
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		Joe Ting			7 Amount of contributions	(\$)
		6 Contributor address;	City;	State; Zip Code		
	12/2/2015		Houston	TX 77042	1000	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	ions)	
	Manager			West Plaza Managemen	t	
4	Date	5 Full name of contributor	out of state	PAC(ID# )		
		marcus wagoner			7 Amount of contributions	(\$)

MOI	NETAR	Y POLITICAL CONT	S	SCHEDULE A	
The Ir	nstruction G	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 FILI	ER NAME E	Bill King	3 Filer ID (Ethics Commission filers)		
		6 Contributor address;	City;	State; Zip Code	
1	2/2/2015		spring	TX 77388	50
8	Principal occi	Lupation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
4	Date	5 Full name of contributor	out of state	PAC(ID# )	
		Cherry Whitley			7 Amount of contributions (\$)
1	2/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	500
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Retired			N/A	
4	Date	5 Full name of contributor  Norm Wigington	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
1	2/2/2015		Houston	TX 77024	500
8	Principal occi Retired	upation / Job title (See Instructions)		9 Employer (See Instruc N/A	tions)
4	Date	5 Full name of contributor  John Work	out of state	PAC(ID# )	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
1	2/2/2015		Houston	TX 77043	100
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
		ATTACH ADDITIO	ONAL COPIES	OF THIS SCHEDULI	E AS NEEDED
		If contributor is out-of-state PA	C, please see ins	struction guide for additio	nal reporting requirements

NON-MONETARY (IN-KIND) POLITICAL								SCHEDULE A2
C	ONTRIBUT	ΓIONS						
Th	The Instruction Guide explains how to complete this form.					1	Total Pages Sch	nedule A2:
2 F	FILER NAME B	ill King				3 Fi	ler ID (Ethics Commis	ssion filers)
4	TOTAL OF UNI	TEMIZED IN-KIND POLITICA	AL CONTRIBUT	TONS		\$		
_	Date	6 Full name of contributor	out of state F	) A C (ID# )				
5	Date		Out of state F	AC(ID# )				
		Susan Boggio				8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	11/16/2015		Houston	TX 77046			1201.07	catering for campaign event
							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)	
	Community Vo	olunteer		N/A				
5	Date	6 Full name of contributor	out of state F	PAC(ID# )				
		Alex Martinez				8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	11/17/2015		Houston	TX 77006			488.17	food/beverages for campaign event
							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 F	PAC(ID# )				
		John Gannon	_			8	Amount of contributions (\$)	9 In-Kind contribution description
		7 Contributor address;	City;	State;	Zip Code			
	11/23/2015		Friendswood	TX 77546			4800.00	billboard advertising
							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)	
	Owner			John Gann	on, Inc.			

N	NON-MONETARY (IN-KIND) POLITICAL							SCHEDULE A2
C	ONTRIB	UTIONS						
The	The Instruction Guide explains how to complete this form.					1	Total Pages Sch	nedule A2:
2 F	ILER NAME	Bill King	, ,		'	3 F	iler ID (Ethics Commis	ssion filers)
4 T	OTAL OF U	INITEMIZED IN-KIND POLITICA	AL CONTRIBI	JTIONS		\$		
5	Date	6 Full name of contributor  Texas Asian Republican Club	out of stat	e PAC(ID# )		8	Amount of contributions (\$)	9 In-Kind contribution description
	12/1/2015	7 Contributor address;	City; Houston	State;	Zip Code		160.00 Check if travel outsid Schedule T	Mailer endorsement de of Texas, complete
10	Principal o	ccupation / Job title (See Instructions)		11 Emplo	yer (See Instru	iction	is)	
		ATTACH ADDITIO	ONAL COPIES	S OF THIS	SCHEDULI	E A	S NEEDED	
		If contributor is out-of-state PA	C, please see in	struction gui	de for additio	nal r	eporting requiremen	ts

I KOM I OLITIOAL	<u> </u>		
	The Instruction Guide exp	plains how to complete this form	•
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/26/2015	Comcast		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
33950.7	8550 West Tidwell Road		
	Houston TX 77040		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	ad buy	
	Advertising Expense	,	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/26/2015	John Perez		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
160	7723 Elm		
	Houston TX 77023		
8 PURPOSE OF EXPENDITURE		(b) Description	
	(a) category	Check if travel outside of Te	xas complete Schedule T
		Check if Austin, TX, officeho	
	Soloring ///ogan/Contract	sign placement	ide. If the expense
	Salaries/Wages/Contract Labor	sign placement	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/26/2015	Latonya Howard		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
	2400 Business Ctr Dr	2.p 0000	
600	2400 DUSINESS OIF DI		
	Herreton TV 77504		
a puppose of every	Houston TX 77584	(I) December	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/26/2015 Chinyere Ngwu 7 Payee address; 6 Amount (\$) City; Zip Code State; 14213 Stone Bluff Lane 600 Rosharon TX 77582 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission filers)		
	2 FILER NAME Bill King	3 File ID (Ethics Commission mers)		
4 Date	5 Payee name			
10/26/2015	OfficeMax			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
203.74	1576 West Gray			
	Houston TX 77019			
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	Office supplies		
	Expense			
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held		
expendituree to benefit C/OH		•		
4 Date	5 Payee name			
10/26/2015	Google			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500	1600 Amphitheatre Parkway			
	, coo / m.p.m.noam o r ammay			
	Mountain View CA 94043			
8 PURPOSE OF EXPENDITURE		(b) Description		
TORTOGE OF EXPERIENCE	(a) Oalogory	Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Advertising Expense	targeted advertising		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH	Candidate / Officerioder frame	office sought office held		
4 Date	5 Payee name			
10/26/2015	Latonya Howard	Chata. 7'a Cada		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
340	2400 Business Ctr Dr			
	Houston TX 77584			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/27/2015 **IHeartMedia** 7 Payee address; 6 Amount (\$) Zip Code City; State; P.O. Box 847654 12000 Dallas TX 75284 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
10/27/2015	KTRK-TV	0		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2605.25	3310 Bissonnet St.			
	Houston TX 77005			
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	ad buy		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
10/27/2015	Comcast			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
3740	8550 West Tidwell Road			
	Houston TX 77040			
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	ad buy		
	Advertising Expense			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH		· ·		
4 Date	5 Payee name			
10/27/2015	KPRC			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
		Stato, 21p 6666		
3400	8181 Southwest Freeway			
	TV			
	Houston TX 77074	T		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/27/2015 **KRIV** 7 Payee address; 6 Amount (\$) City; Zip Code State; 1530 4261 Southwest Fwy Houston TX 77027 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I KOM I OLITIOAL	<u> </u>		
	The Instruction Guide exp	plains how to complete this form	•
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/27/2015	KHOU TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1955	1945 Allen Parkway		
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	
	Advertising Evnence	ad buy	and any original and a second
	Advertising Expense	ad bdy	
9 Complete ONLY if direct	Candidate / Officehoder name o	 office sought of	ifice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/27/2015	Prosperity Bank		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
		State, Zip oode	
20	55 Waugh Dr., #100		
	Houston TX 77007	la>=	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	bank fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought of	ffice held
4 Date	5 Payee name		
10/28/2015	KTRK-TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1997.5	3310 Bissonnet St.		
	Houston TX 77005		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad buy 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/28/2015 **KRIV** 7 Payee address; 6 Amount (\$) City; Zip Code State; 1190 4261 Southwest Fwy Houston TX 77027 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense office sought 9 Complete ONLY if direct Candidate / Officehoder name office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/29/2015	KTRK-TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2082.5	3310 Bissonnet St.		
	Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	ad buy	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought of	fice held
experiancies to benefit 6/6/1			
4 Date	5 Payee name		
10/29/2015	Prosperity Bank		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
20	55 Waugh Dr., #100		
	Houston TX 77007		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Fees	bank fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held
[			
4 Date	5 Payee name		
10/29/2015	KTRK-TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5907.5	3310 Bissonnet St.		
	Houston TX 77005		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/29/2015 **KSEV Radio** 7 Payee address; 6 Amount (\$) City; Zip Code State; 1275 11451 Katy Freeway, Ste. 215 Houston TX 77079 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense radio ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	ı	3 Filer ID (Ethics Commission filers)		
	2 FILER NAME Bill King	5 File ID (Ethics Commission hers)		
4 Date	5 Payee name			
10/29/2015	KRIV			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
6290	4261 Southwest Fwy			
	Houston TX 77027			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Advertising Expense	ad buy		
	Advertising Expense	,		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
10/29/2015	KPRC			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
10030	8181 Southwest Freeway			
10030	0101 Counwest 1 reeway			
	Houston TV 77074			
8 PURPOSE OF EXPENDITURE	Houston TX 77074	(h) Description		
6 FURFUSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Advertising Expense	ad buy		
	0 11 1 10 11 1			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
	L			
4 Date	5 Payee name			
10/29/2015	KHOU TV			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
10646.25	1945 Allen Parkway			
	Houston TX 77019			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/29/2015 **KRIV** 7 Payee address; 6 Amount (\$) City; Zip Code State; 1487.5 4261 Southwest Fwy Houston TX 77027 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	-		
10/29/2015	KPRC			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1700	8181 Southwest Freeway			
	Houston TX 77074			
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  Check if travel outside of Text  Check if Austin, TX, officeho  ad buy		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I Office sought of	fice held	
4 Date	5 Payee name			
10/29/2015	Speedy Printing			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2963.61	3433 West Alabama, Suite C			
	Houston TX 77027			
8 PURPOSE OF EXPENDITURE	(a) Category  Printing Expense	(b) Description  Check if travel outside of Text  Check if Austin, TX, officehorstationary		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I Office sought of	fice held	
4 Date	5 Payee name			
10/29/2015	Chinyere Ngwu			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
600	14213 Stone Bluff Lane			
	Rosharon TX 77582	In		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/29/2015 John Perez 7 Payee address; 6 Amount (\$) Zip Code City; State; 7723 Elm 315 Houston TX 77023 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide exp	plains how to complete this form	<b>.</b>	
1 Total pages Schedule F1:	2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
10/29/2015	Latonya Howard			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
600	2400 Business Ctr Dr			
	Houston TX 77584			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te	exas, complete Schedule T	
		Check if Austin, TX, officeho	older living expense	
	Salaries/Wages/Contract	sign placement		
	Labor			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought of	ffice held	
experiordiffee to benefit 6/011				
4 Date	5 Payee name			
10/30/2015	Google			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500	1600 Amphitheatre Parkway			
	Mountain View CA 94043			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te	exas, complete Schedule T	
		Check if Austin, TX, officeho	older living expense	
	Advertising Expense	targeted advertising	9	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought of	ffice held	
4 Date	5 Payee name			
10/30/2015	ADP	7:01		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
26.65	13141 Northwest Freeway			
	Houston TX 77040	Ia. 5		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Payroll fees Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/30/2015 KTRK-TV 7 Payee address; 6 Amount (\$) City; Zip Code State; 3310 Bissonnet St. 7858.25 Houston TX 77005 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name	5 · 15 (Edition Commission more)		
10/30/2015	Speedy Printing	7.0.1		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
591.12	3433 West Alabama, Suite C			
	Houston TX 77027			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Printing Expense	stationary		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
experience to benefit 6/611				
4 Date	5 Payee name			
10/30/2015	KHOU TV			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
12303.75	1945 Allen Parkway			
	Houston TX 77019			
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	ad buy		
	/ tavertiening Expense			
9 Complete ONLY if direct	Candidate / Officehoder name	l office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
10/30/2015	KPRC			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
8808.55	8181 Southwest Freeway			
0000.00	2.0. 224			
	Houston TX 77074			
8 PURPOSE OF EXPENDITURE		(b) Description		
J JOE OF EAR ENDITORE	(~, 54.090.)	(%) = 333.iption		

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad buy 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/30/2015 **KRIV** 7 Payee address; 6 Amount (\$) City; Zip Code State; 7735 4261 Southwest Fwy Houston TX 77027 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense office sought 9 Complete ONLY if direct Candidate / Officehoder name office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
10/30/2015	Pinkcilantro LLC			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
		State, Zip Code		
5000	11333 Chimney Rock Rd			
	Houston TX 77035	Ta. 2		
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	Consulting fee		
	0 11 1 10 11 1			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
10/30/2015	Westin Galleria	Charles 7'- Code		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
6800	5011 Westheimer			
	Houston TX 77056	Taxa		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Event Expense	Venue fee		
O Complete ONLY if direct	Candidate / Officehoder name	atti an halid		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officenoder name	office sought office held		
4 Date	5 Payee name			
10/30/2015	Westin Galleria	State: 7in Code		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
4739.25	5011 Westheimer			
	Houston TX 77056			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Venue fee **Event Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/30/2015 Westin Galleria 7 Payee address; 6 Amount (\$) City; Zip Code State; 12289.26 5011 Westheimer Houston TX 77056 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Venue fee **Event Expense** office sought 9 Complete ONLY if direct Candidate / Officehoder name office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
10/30/2015	Westin Galleria			
		Chate: 7in Code		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
5332.33	5011 Westheimer			
	Houston TX 77056			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Event Expense	Venue fee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
11/1/2015	Kelly Randall			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2500	2502 Rosewood			
	Houston TX 77004			
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	Salary		
	Labor			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
11/1/2015	Julia McGowen			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1750	3603 Chenevert Street, Apt. 4	403		
	Houston TX 77004			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/1/2015 Christopher A. Watson 7 Payee address; 6 Amount (\$) City; Zip Code State; 1750 909 Texas Avenue, #1413 Houston TX 77002 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

TROM TO LITTOR A CONTRIBOTIONS					
	The Instruction Guide ex	plains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name				
11/1/2015	Philip J. Kunetka				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
1250	5611 Edith St.				
	Houston TX 77081				
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	Salary			
	Labor				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
experientalise to benefit 0/011					
4 Date	5 Payee name				
11/1/2015	ADP				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
554.69	13141 Northwest Freeway				
	Houston TX 77040				
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	Payroll taxes			
	Labor				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
A Dete	F Davis a serie				
4 Date	5 Payee name				
11/2/2015	Chinyere Ngwu				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
480	14213 Stone Bluff Lane				
	Rosharon TX 77582				
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/2/2015 John Perez 7 Payee address; 6 Amount (\$) Zip Code City; State; 7723 Elm 1500 Houston TX 77023 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
11/2/2015	Star Pizza			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
135.03	77 Harvard St.			
	Houston TX 77007			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te	exas, complete Schedule T	
		Check if Austin, TX, officeh	older living expense	
	Food/Beverage Expense	volunteer refreshm		
	1 dod/beverage Expense			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held	
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/2/2015	OfficeMax			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
155.31	1576 West Gray			
	Houston TX 77019			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te	exas, complete Schedule T	
		Check if Austin, TX, officeho	older living expense	
	Office Overhead/Rental	Office supplies		
	Expense	"		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held	
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/2/2015	Prosperity Bank			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
20	55 Waugh Dr., #100	·		
	Houston TX 77007			
8 PURPOSE OF EXPENDITURE		(b) Description		
O TOKE OF EXPENDITURE	(a) Jaicyory	(n) nescribrion		

#### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense bank fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/4/2015 United States Postal Service 7 Payee address; 6 Amount (\$) City; State; Zip Code 1900 W Gray 441 Houston TX 77019 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental postage Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
11/4/2015	Comcast			
		Chata. 7in Coda		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
299.05	8550 West Tidwell Road			
	Houston TX 77040			
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	Campaign headquarters internet/phone/cable		
	Expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
[				
4 Date	5 Payee name			
11/4/2015	OfficeMax			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
540.29	1576 West Gray			
	Houston TX 77019			
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	Office supplies		
	Expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
11/5/2015	Nicholas Reed			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
3850	1001 Tabor Street			
	Housotn TX 77009			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense research and policy work Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/5/2015 The Tribune 7 Payee address; City; 6 Amount (\$) Zip Code State; 1036 First Street, Suite C 1200 Humble TX 77338 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	Filer ID (Ethics Commission filers)		
4 Date	5 Payee name				
11/5/2015	5900 Interests Ltd				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
1793	5959 Richmond Ave. Suite 44	0			
	Houston TX 77057				
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		
	Office Overhead/Rental	office rent			
	Expense				
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought office	ce held		
expendituree to benefit C/OH					
4 Date	5 Payee name				
11/5/2015	Keith Stevenson				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
200	6022 Park Circle Dr.				
	Houston TX 77057				
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		
	Loan	contribution refund			
	Repayment/Reimbursement				
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought offic	ce held		
expendituree to benefit C/OH					
4 Date	5 Payee name				
11/5/2015	FedEx				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
3.25	2200 SW Freeway				
	ĺ				
	Houston TX 77098				
8 PURPOSE OF EXPENDITURE		(b) Description			
	T. Control of the Con				

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** printing 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/5/2015 FedEx 7 Payee address; 6 Amount (\$) City; Zip Code State; 67.54 2200 SW Freeway Houston TX 77098 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense printing **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I Itolii i OLIIIOAL	CONTINIDOTIONO		
	The Instruction Guide exp	plains how to complete this form	•
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/5/2015	United States Postal Service		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
245	1319 Richmond Ave.		
	Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Office Overhead/Rental	postage	
	Expense	, ,	
9 Complete ONLY if direct	Candidate / Officehoder name o	l ffice sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/5/2015	Google		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	1600 Amphitheatre Parkway		
	Mountain View CA 94043		
8 PURPOSE OF EXPENDITURE		(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	
	Advertising Expense	targeted advertising	
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name o	 ffice sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/6/2015	   IHeartMedia		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
27254	P.O. Box 847654		
2.201	1.31.20% 017.001		
	Dallas TX 75284		
8 PURPOSE OF EXPENDITURE		(b) Description	
. J JOE OF EAR ENDITORE	(4) 54109019	(2) 2000.19.1011	

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/6/2015 Cumulus Radio 7 Payee address; 6 Amount (\$) City; Zip Code State; 10200 9801 Westheimer, Suite 700 Houston TX 77042 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
11/6/2015	Space Commerce Conference and Exposition			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
645	313 South Patrick Street			
	Alexandria VA 22314			
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	(b) Description  Check if travel outside of Texa  Check if Austin, TX, officehold  event tickets		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought offi	ce held	
4 Date	5 Payee name			
11/6/2015	ADP			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
69.27	13141 Northwest Freeway			
	Houston TX 77040	In 5		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Text  Check if Austin, TX, officehold  Payroll fees	•	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ce held	
4 Date	5 Payee name			
11/7/2015	Walden & Associates			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
15000	310 Sul Ross St.			
	Houston TX 77006	Ta. 2		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense campaign fundraising and consulting Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/7/2015 Sprint 2 Print 7 Payee address; 6 Amount (\$) City; Zip Code State; 5737.25 8748 Clay Rd. Ste. 300 Houston TX 77080 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense campaign t-shirts **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
11/9/2015	Comcast			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1275	8550 West Tidwell Road			
	Houston TX 77040			
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	ad buy		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/9/2015	Comcast			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
59999.8	8550 West Tidwell Road			
	Houston TX 77040			
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	ad buy		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/9/2015	CBS Radio			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
7947.5	24 Greeway Plaza, Suite 1900	)		
	Houston TX 77046			
8 PURPOSE OF EXPENDITURE		(b) Description		

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/9/2015 Balloon Decorator, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 7635 Braesdale 1786.13 Houston TX 77071 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense decorations for campaign event **Event Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
11/9/2015	Cinthia M. Moore Make-Up A	Artist, LP		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
850	5518 Cheltenham Drive			
	Houston TX 77096			
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	ad production		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/9/2015	Chinyere Ngwu			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
480	14213 Stone Bluff Lane			
	Rosharon TX 77582			
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	sign placement		
	Labor	o.g. placomon		
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/9/2015	Gulf Coast Hot Shot			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
752	PO Box 935			
. 02	25.000			
	Sugar Land TX 77487			
8 PURPOSE OF EXPENDITURE	-	(b) Description		
	\-, - <del></del>	[v./ F		

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental courier services Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/9/2015 Clear Channel 7 Payee address; 6 Amount (\$) City; Zip Code State; 20620.73 12852 Westheimer Rd. Houston TX 77077 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/9/2015	Best Buy		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
110.19	5133 Richmond Ave.		
	Houston TX 77056		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	
		Check if Austin, TX, officehold	der living expense
	Office Overhead/Rental Expense	office supplies	
	'		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/9/2015	Westin Galleria		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
811.38	5011 Westheimer		
	Houston TX 77056		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Event Expense	Venue fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought offi	ice held
4 Date	5 Payee name		
11/9/2015	Best Buy		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
79.01	5133 Richmond Ave.		
	Houston TX 77056		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental office supplies Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Latonya Howard 7 Payee address; 6 Amount (\$) City; Zip Code State; 2400 Business Ctr Dr 400 Houston TX 77584 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	2	
11/10/2015	Robin Stone Collins		
		State. 7in Code	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2621	615 Bel Road		
	Kemah TX 77565		
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	graphic design	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/10/2015	Jewish Herald Voice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2787	3403 Audley St.		
	Houston TX 77098		
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 buy	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
experience to benefit 6/611			
4 Date	5 Payee name		
11/10/2015	3 Men Movers		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
260	6853 Southwest Fwy		
	Houston TX 77074		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense office furniture move Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/11/2015 Pinkcilantro LLC 7 Payee address; City; 6 Amount (\$) Zip Code State; 5000 11333 Chimney Rock Rd Houston TX 77035 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting fee Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name	()		
11/11/2015				
	Campaign Strategies, Inc.	State: 7's Code		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
15000	PO Box 3308			
	Houston TX 77253			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Consulting Expense	Consulting fee		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
11/12/2015	Constant Contact			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
207.87	85 Second Street, Suite 100			
	San Francisco CA 94105			
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	Email marketing		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
11/12/2015	Google			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500	1600 Amphitheatre Parkway			
	Mountain View CA 94043			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense advertising 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/13/2015 KTRK-TV 7 Payee address; 6 Amount (\$) Zip Code City; State; 3310 Bissonnet St. 10727 Houston TX 77005 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	,	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/13/2015	KHOU TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
11008	1945 Allen Parkway		
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	cas, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Advertising Expense	ad buy	
	J 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
9 Complete ONLY if direct	Candidate / Officehoder name	I office sought off	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/13/2015	KRIV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7395	4261 Southwest Fwy		
	Houston TX 77027		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Advertising Expense	ad buy	
	/ tarefileing _/pense	·	
9 Complete ONLY if direct	Candidate / Officehoder name	l office sought off	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/13/2015	IHeartMedia		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
24965.35	P.O. Box 847654		
	Dallas TX 75284		
8 PURPOSE OF EXPENDITURE		(b) Description	
1	T.	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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/13/2015 **CBS** Radio 7 Payee address; City; 6 Amount (\$) Zip Code State; 6196.5 24 Greeway Plaza, Suite 1900 Houston TX 77046 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	ı	xplains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/13/2015	KSEV Radio	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
2550	11451 Katy Freeway, Ste. 21	5
	Houston TX 77079	
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	radio ad buy
	J 1 1 1 3 7 1 1 1	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/13/2015	COX Broadcasting	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5917.7	1990 Post Oak Blvd., Suite 23	300
	Houston TX 77056	
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	ad
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
experientalise to belief 6/011		
4 Date	5 Payee name	
11/13/2015	Cumulus Radio	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
9000	9801 Westheimer, Suite 700	
	Houston TX 77042	
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 Bill King 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 11/13/2015 **KPRC** 7 Payee address; 6 Amount (\$) City; Zip Code State; 11177.5 8181 Southwest Freeway Houston TX 77074 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense office sought 9 Complete ONLY if direct Candidate / Officehoder name office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/13/2015	Speedy Printing		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3255.45	3433 West Alabama, Suite C		
	Houston TX 77027		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Printing Expense	stationary	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
experience to benefit 6/6/1			
4 Date	5 Payee name		
11/13/2015	Speedy Printing		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
871.94	3433 West Alabama, Suite C		
	Houston TX 77027		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	•
		Check if Austin, TX, officeho	older living expense
	Printing Expense	stationary	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
4 Date	5 Payee name		
11/13/2015 6 Amount (\$)	Campos Communications 7 Payee address; City;	State; Zip Code	
		σιαι <del>σ</del> , Διρ συμ <del>ε</del>	
8000	816 Ralfallen		
	Houston TV 77000		
8 PURPOSE OF EXPENDITURE	Houston TX 77008	(b) Description	
	11-,,	11-, -000	

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/13/2015 Sarah Tropoli 7 Payee address; 6 Amount (\$) Zip Code City; State; 3105 Avalon PI 7000 Houston TX 77019 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
11/13/2015	Colon & Company			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
3500	3311 Richmond Ave., Suite 31	9		
	Houston TX 77098			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	as, complete Schedule T	
		Check if Austin, TX, officehol	der living expense	
	Consulting Expense	consulting		
	σ ο πο επιπισ			
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought off	ice held	
expendituree to benefit C/OH				
4 Date	5 Payee name			
11/13/2015	Reel Connection Media, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
3375	16115 Parish Hall Dr.			
	Spring TX 77379			
8 PURPOSE OF EXPENDITURE		(b) Description		
		Check if travel outside of Tex	as, complete Schedule T	
		Check if Austin, TX, officehol	der living expense	
	Advertising Expense	video production and		
	Advertising Expense	mass production and	2 0 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought off	ice held	
expendituree to benefit C/OH		-		
4 Date	5 Payee name			
11/13/2015	Talegate			
<b>6</b> Amount (\$)	7 Payee address; City;	State; Zip Code		
1250	636 FM 977	•		
1200				
	Leona Texas 75850			
8 PURPOSE OF EXPENDITURE		(b) Description		
	\-, <del></del> 9,	(·/		

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad production Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/13/2015 ContentActive LLC 7 Payee address; 6 Amount (\$) Zip Code City; State; PO Box 2279 357.23 Cypress TX 77410 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense website hosting Advertising Expense Candidate / Officehoder name 9 Complete ONLY if direct office sought office held expendituree to benefit C/OH

	The Instruction Cuids as	cplains how to complete this form.
1 Total pages Schedule F1:	ı	3 Filer ID (Ethics Commission filers)
	2 FILER NAME Bill King	3 Ther ID (Edites Continues of the 13)
4 Date	5 Payee name	
11/13/2015	OfficeMax	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
32.96	1576 West Gray	
	Houston TX 77019	
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	Office supplies
	Expense	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		•
4 Date	5 Payee name	
11/13/2015	OfficeMax	
<b>6</b> Amount (\$)	7 Payee address; City;	State; Zip Code
124.48	1576 West Gray	
0	l sor o resor oray	
	Houston TX 77019	
8 PURPOSE OF EXPENDITURE		(b) Description
TORTOGE OF EXPENDITORE	(a) Oalogory	Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Office Overhead/Rental Expense	Office supplies
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH	Candidate / Officerioder frame	office sought office held
4 Date	5 Payee name	
11/13/2015	Sue Walden	Obstance 7% Oasta
6 Amount (\$)	7 Payee address; City;	State; Zip Code
184	2726 Bissonnet, #240-20	
	Houston TX 77005	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense reimburse office supplies Loan Repayment/Reimbursement 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/13/2015 Prosperity Bank 7 Payee address; 6 Amount (\$) City; Zip Code State; 20 55 Waugh Dr., #100 Houston TX 77007 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense bank fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

THOM TO LITTOR CONTINUES TO THE			
	The Instruction Guide ex	xplains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name		
11/15/2015	Julia McGowen		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1750	3603 Chenevert Street, Apt. 4	103	
	Houston TX 77004		
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	Salary	
	Labor		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
experialtaree to benefit 6/011			
4 Date	5 Payee name		
11/15/2015	Kelly Randall		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2500	2502 Rosewood		
	Houston TX 77004		
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	Salary	
	Labor		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/15/2015	Christopher A. Watson		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1750	909 Texas Avenue, #1413		
	Houston TX 77002		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/15/2015 Philip J. Kunetka 7 Payee address; 6 Amount (\$) Zip Code City; State; 1250 5611 Edith St. Houston TX 77081 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/15/2015	ADP		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
554.69	13141 Northwest Freeway		
	Houston TX 77040		
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
	Salaries/Wages/Contract	Payroll taxes	
	Labor		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office	ce held
experientative to benefit 0/011			
4 Date	5 Payee name		
11/16/2015	Comcast		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
60001.5	8550 West Tidwell Road		
	Houston TX 77040		
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
	Advertising Expense	ad buy	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office	ce held
	<u> </u>		
4 Date	5 Payee name		
11/16/2015	Chinyere Ngwu		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
480	14213 Stone Bluff Lane		
	Rosharon TX 77582	I	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/16/2015 Virgin Mobile 7 Payee address; 6 Amount (\$) City; Zip Code State; 10 Independence Blvd. 192.95 Warren NJ 7059 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 Office supplies Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	T	3 Filer ID (Ethics Commission filers)
4 Date	2 FILER NAME Bill King 5 Payee name	5 File ID (Ethics Commission hers)
11/16/2015	Houstonian Hotel	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
1089.54	111 North Post Oak Ln	
	Houston TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Event Expense	Venue rental
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/16/2015	Houstonian Hotel	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
45	111 North Post Oak Ln	
	Houston TX 77024	
8 PURPOSE OF EXPENDITURE		(b) Description
	(*, * * * * *)	Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	F000	Parking fee
	Fees	raiking lee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		omes seagen
4 Date	5 Payee name	
11/17/2015	Lonnie Green	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
		Claid, Zip Codd
566	10314 Carter Rd.	
	Houston TX 77070	Topic
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/17/2015 Shandys Cafe 7 Payee address; 6 Amount (\$) City; Zip Code State; 5814 Memorial Dr. 73.09 Houston TX 77007 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense volunteer refreshments Food/Beverage Expense Candidate / Officehoder name 9 Complete ONLY if direct office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	1
11/17/2015	United States Postal Service	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
147	1900 W Gray	
	Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  postage
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Diffice sought office held
4 Date	5 Payee name	
11/18/2015	Pinkcilantro LLC	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5000	11333 Chimney Rock Rd	
	Houston TX 77035	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Consulting fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Office sought office held
4 Date	5 Payee name	
11/18/2015	Speedy Printing	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
6500	3433 West Alabama, Suite C  Houston TX 77027	
DUDDOSE OF EVDENDITUDE		(h) Description
8 PURPOSE OF EXPENDITURE	rai Calegory	(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** mailing 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/18/2015 ZapBoomBang Studios LLC 7 Payee address; 6 Amount (\$) City; State; Zip Code 15383 3336 Richmond Ave., Suite 400 Houston TX 77098 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense video production Advertising 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 Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/18/2015	Google		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	1600 Amphitheatre Parkway		
	Mountain View CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	advertising	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	KTRK-TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
13234.5	3310 Bissonnet St.		
	Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	ad buy	
	/tavertiening Expense	,	
9 Complete ONLY if direct	Candidate / Officehoder name	l ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	Comcast		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
65001.2	8550 West Tidwell Road		
	Houston TX 77040		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/19/2015 **KRIV** 7 Payee address; 6 Amount (\$) City; Zip Code State; 8202.5 4261 Southwest Fwy Houston TX 77027 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide exp	lains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Fi	ler ID (Ethics Commission filers)
4 Date	5 Payee name		
11/19/2015	KHOU TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14280	1945 Allen Parkway		
	Houston TX 77019		
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	ad buy	
	Advertising Expense	,	
9 Complete ONLY if direct	Candidate / Officehoder name c	ffice sought office h	neld
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	CBS Radio		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6817	24 Greeway Plaza, Suite 1900		
	Houston TX 77046		
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	ad	
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought office h	neld
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	KPRC		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
16107.5	8181 Southwest Freeway		
	Houston TX 77074		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/19/2015 Cumulus Radio 7 Payee address; 6 Amount (\$) City; Zip Code State; 8000 9801 Westheimer, Suite 700 Houston TX 77042 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/19/2015	COX Broadcasting		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5922.8	1990 Post Oak Blvd., Suite 23	00	
	Houston TX 77056		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	ad	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	KSEV Radio		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
4760	11451 Katy Freeway, Ste. 215		
	Houston TX 77079		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	radio ad buy	-
	Advertising Expense	,	
9 Complete ONLY if direct	Candidate / Officehoder name o	l ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	IHeartMedia		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
28437.6	P.O. Box 847654		
- 15115			
	Dallas TX 75284		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/19/2015 Lonnie Green 7 Payee address; 6 Amount (\$) Zip Code City; State; 10314 Carter Rd. 481 Houston TX 77070 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	·		
	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name		
11/19/2015	Prosperity Bank		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
20	55 Waugh Dr., #100		
	Houston TX 77007		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	bank fee	
	F 665	Sum rec	
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	4Imprint		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
287.89	101 Commerce St	Cato, Lip code	
207.09	To i Commerce St		
	Oshkosh WI 54901		
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	campaign materials	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought office held	
,			
4 Date	5 Payee name		
11/20/2015	Radio One Houston		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
9940	24 Greenway Plaza, Suite 900		
	Houston TX 77046		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 Speedy Printing 7 Payee address; City; 6 Amount (\$) Zip Code State; 3500 3433 West Alabama, Suite C Houston TX 77027 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense mailing **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	cplains how to complete this forn	1.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/20/2015	Jewish Herald Voice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2787	3403 Audley St.		
	Houston TX 77098		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Advertising Expense	advertising buy	•
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/20/2015	ADP		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
69.27	13141 Northwest Freeway		
	Houston TX 77040		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Fees	Payroll fees	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/20/2015	OfficeMax		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
84.41	1576 West Gray		
<b>-</b>			
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE		(b) Description	
O . OK! OOL O! LAFEINDITURE	(a) Jaiogory	(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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office supplies Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/21/2015 Begala-McGrath 7 Payee address; City; 6 Amount (\$) Zip Code State; 20000 4141 Coleridge Street Houston TX 77005 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Media consulting Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/21/2015	Reel Connection Media, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	16115 Parish Hall Dr.		
	Spring TX 77379		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Advertising Expense	video production and	d editing
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/21/2015	Reel Connection Media, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1920	16115 Parish Hall Dr.		
	Spring TX 77379		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Advertising Expense	video production and	
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought offi	ice held
expendituree to benefit C/OH		-	
4 Date	5 Payee name		
11/21/2015	Pinkcilantro LLC		
<b>6</b> Amount (\$)	7 Payee address; City;	State; Zip Code	
4000	11333 Chimney Rock Rd	•	
	1.000 C.minioy Hook Hu		
	Houston TX 77035		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting fee Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/21/2015 The WhatOs UP Program 7 Payee address; 6 Amount (\$) City; Zip Code State; 15000 12337 Jones Road, Suite 450 Houston TX 77070 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	lains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Fi	er ID (Ethics Commission filers)
4 Date	5 Payee name		
11/21/2015	Talegate		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5328	636 FM 977		
	Leona Texas 75850		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas,	complete Schedule T
		Check if Austin, TX, officeholder	iving expense
	Advertising Expense	ad production	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought office h	neld
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Univision		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
10200	5100 Southwest Freeway		
	Houston TX 77056		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas,	complete Schedule T
		Check if Austin, TX, officeholder	iving expense
	Advertising Expense	ad	
	/ tarefulling _xperior		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought office h	neld
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	CBS Radio		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6851	24 Greeway Plaza, Suite 1900		
	Houston TX 77046		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/23/2015 **IHeartMedia** 7 Payee address; 6 Amount (\$) Zip Code City; State; P.O. Box 847654 28038.1 Dallas TX 75284 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form	1.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/23/2015	Radio One Houston		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
9936.5	24 Greenway Plaza, Suite 900	)	
	Houston TX 77046		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Advertising Expense	ad	5 .
	Advertising Expense	au au	
9 Complete ONLY if direct	Candidate / Officehoder name o	   ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	COX Broadcasting		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5939.6	1990 Post Oak Blvd., Suite 23	00	
	Houston TX 77056		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Advertising Expense	ad	
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Cumulus Radio		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8000	9801 Westheimer, Suite 700		
	Houston TX 77042		
8 PURPOSE OF EXPENDITURE		(b) Description	
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#### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/23/2015 Lonnie Green 7 Payee address; 6 Amount (\$) Zip Code City; State; 10314 Carter Rd. 260 Houston TX 77070 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide 6	explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission fi	lers)
4 Date	5 Payee name		
11/23/2015	Chinyere Ngwu		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
480	14213 Stone Bluff Lane		
	Rosharon TX 77582		
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	sign placement	
	Labor		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Comcast		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1479	8550 West Tidwell Road		
	Houston TX 77040		
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	ad buy	
	and the second s		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Telemundo		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
9219	1235 North Loop W., #125		
	,		
	Houston TX 77008		
8 PURPOSE OF EXPENDITURE		(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/24/2015 **KPRC** 7 Payee address; 6 Amount (\$) Zip Code City; State; 11050 8181 Southwest Freeway Houston TX 77074 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	<u>'</u>	
11/24/2015	KHOU TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8925	1945 Allen Parkway		
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  ad buy	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/24/2015	KRIV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7055	4261 Southwest Fwy		
	Houston TX 77027		
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  ad buy	
	<u> </u>		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/24/2015	Prosperity Bank		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
20	55 Waugh Dr., #100		
	Houston TX 77007		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense bank fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/24/2015 KTRK-TV 7 Payee address; 6 Amount (\$) Zip Code City; State; 3310 Bissonnet St. 13617 Houston TX 77005 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising 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.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/24/2015	Pastorini-Bosby Talent, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3057.32	6300 W. Loop South, #350		
	Bellaire TX 77401		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Advertising Expense	radio ad production	1
	and the same of th		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/24/2015	Conservative Media Propert	ies	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
75000	2211 Norfolk St., Suite 920		
	Houston TX 77098		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Advertising Expense	ad	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/24/2015	Lonnie Green		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
177	10314 Carter Rd.		
	Houston TX 77070		
8 PURPOSE OF EXPENDITURE		(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/24/2015 Garden Oaks Post 560 The American Legion 7 Payee address; 6 Amount (\$) Zip Code City; State; 3720 Alba Road 400 Houston TX 77018 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense venue fee **Event Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/25/2015	Latonya Howard		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
300	2400 Business Ctr Dr		
	Houston TX 77584		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Salaries/Wages/Contract	sign placement	
	Labor		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/25/2015	Lonnie Green		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
400	10314 Carter Rd.		
	Houston TX 77070		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Salaries/Wages/Contract	sign placement	
	Labor	<u>.</u>	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/25/2015	Speedy Printing		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
4436.22	3433 West Alabama, Suite C		
	Houston TX 77027		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** campaign materials 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/25/2015 Sprint 2 Print 7 Payee address; 6 Amount (\$) City; Zip Code State; 908.76 8748 Clay Rd. Ste. 300 Houston TX 77080 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense campaign t-shirts **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	-	
11/25/2015	Google		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	1600 Amphitheatre Parkway		
	Mountain View CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description  Check if travel outside of Tex  Check if Austin, TX, officehold	
	Advertising Expense	advertising	
O Complete ONLY if direct	Candidate / Officehoder name	office cought	ice held
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officenoder name	office sought offi	ice neia
4 Date	5 Payee name		
11/26/2015	Jewish Herald Voice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2787	3403 Audley St.		
	Houston TX 77098		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Advertising Expense	advertising buy	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ice held
4 Date	5 Payee name		
11/27/2015	The Eppstein Group		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
17500	4055 International Plaza, Sui	e 600	
	Fort Worth TX 76109		
8 PURPOSE OF EXPENDITURE		(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Expense survey 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/27/2015 J-Rad, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 5210 Sage Square St. 2500 Houston TX 77056 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide or	nlains how to complete this form	
1 Total pages Schedule F1:	T	plains how to complete this form.	cs Commission filers)
	2 FILER NAME Bill King	3 Filer ID (Ethi	Co COMINISSION MEIS)
4 Date	5 Payee name		
11/27/2015	Kubis Interactive, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6400	1210 West Clay, Suite 26		
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete S	Schedule T
		Check if Austin, TX, officeholder living exper	
	Advertising Evpense	ads	
	Advertising Expense		
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/27/2015	Houstonian Hotel		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
		State, Zip Gode	
363.18	111 North Post Oak Ln		
	Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete S	Schedule T
		Check if Austin, TX, officeholder living exper	nse
	Event Expense	Venue rental	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
oxponuncios to sonom e, e			
4 Date	5 Payee name		
11/27/2015	FedEx		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
26	2200 SW Freeway		
	Houston TX 77098		
8 PURPOSE OF EXPENDITURE		(b) Description	
8 PURPOSE OF EXPENDITURE		(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental courier services Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 KHOU TV 7 Payee address; 6 Amount (\$) Zip Code City; State; 9945 1945 Allen Parkway Houston TX 77019 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held 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 Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/30/2015	KPRC		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
10030	8181 Southwest Freeway		
	Houston TX 77074		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of To	exas, complete Schedule T
		Check if Austin, TX, officeh	
	Advertising Expense	ad buy	
	Advertising Expense	ad buy	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/30/2015	Jewish Herald Voice		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2787	3403 Audley St.		
2101	o 100 / tadioy of:		
	Houston TX 77098		
8 PURPOSE OF EXPENDITURE		(b) Description	
6 FORFOSE OF EXPENDITORE	(a) Calegory		avea complete Cabadula T
		Check if travel outside of To	
		Check if Austin, TX, officeh	older living expense
	Advertising Expense	advertising buy	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
11/30/2015	Latonya Howard		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
480	2400 Business Ctr Dr		
	Houston TX 77584		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salaries/Wages/Contract sign placement Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 Lonnie Green 7 Payee address; 6 Amount (\$) Zip Code City; State; 10314 Carter Rd. 380 Houston TX 77070 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense sign placement Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide exp	plains how to complete this form.	•
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/30/2015	Chinyere Ngwu		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
480	14213 Stone Bluff Lane		
	Rosharon TX 77582		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Salaries/Wages/Contract	sign placement	
	Labor		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held
experientated to benefit 6/011			
4 Date	5 Payee name		
11/30/2015	Comcast		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
59999.8	8550 West Tidwell Road		
	Houston TX 77040		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	ad buy	
	ů .		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held
experioraree to benefit C/On			
4 Date	5 Payee name		
11/30/2015	KTRK-TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
22950	3310 Bissonnet St.		
	Houston TX 77005		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 Prosperity Bank 7 Payee address; 6 Amount (\$) City; Zip Code State; 55 Waugh Dr., #100 20 Houston TX 77007 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense bank fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	<u> </u>
11/30/2015	OfficeMax	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
137.76	1576 West Gray	
	Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Office supplies
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/30/2015	OfficeMax	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
25.98	1576 West Gray	
	Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Office supplies
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/30/2015	Prosperity Bank	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
23	55 Waugh Dr., #100	
	Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense bank fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 Prosperity Bank 7 Payee address; 6 Amount (\$) City; Zip Code State; 20 55 Waugh Dr., #100 Houston TX 77007 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense bank fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	·	
12/1/2015	KTRK-TV		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3420	3310 Bissonnet St.		
	Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  Check if travel outside of Tex  Check if Austin, TX, officehold  ad buy	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ice held
4 Date	5 Payee name		
12/1/2015	Sprint 2 Print		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2976.88	8748 Clay Rd. Ste. 300		
	Houston TX 77080		
8 PURPOSE OF EXPENDITURE	(a) Category  Printing Expense	(b) Description  Check if travel outside of Tex  Check if Austin, TX, officehold  signs	•
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ice held
4 Date	5 Payee name		
12/1/2015	Philip Bryant and Associates	s LLC	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
19020	PO Box 2303		
	Houston TX 77252	1	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising Expense ad 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 Freddie Oliver 7 Payee address; 6 Amount (\$) City; Zip Code State; 11006 Long Gate 3500 Houston TX 77047 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I KOM I OLITIOAL	<u> </u>		
	The Instruction Guide exp	plains how to complete this form	•
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/1/2015	Campos Communications		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6420	816 Ralfallen		
	Houston TX 77008		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Consulting Expense	Consulting	
	Concuming Expenses		
9 Complete ONLY if direct	Candidate / Officehoder name o	l office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	Google		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	1600 Amphitheatre Parkway		
	Mountain View CA 94043		
8 PURPOSE OF EXPENDITURE		(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	•
	Advertising Expense	advertising	3. 1
	Advertising Expense	advortioning	
9 Complete ONLY if direct	Candidate / Officehoder name o	 office sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	Thomas Graphics, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5648.49	PO Box 142226	, , , , , , , , , , , , , , , , , , , ,	
00-073	1 0 000 172220		
	Auctin TV 70714		
8 PURPOSE OF EXPENDITURE	Austin TX 78714	(b) Description	
O FUNEUSE OF EXPENDITURE	(a) Galegory	(n) Describrion	

#### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense printing and mailing **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 Julia McGowen 7 Payee address; 6 Amount (\$) City; Zip Code State; 1750 3603 Chenevert Street, Apt. 403 Houston TX 77004 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/1/2015	Kelly Randall		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2500	2502 Rosewood		
	Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Salaries/Wages/Contract	Salary	
	Labor		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
experientative to belieff 6/011			
4 Date	5 Payee name		
12/1/2015	Christopher A. Watson		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1750	909 Texas Avenue, #1413		
	Houston TX 77002		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Salaries/Wages/Contract	Salary	
	Labor		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
4 Date	5 Payee name		
12/1/2015	Philip J. Kunetka		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1250	5611 Edith St.		
	Houston TX 77081		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Salary Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 **ADP** 7 Payee address; 6 Amount (\$) City; Zip Code State; 554.69 13141 Northwest Freeway Houston TX 77040 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Payroll taxes Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide or	cplains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
12/2/2015	KRIV	
		State: 7in Code
6 Amount (\$)	7 Payee address; City;	State; Zip Code
10300	4261 Southwest Fwy	
	Houston TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Advertising Expense	ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
12/2/2015	5900 Interests Ltd	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
1793	5959 Richmond Ave. Suite 44	40
	Houston TX 77057	
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	office rent
	Expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
12/2/2015	KHOU TV	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
7000	1945 Allen Parkway	
	Houston TX 77019	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/2/2015 **KPRC** 7 Payee address; 6 Amount (\$) City; Zip Code State; 7000 8181 Southwest Freeway Houston TX 77074 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	,
12/2/2015	Univision	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5032	5100 Southwest Freeway	
	Houston TX 77056	
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	ad
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
12/2/2015	Speedy Printing	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
2021.8	3433 West Alabama, Suite C	
	Houston TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Printing Expense	mailing
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
A Dete	E Davis acres	
4 Date	5 Payee name	
10/25/2015	Aristotle International, Inc.	Obstance 7 obstance
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5	205 Pennsylvania Avenue SE	:
	W	
. DUDDOOF OF TVOTUS	Washington DC 20003	Tax 5
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/25/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

I KOW I OLITICAL	CONTRIBUTIONS		
	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/25/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought of	fice held
[			
4 Date	5 Payee name		
10/25/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
12.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	
		Check if Austin, TX, officeho	-
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought of	fice held
expendituree to benefit C/OH	Candidate / Officeriodel frame	inice sought of	nce neid
4 Date	5 Payee name		
10/25/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
12.5	205 Pennsylvania Avenue SE	, , , , , , , , , , , , , , , , , , , ,	
12.0	200 i Omioyivama Avonus OL		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE		(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/26/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
10/26/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
50	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	_	(b) Description		
		Check if travel outside of Tex	as, complete Schedule T	
		Check if Austin, TX, officehold		
	F	Credit Card Processi		
	Fees	Credit Gard 1 100ess	ing i ee	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ce held	
expendituree to benefit C/OH	oundidate / Onlochoder Harris	moc sought om	oo nola	
4 Date	5 Payee name			
10/27/2015 6 Amount (\$)	Aristotle International, Inc.  7 Payee address; City;	State; Zip Code		
		State, Zip Code		
1.25	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	as, complete Schedule T	
		Check if Austin, TX, officehold	der living expense	
	Fees	Credit Card Process	ing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought offi	ce held	
experience to benefit 6/611				
4 Date	5 Payee name			
10/27/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
12.5	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	-	(b) Description		
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/27/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	,	
10/28/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
12.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held	
4 Date	5 Payee name		
10/28/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
10/28/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003	To a constant of the constant	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/29/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 1.25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	<u>'</u>	
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held	
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/30/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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4 Date	5 Payee name		
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held	
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4 Date	5 Payee name		
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/30/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 1.25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
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Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	•
		Check if Austin, TX, officeho	older living expense
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/30/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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4 Date	5 Payee name		
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		State, Zip Code	
12.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
10/31/2015	Aristotle International, Inc.	State: 7in Code	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
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O DUDDOSE OF EVERYDITUSE	Washington DC 20003	(h) Decoriation	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/31/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought off	fice held
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4 Date	5 Payee name		
11/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	_	(b) Description	
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1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
11/02/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
50	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
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	Fees	Credit Card Processing Fee		
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9 Complete ONLY if direct	Candidate / Officehoder name	I ffice sought office held		
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4 Date	5 Payee name			
11/03/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1.25	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE		(b) Description		
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		Check if Austin, TX, officeholder living expense		
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4 Date	5 Payee name			
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	Aristotle International, Inc.	State: 7in Code		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
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	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/04/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 2.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Fees	Credit Card Process	ing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought off	ice held
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11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Fees	Credit Card Process	ing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought off	ice held
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4 Date	5 Payee name		
11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/04/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 2.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/04/2015	Aristotle International, Inc.		
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		Check if travel outside of Tex	kas, complete Schedule T
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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		Check if Austin, TX, officehol	lder living expense
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11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/04/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 2.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission	on filers)
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11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought office held	
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8 PURPOSE OF EXPENDITURE	<u> </u>	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
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	Fees	Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought office held	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/04/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	<u>'</u>	
11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held	
4 Date	5 Payee name		
11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/04/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
11/04/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
5	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
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8 PURPOSE OF EXPENDITURE	<u> </u>	(b) Description		
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6 Amount (\$)	7 Payee address; City; State; Zip Code			
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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11/04/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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8 PURPOSE OF EXPENDITURE (a) Category  (b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee  9 Complete ONLY if direct expendituree to benefit C/OH  4 Date 11/04/2015  5 Payee name  Aristotle International, Inc.  6 Amount (\$)  7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003	25	205 Pennsylvania Avenue SE		
8 PURPOSE OF EXPENDITURE (a) Category  (b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee  9 Complete ONLY if direct expendituree to benefit C/OH  4 Date 11/04/2015  5 Payee name  Aristotle International, Inc.  6 Amount (\$)  7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003				
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	8 PURPOSE OF EXPENDITURE	_	(b) Description	

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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held	
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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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/06/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/06/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
50	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
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4 Date	5 Payee name	
11/06/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
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8 PURPOSE OF EXPENDITURE		(b) Description
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		Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held
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4 Date	5 Payee name	
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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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/06/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name		
11/06/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
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4 Date	5 Payee name		
11/06/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
12.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
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4 Date	5 Payee name		
11/07/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/07/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
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4 Date	5 Payee name		
11/08/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/09/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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4 Date	5 Payee name		
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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		Check if travel outside of Texas, complete Schedule T	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
250	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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4 Date	5 Payee name	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
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	Fees	Credit Card Processing Fee
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6 Amount (\$)	7 Payee address; City;	State; Zip Code
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	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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8 PURPOSE OF EXPENDITURE		(b) Description	
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4 Date	5 Payee name		
11/10/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
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8 PURPOSE OF EXPENDITURE	_	(b) Description	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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11/10/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
5	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Te		
		Check if Austin, TX, officeho	older living expense	
	Fees	Credit Card Proces	ssing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought or	ffice held	
4 Date	E Davisa nama			
	5 Payee name			
11/10/2015	Aristotle International, Inc.	Chata. Zin Cada		
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
25	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide ex	plains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/10/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/10/2015 6 Amount (\$)	Aristotle International, Inc.  7 Payee address; City;	State; Zip Code
5 Amount (\$)		
3	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	-	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
	1 000	Ç .
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/10/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
2.5	205 Pennsylvania Avenue SE	
	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 1 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name		
11/10/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
125	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct	Candidate / Officehoder name	Office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/10/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	-	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	Credit Card Processing Fee	
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9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held	
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/10/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	200 i Olinoyivania Avonae OL		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	-	(b) Description	
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#### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 7.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name	,			
11/10/2015	Aristotle International, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
1.25	205 Pennsylvania Avenue SE				
	Washington DC 20003				
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
11/10/2015	Aristotle International, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
10	205 Pennsylvania Avenue SE				
	Washington DC 20003				
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
11/10/2015	Aristotle International, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
2.5	205 Pennsylvania Avenue SE				
	Washington DC 20003	Taxaa aa			
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name	<u>'</u>		
11/10/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2.5	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held		
4 Date	5 Payee name			
11/10/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
50	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
11/10/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
125	205 Pennsylvania Avenue SE			
	Washington DC 20003	To a second seco		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		

#### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/10/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name	,			
11/10/2015	Aristotle International, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
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	Washington DC 20003				
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
11/10/2015	Aristotle International, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
5	205 Pennsylvania Avenue SE				
	Washington DC 20003				
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
11/10/2015	Aristotle International, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
5	205 Pennsylvania Avenue SE				
	Washington DC 20003				
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/11/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/11/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
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	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	_	(b) Description
		Check if travel outside of Texas, complete Schedule T
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9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH	Candidate / Officerioder frame	office sought office field
4 Date	5 Payee name	
11/11/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
250	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	I office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/11/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
250	205 Pennsylvania Avenue SE	
	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/11/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/11/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
250	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
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9 Complete ONLY if direct	Candidate / Officehoder name	I office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/11/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
50	205 Pennsylvania Avenue SE	
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8 PURPOSE OF EXPENDITURE	-	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held
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a Burboos of Every	Washington DC 20003	I (A) December 1
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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4 Date 11/11/2015 5 Payee name Aristotle International, Inc. 6 Amount (\$) 7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Carlegory Candidate / Officehoder name (credit Carl Processing Fee  11/11/2015  5 Payee name 11/11/2015  6 Amount (\$) 7 Payee address; City: State; Zip Code Credit Carl Processing Fee  5 Payee name 11/11/2015  Aristotle International, Inc. 6 Amount (\$) 7 Payee address; City: State; Zip Code 2.5 Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Calegory (b) Description Check if Austin, TX, officeholder Iving expense Credit Carl Processing Fee  Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Calegory (b) Description Check if Austin, TX, officeholder Iving expense Credit Carl Processing Fee  Credit Carl Processing Fee  Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Calegory (b) Description Check if Austin, TX, officeholder Iving expense Credit Carl Processing Fee  Credit Carl Processing Fee  S Payee name Aristotle International, Inc.  5 Payee name Aristotle International, Inc.					
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11/11/2015 Aristotle International, Inc. 6 Amount (\$) 7 Peyee address; City; State; Zip Code 205 Pennsylvania Avenue SE Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder Infine expense Credit Card Processing Fee  9 Complete ONLY if direct expenditures to benefit CrOH  4 Date 11/11/2015 7 Peyee address; City: State: Zip Code 2.5 25 Pennsylvania Avenue SE Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if austin, TX, officeholder Infine expense Credit Card Processing Fee  (b) Description Check if travel outside of Texas, complete Schedule T Check if travel outside of Texas, complete Schedule T Check if austin, TX, officeholder Infine Check if austin, TX, officeholder Infine Credit Card Processing Fee  9 Complete ONLY if direct expenditures to benefit CrOH  4 Date 5 Peyee name 11/11/2015 Aristotle International, Inc. 6 Amount (\$) 7 Peyee address: City: State: Zip Code 2.5 Washington DC 20003	1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003  8 PURPOSE OF EXPENDITURE  (a) Category    Complete OhLLY if direct expenditure to benefit C/OH  4 Date 1/11/2015  7 Payee address; City; State; Zip Code    Candidate / Officehoder name   Office sought   Office held	4 Date	5 Payee name			
8 PURPOSE OF EXPENDITURE (a) Category    Candidate / Officehoder name   Candidate / Officehoder name   Candidate / Officehoder name   Candidate / Officehoder name   Candidate / Candidate	11/11/2015	Aristotle International, Inc.			
Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Category	6 Amount (\$)	7 Payee address; City;	State; Zip Code		
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PURPOSE OF EXPENDITURE   (a) Category					
Pees Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee  9 Complete ONLY if direct expenditure to benefit C/OH  4 Date		Washington DC 20003			
Fees    Check if Austin, TX, officeholder living expense	8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
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4 Date 11/11/2015 5 Payee name Aristotle International, Inc.  7 Payee address: City: State; Zip Code 2.5 205 Pennsylvania Avenue SE Washington DC 20003  8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee  9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officehoder name office sought office held 11/11/2015 Aristotle International, Inc.  6 Amount (\$) 7 Payee address; City; State; Zip Code 2.5 Washington DC 20003	9 Complete ONLY if direct	Candidate / Officehoder name c	ffice sought o	ffice held	
11/11/2015 Aristotle International, Inc.  7 Payee address; City; State; Zip Code 2.5 205 Pennsylvania Avenue SE  Washington DC 20003  8 PURPOSE OF EXPENDITURE  (a) Category  (b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee  9 Complete ONLY if direct expendituree to benefit C/OH  4 Date  5 Payee name  Aristotle International, Inc.  6 Amount (\$)  7 Payee address; City; State; Zip Code  2.5 Washington DC 20003	expendituree to benefit C/OH				
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#### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/12/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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11/15/2015 <b>6</b> Amount (\$)	Aristotle International, Inc.  7 Payee address; City;	State; Zip Code
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8 PURPOSE OF EXPENDITURE	Washington DC 20003	(b) Description
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	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/15/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 2.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/15/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
25	205 Pennsylvania Avenue SE	<u> </u>
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE		(b) Description
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		Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/15/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5	205 Pennsylvania Avenue SE	<u> </u>
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	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
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	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/15/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
50	205 Pennsylvania Avenue SE	
	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/16/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
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	Fees	Credit Card Processing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
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11/16/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5	205 Pennsylvania Avenue SI	Ē
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
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		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
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4 Date	5 Payee name	
11/16/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
5	205 Pennsylvania Avenue SE	
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	Washington DC 20003	
8 PURPOSE OF EXPENDITURE		(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/16/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 12.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name		
11/16/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE	:	
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
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	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
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4 Date	5 Payee name		
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texas, complete Schedule T	
		Check if Austin, TX, officeholder living expense	
	Fees	Credit Card Processing Fee	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/16/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
125	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
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	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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		Check if travel outside of Texas, complete Schedule T		
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	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		

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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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8 PURPOSE OF EXPENDITURE		(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/17/2015	Aristotle International, Inc.	
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8 PURPOSE OF EXPENDITURE	<u> </u>	(b) Description
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	Fees	Credit Card Processing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/18/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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4 Date	5 Payee name	
11/18/2015	Aristotle International, Inc.	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I office sought office held	
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6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/20/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
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8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
11/20/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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4 Date	5 Payee name		
11/20/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/20/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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
	Fees	Credit Card Processi	ng Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought offi	ce held
experioraries to benefit C/On			
4 Date	5 Payee name		
11/21/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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
	Fees	Credit Card Processi	ng Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offic	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/21/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	_	(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/21/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 1.25 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/21/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
11/22/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
	L		
4 Date	5 Payee name		
11/22/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/22/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/23/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	
	Fees	Credit Card Proces	
	1 663	Stouk Sala Frosos	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	,		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE		(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	
	1 000		· ·
9 Complete ONLY if direct	Candidate / Officehoder name o	l ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/23/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	_	(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/24/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	·	plains how to complete this form.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/24/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
25	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	I office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/24/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
2.5	205 Pennsylvania Avenue SE	
	,	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE		(b) Description
	(a) canagary	Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	F	Credit Card Processing Fee
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH	oundidate / Oniochodol Hamo	Since read
4 Date	5 Payee name	
11/25/2015		
6 Amount (\$)	Aristotle International, Inc.	Stato: Zin Codo
	7 Payee address; City; State; Zip Code	
50	205 Pennsylvania Avenue SE	
	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/25/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 7.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

4.7.1.	·	plains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/25/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
500	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
	1 000	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/25/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
25	205 Pennsylvania Avenue SE	
20	2001 Chilayivania Avenue OL	
	Weehington DC 20002	
DUDDOSE OF EVDENDITUDE	Washington DC 20003	(b) Description
8 PURPOSE OF EXPENDITURE	(a) Category	
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
	0 11 1 1000	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
A Data		
4 Date	5 Payee name	
11/25/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
50	205 Pennsylvania Avenue SE	
	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/26/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

A <b>T</b> ( )	·	plains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/26/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
0.75	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
	. 555	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/27/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
50	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	-	(b) Description
TORTOGE OF EXPERIENCE	(a) Oalogory	Check if travel outside of Texas, complete Schedule T
	_	Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH	Candidate / Officeriodel flame	office sought office held
4 Date	5 Payee name	
11/27/2015	Aristotle International, Inc.	2
6 Amount (\$)	7 Payee address; City;	State; Zip Code
125	205 Pennsylvania Avenue SE	
	Washington DC 20003	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/27/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 2.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/27/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officehol	lder living expense
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought off	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/28/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
250	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officehol	lder living expense
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name o	l office sought off	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/29/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.5	205 Pennsylvania Avenue SE		
-	,		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	-	(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/29/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 10 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	<u>'</u>
11/29/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held
4 Date	5 Payee name	
11/30/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
50	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/30/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
5	205 Pennsylvania Avenue SE	
	Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
11/30/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/01/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

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The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held
4 Date	5 Payee name		
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/01/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 12.5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	'	
12/01/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
12.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
12.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/02/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 2.5 205 Pennsylvania Avenue SE Washington DC 20003 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.25	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	_	(b) Description	
	4 · · · · · · · · · · · · · · · · · · ·		

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/02/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 75 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name	<u>'</u>	
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought office held	
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
125	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description  Check if travel outside of Texas, complete Schedule T  Check if Austin, TX, officeholder living expense  Credit Card Processing Fee	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2.5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/02/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 5 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

A <b>T</b>	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name			
12/02/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
50	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	_	(b) Description		
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	_			
	Fees	Credit Card Processing Fee		
O Commission ONIII V if diment	Can didata / Office hadan seesa	tti aa aassaht		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
4 Date	5 Payee name			
12/02/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
125	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Texas, complete Schedule T		
		Check if Austin, TX, officeholder living expense		
	Fees	Credit Card Processing Fee		
9 Complete ONLY if direct	Candidate / Officehoder name	I ffice sought office held		
expendituree to benefit C/OH				
4 Date	5 Payee name			
12/02/2015	Aristotle International, Inc.			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
5	205 Pennsylvania Avenue SE			
	Washington DC 20003			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/02/2015 Aristotle International, Inc. 7 Payee address; 6 Amount (\$) City; Zip Code State; 50 205 Pennsylvania Avenue SE Washington DC 20003 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
5	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
50	205 Pennsylvania Avenue SE		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought o	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/02/2015	Aristotle International, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
250	205 Pennsylvania Avenue SE		
	To a series of the series of t		
	Washington DC 20003		
8 PURPOSE OF EXPENDITURE	_	(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/27/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 14.25 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	B Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/29/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
18.90	2211 North First Street		
	San Jose CA 95131		
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
	Fees	Credit Card Processi	ing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought offi	ce held
experience to benefit e/e/1			
4 Date	5 Payee name		
10/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8.75	2211 North First Street		
	San Jose CA 95131		
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
	Fees	Credit Card Processi	ing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought offi	ce held
4 Date	5 Payee name		
10/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.40	2211 North First Street		
	San Jose CA 95131		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/2/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 7.55 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/3/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
1.75	2211 North First Street	
	San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/4/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
310.30	2211 North First Street	
	San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name c	Office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/4/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
155.30	2211 North First Street	
	San Jose CA 95131	
8 PURPOSE OF EXPENDITURE		(b) Description

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/4/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 35.00 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/4/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
15.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/4/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Fees	Credit Card Process	
	1 663	oroun out a rosso	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH		-	
4 Date	5 Payee name		
11/4/2015	PayPal		
<b>6</b> Amount (\$)	7 Payee address; City;	State; Zip Code	
6.50	2211 North First Street	·	
0.00			
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/4/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 3.40 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/4/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.85	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought off	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/4/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.85	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought off	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/5/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.75	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	

### **POLITICAL EXPENDITURES** SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) <sup>2</sup> FILER NAME Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/6/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 31.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/6/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
15.80	2211 North First Street	
	San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	F	Credit Card Processing Fee
	Fees	Credit Gard Frocessing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH	Canalago, Cinconcaci name	55 00 g.i.
4 Date	5 Payee name	
11/6/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
		olaic, Zip oodc
7.55	2211 North First Street	
	San Jose CA 95131	Tax = 1.
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
4 Date	5 Payee name	
11/6/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
3.40	2211 North First Street	
	San Jose CA 95131	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/6/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 1.85 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/10/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.20	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	s, complete Schedule T
		Check if Austin, TX, officehold	er living expense
	Fees	Credit Card Processin	ng Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offic	e held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/10/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.75	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	s, complete Schedule T
		Check if Austin, TX, officehold	er living expense
	Fees	Credit Card Processin	ng Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offic	e held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/11/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
175.00	2211 North First Street		
	San Jose CA 95131		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/11/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 77.80 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/11/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
77.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/11/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
62.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/11/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
52.50	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/11/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 15.80 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/11/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.85	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Fees	Credit Card Proces	
	1 000		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/12/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
175.00	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
o rom ode or excenditione	(a) Category	Check if travel outside of Te	vas, complete Schedule T
		Check if Austin, TX, officeho	
	_		
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought of	fice held
expendituree to benefit C/OH	Candidate / Cincerioder Hame	moc sought of	nee neid
4 Date	5 Payee name		
11/12/2015	PayPal	Ctata: 7ia Cada	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
31.30	2211 North First Street		
	San Jose CA 95131		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/12/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 8.75 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/13/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
87.50	2211 North First Street		
	San Jose CA 95131		
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
	Fees	Credit Card Processi	ng Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought office	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/16/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
155.30	2211 North First Street		
	San Jose CA 95131		
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
	Fees	Credit Card Processi	ng Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offic	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/16/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8.75	2211 North First Street		
-			
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/16/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 1.75 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/17/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
77.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/17/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
77.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/17/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
70.00	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/17/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 35.00 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
11/17/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
6.50	2211 North First Street	
	San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/18/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
155.30	2211 North First Street	
	San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Fees	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
11/18/2015	PayPal	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
62.30	2211 North First Street	
	San Jose CA 95131	
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/18/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 31.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/18/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.40	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/19/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
0.88	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Fees	Credit Card Process	
	1 663	oroun out a recoss	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH		-	
4 Date	5 Payee name		
11/20/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
31.30	2211 North First Street	•	
31100			
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
. Sitt COL St. Ext ENDITONE	(4) 54109019	(2) = 30011911011	

### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 31.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide exp	plains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/20/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
17.50	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	
	Fees	Credit Card Process	
	1 003		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/20/2015	   PayPal		
<b>6</b> Amount (\$)	7 Payee address; City;	State; Zip Code	
17.50	2211 North First Street	•	
17.00	22111101011111101 001001		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
o Toki Ode of Extenditore	(a) Calegory	Check if travel outside of Te.	vas complete Schodule T
	_	Check if Austin, TX, officeho	
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH	oandidate / Officerioder Hame	ince sought of	nec neta
4 Date	5 Payee name		
11/20/2015	PayPal	Chata: 7ia Cada	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
15.80	2211 North First Street		
	San Jose CA 95131		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 15.80 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide e	explains how to complete this forn	n.
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/20/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
10.50	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	
		Check if Austin, TX, officeh	
	Fees	Credit Card Proces	ssing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	office sought c	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/20/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8.05	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Fees	Credit Card Proces	ssing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held
4 Date	5 Payee name		
11/20/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.55	2211 North First Street		
	San Jose CA 95131		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/20/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 1.08 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/23/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
31.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/25/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
17.50	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehole	der living expense
	Fees	Credit Card Process	ing Fee
	1 000		·
9 Complete ONLY if direct	Candidate / Officehoder name c	ffice sought offi	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/27/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1.85	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/28/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 87.50 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/28/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
35.00	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	sing Fee
	. 555		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
87.50	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	sing Fee
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
35.00	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 31.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King	3	B Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
31.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Fees	Credit Card Process	ing Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought offi	ce held
experientative to belieff 0/011			
4 Date	5 Payee name		
11/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought offi	ce held
4 Date	5 Payee name		
11/30/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.40	2211 North First Street		
	San Jose CA 95131		
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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/30/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 1.75 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 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 Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/1/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
155.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	der living expense
	Fees	Credit Card Process	ing Fee
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought off	ice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
155.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehol	
	Fees	Credit Card Process	
	1 663	Oroun Gara Frossos	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice sought off	ice held
expendituree to benefit C/OH		-	
4 Date	5 Payee name		
12/1/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
155.30	2211 North First Street	·	
100.00			
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 87.50 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/1/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
77.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	
	1 000		3
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
58.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Credit Card Proces	
	1 003		g
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/1/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
31.30	2211 North First Street	, , , , , , , , , , , , , , , , , , , ,	
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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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 31.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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8 PURPOSE OF EXPENDITURE		(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 17.50 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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4 Date	5 Payee name		
12/1/2015	PayPal		
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15.80	2211 North First Street		
	San Jose CA 95131		
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
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4 Date	5 Payee name		
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	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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### **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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 15.80 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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8.05	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
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12/1/2015	PayPal		
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	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
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8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
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77.80	2211 North First Street	
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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 Bill King Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/2/2015 PayPal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First Street 62.30 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Credit Card Processing Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

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1 Total pages Schedule F1:	<sup>2</sup> FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/2/2015	PayPal		
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31.30	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held
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4 Date	5 Payee name		
12/2/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
17.50	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Fees	Credit Card Process	sing Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held
4 Date	5 Payee name		
12/2/2015	PayPal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
15.80	2211 North First Street		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPEN	SCHEDULE F1				
The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)		
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXP	SCHEDULE G	
MADE FROM PE	RSONAL FUNDS	
	The Instruction Guide explains I	how to complete this form.
1 Total Pages Schedule G:	<sup>2</sup> FILER NAME Bill King	3 FilerID (Ethics Commission filers)
4 Date	5 Payee name	•
11/30/2015	Aristotle International, Inc.	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
650.00	205 Pennsylvania Avenue SE	Washingt DC 20003 on
Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	campaign software
		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 CORIES OF	