### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

.

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

The C/OH Instruction G	uide explains how to complet		Filer ID (Ethics Co	mmission Filers)	<ol> <li>Total pages fi</li> <li>25</li> </ol>	led:
3 CANDIDATE / OFFICEHOLDER		FIRST Matthew		мі S.	OFFICE	USEONLY
NAME		AST Murphy		SUFFIX	Date Received	A REAL
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SU P. O. Box 301044 Houston, TX 77230-		ŜTATE;	ZIP CODE	E Juli	Selved 5 2015 CRETARY
5 CANDIDATE/ OFFICEHOLDER	AREA CODE PHONE M	NUMBER	EXTENSIO	N	E	Lor Dete Postmirked
PHONE	( 832 ) 821-5520				25	21 13
6 CAMPAIGN TREASURER		Inst John		м G.	Receipt #	Amount \$
NAME		AST		SUFFIX	Date Imaged	
		D'Connor				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX P 1217 Saint Johns Woo Houston, TX 77077		; CITY;	STATE;	ZIP CODE	
8 CAMPAIGN TREASURER PHONE	area code phone n (281) 496-7007	IUMBER	EXTENSIO	N		
9 REPORT TYPE	January 15	30th day before election	Runo	ff	15th day aff treasurer af (Officeholde	
	<b>X</b> July 15	8th day before election	Excee	ded \$500 limit		t (Attach C/OH - FR)
10 PERIOD COVERED	Month Day	Year		Month	Day Year	
00121120	2 / 1 /	2015	THROUGH	6	30 / 2015	
11 ELECTION	ELECTION DATE	[] [		LECTION TYPE		
	Month Day Year	Primary C	Runoff	] Other Description	1911	
12 OFFICE	OFFICE HELD (If any)			UGHT (if known)		
			City Co	uncil - At La	arge Position 4	
		GO TO PA	GE 2			

Forms provided by Texas Ethics Commission

# **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

#### FORM C/OH **COVER SHEET PG 2**

14	C/OH NAME Matthew Murphy		1	5 Filer ID (Ethics Commission Filers)
16	NOTICE FROM POLITICAL COMMITTEE(S)	SUPPORT THE CANE	OTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDIT DIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WI INSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THI URES.	THOUT THE CANDIDATE'S OR OFFICEHOLDER'S
		COMMITTEE TYPE	COMMITTEE NAME	
		SPECIFIC	COMMITTEE ADDRESS	
			COMMITTEE CAMPAIGN TREASURER NAME	
	Additional Pages			
			COMMITTEE CAMPAIGN TREASURER ADDRESS	
17	CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THA S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ	
			POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,990.00
	EXPENDITURE TOTALS		POLITICAL EXPENDITURES OF \$100 OR LESS, TTEMIZED	<b>\$</b> 0.00
		4. TOTAL	POLITICAL EXPENDITURES	<b>\$</b> 14,195.29
* -	CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY \$330.22
	OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T AY OF THE REPORTING PERIOD	<sup>HE</sup> \$10,332.55
18	AFFIDAVIT			nives that the occurrency income the
				erjury, that the accompanying report is mation required to be reported by me

under Title 15, Election Code,

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEALABOVE

Sworn to and subscribed before me, by the said Matthew Murphy

Ht

15ththis the

NUBLIC

, to certify which, witness my hand and seal of office.

20

Signature of officer administering oath

Printed name of officer administering oath

1 1

Title of officer administering oath

Notar

Forms provided by Texas Ethics Commission

day of

mn

Revised 02/27/2015

# SUBTOTALS - COH

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

	FILER NAME     20     Filer ID (E       Matthew Murphy     20     Filer ID (E	thics Commission Filers)
	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,990.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 10,332.55
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 14,195.29
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 0.00
9.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
0.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
1.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONE	TARY POLITICAL	CONTRIBUTIONS	SCHEDULE A1
The	Instruction Guide explains how	to complete this form.	1 Total pages Schedule A1: 6
2 FILER NAME Matthew Mi			3 Filer ID (Ethics Commission Filers)
4 Date 5/1/2015	5 Full name of contributor Jason Ryan	out-of-state PAC (ID#:	7 Amount of contribution (\$) \$2,500.00
	6 Contributor address;	City: State; Zip Code Houston, TX 77021	
Principal occu VP/General	pation / Job title (See Instructions) Council	9 Employer (See Instru Centerpoint	uctions)
Date 5/5/2015	Full name of contributor Sarah Syed	out-of-state PAC (ID#:	Amount of contribution (\$) \$5.00
	Contributor address;	City; State; Zip Code Houston, TX 77065	-
Principal occu	Dation / Job title (See Instructions)	Employer (See Instru	ictions)
Date 5/7/2015	Full name of contributor Sean Hammerle	out-of-state PAC (ID#:)	Amount of contribution (\$) \$100.00
	Contributor address;	City; State; Zip Code Coldspring, TX 77331	
Principal occu	pation / Job title (See Instructions)	Employer (See Instru	uctions)
Date 5/19/2015	Full name of contributor Elizabeth Briar	out-of-state PAC (ID#:)	Amount of contribution (\$) \$100.00
	Contributor address;	City; State; Zip Code Houston, TX 77024	
Principal occu	ation / Job title (See Instructions)	Employer (See Instru	uctions)
			an a
		ONAL COPIES OF THIS SCHEDULE AS N ;, please see instruction guide for additiona	

The	Instruction Guide explains how	to complete this form.		1 Total pages Schedule A1:
FILER NAME Matthew Mu	ırphy			<b>3</b> Filer ID (Ethics Commission Filers)
Date 5/20/2015	5 Full name of contributor Elizabeth Ingersol	out-of-state PAC (ID#;	)	7 Amount of contribution (\$) \$50.00
	<b>6</b> Contributor address;	City; State; Zip C	ode 080	
Principal occu	pation / Job title (See Instructions)	<b>9</b> Emp	loyer (See Instructio	ons)
Date 6/18/2015	Full name of contributor John Lozano	out-of-state PAC (ID#:	)	Amount of contribution (\$) \$50.00
	Contributor address;	City; State; Zip C Houston, TX 77(		
Principal occup	bation / Job title (See Instructions)	Empl	oyer (See Instructio	ns)
Date 6/23/2015	Full name of contributor Artemio Muniz	out-of-state PAC (ID#:	)	Amount of contribution (\$) \$250.00
	Contributor address;	City; State; Zip Co Houston, TX 77	ode 082	
Principal occup	pation / Job title (See Instructions)	Emp	loyer (See Instructio	ons)
Date 6/25/2015	Full name of contributor David Mences	out-of-state PAC (ID#:		Amount of contribution (\$) \$300.00
	Contributor address;	City; State; Zip Co Bellaire, TX 7740		
<sup>&gt;</sup> rincipal occup	pation / Job title (See Instructions)	Emp	oyer (See Instructio	ons)
		2		

The	e Instruction Guide explains hov	v to complete this	a form	1 Total pages Schedule A1:
FILER NAME	- -	v to complete this		3 Filer ID (Ethics Commission Filers)
Matthew M	urphy			
Date 6/27/2015	5 Full name of contributor Donna Moore	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$) \$20.00
	6 Contributor address;		e; Zip Code X 77074	
Principal occu	upation / Job title (See Instructions)	)	9 Employer (See Instruct	ions)
Date 6/29/2015	Full name of contributor Beth McWilliams	out-of-state PAC	C (ID#:)	Amount of contribution (\$) \$50.00
	Contributor address;	City; State Willis		
Principal occu	pation / Job title (See Instructions)		Employer (See Instructi	ions)
Date 6/29/2015	Full name of contributor Jacey Jetton	out-of-state PAC	(ID#:)	Amount of contribution (\$) \$50.00
	Contributor address;	City; State Richmond,		
Principal occu	pation / Job title (See Instructions)		Employer (See Instruct	ions)
Date 6/30/2015	Full name of contributor Chris Holmes	out-of-state PAC	\$ (ID#:)	Amount of contribution (\$) \$20.00
	Contributor address;	City; State Houston, T		
Principal occu	 pation / Job title (See Instructions)		Employer (See Instructi	ions)

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
FILER NAME Matthew Mu	ırphy	3 Filer ID (Ethics Commission Filers)
Date 6/30/2015	5 Full name of contributor out-of-state PAC (ID#: Charlotte Jungen	) <b>7</b> Amount of contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Houston, TX 77081	
Príncipal occu	pation / Job title (See Instructions) 9 Employer (See I	nstructions)
Date 6/30/2015	Full name of contributor	Amount of contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occup	bation / Job title (See Instructions) Employer (See In	nstructions)
Date 6/30/2015	Full name of contributor	Amount of contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Houston, TX 77072	
Principal occup	pation / Job title (See Instructions) Employer (See In	nstructions)
Date 6/30/2015	Full name of contributor   Gut-of-state PAC (ID#: Heather Guillen	) Amount of contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77498	
.,	bation / Job title (See Instructions) Employer (See In	Instructions)

FileR NAME Matthew Murphy     3     Filer ID     (Ethics Commission File Matthew Murphy       Date 6/30/2015     5     Full name of contributor Anne Jackson     Image: out-of-state PAC (ID#:				
Matthew Murphy       Date       5       Full name of contributor       □ out-of-state PAC (ID#:	The	Instruction Guide explains how	to complete this form.	1 Total pages Schedule A1:
6/30/2015       Anne Jackson       Internet of contributor       Internet of contribution       Internet of contributor       Internet of contributor       Internet of contributor       Internet of contributor       Internet of contribut				3 Filer ID (Ethics Commission Filers)
6       Contributor address:       City: State: Zip Code Houston, TX 77027         Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Kathleen Osborne       out-of-state PAC (ID#		1 -	out-of-state PAC (ID#:	
Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         6/30/2015       Full name of contributor address;       City; State; Zip Code       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         Principal occupation / Job title (See Instructions)       City: State; Zip Code       Amount of contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$25.00         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         6/30/2015       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         (S)       \$25.00       \$25.00       \$25.00       \$25.00			City; State; Zip Code	
6/30/2015       Kathleen Osborne       Amount of contribution (s)         6/30/2015       Contributor address;       City; State; Zip Code Houston, TX 77024       \$25.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of contribution (s)         Date 6/30/2015       Full name of contributor Ray Walker       out-of-state PAC (ID#:)       Amount of contribution (s)         Contributor address;       City; State; Zip Code Houston, TX 77019       Amount of contribution (s)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$20.00         Date 6/30/2015       Full name of contributor Julie Norton       out-of-state PAC (ID#:)       Amount of contribution (s)         \$25.00       Contributor address;       City; State; Zip Code       Amount of contribution (s)	Principal occu	] pation / Job title (See Instructions)	9 Employer (See	I Instructions)
Houston, TX       77024         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Ray Walker       out-of-state PAC (ID#:)         Contributor address;       City; State; Zip Code Houston, TX       Amount of contribution (\$) \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Julie Norton       out-of-state PAC (ID#:) Out-of-state PAC (ID#:)         Amount of contributor Julie Norton       out-of-state PAC (ID#:) Contributor address;       Amount of contribution (\$) \$25.00			out-of-state PAC (ID#:	Arriouni or contribution (\$)
Date 6/30/2015       Full name of contributor Ray Walker       Image: out-of-state PAC (ID#:) \$20.00       Amount of contribution (\$) \$20.00         Contributor address;       City; State; Zip Code Houston, TX 77019       See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Julie Norton       Image: out-of-state PAC (ID#:) Out-of-state PAC (ID#:)         Contributor address;       City; State; Zip Code       Amount of contribution (\$) \$25.00		Contributor address;		
6/30/2015       Ray Walker       \$20.00         Contributor address;       City; State; Zip Code Houston, TX 77019       \$20.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Julie Norton       out-of-state PAC (ID#:) Contributor address;       Amount of contribution (\$) \$25.00	Principal occu	Deation / Job title (See Instructions)	Employer (See	Instructions)
Houston, TX       77019         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Julie Norton       out-of-state PAC (ID#:)         Amount of contribution (\$) \$25.00       \$25.00		1	out-of-state PAC (ID#:	
Date 6/30/2015     Full name of contributor Julie Norton     Out-of-state PAC (ID#:)     Amount of contribution (\$) \$25.00       Contributor address;     City; State; Zip Code     State; Zip Code		Contributor address;		
6/30/2015 Julie Norton \$25.00 Contributor address; City; State; Zip Code	Principal occuj	pation / Job title (See Instructions)	Employer (See	Instructions)
			out-of-state PAC (ID#:	
		Contributor address;		
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occup	pation / Job title (See Instructions)	Employer (See	Instructions)

Matthew Murphy       Date       6       Full name of contributor       out-of-state PAC (D#)       7       Amount of contribution (\$)         6/30/2015       6       Contributor address;       City; State; Zip Code       7       Amount of contribution (\$)         Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Amount of contribution (\$)         Date       Full name of contributor       out-of-state PAC (D#)       Amount of contribution (\$)         Contributor address;       City; State; Zip Code       Amount of contribution (\$)         Contributor address;       City; State; Zip Code       Amount of contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$100.00         Date       Full name of contributor       out-of-state PAC (D#	The	Instruction Guide explains how to complete this form	1 Total pages Schedule A1:
6/30/2015       Evan Norton       0 utorstate PAC (0.0		irphy	3 Filer ID (Ethics Commission Filers)
Principal occupation / Job title (See Instructions)       9 Employer (See Instructions)         Date 6/30/2015       Full name of contributor Eartha Johnson       out-of-state PAC (ID#	Date 6/30/2015		
Date 6/30/2015       Full name of contributor Eartha Johnson       out-of-state PAC (ID#) \$100.00       Amount of contribution (\$) \$100.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of contribution (\$) \$100.00         Date 6/30/2015       Full name of contributor Joel Dempsey       out-of-state PAC (ID#) Giv-of-state PAC (ID#)       Amount of contribution (\$) \$100.00         Date 6/30/2015       Full name of contributor Joel Dempsey       out-of-state PAC (ID#) Contributor address;       Amount of contribution (\$) \$100.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of contribution (\$) \$100.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of contribution (\$) \$100.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#) Contributor address;       Amount of contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#) Contributor address;       Amount of contribution (\$)			
G/30/2015       Eartha Johnson       Amount of contribution (\$)         G/30/2015       Eartha Johnson       \$100.00         Contributor address:       City; State; Zip Code Houston, TX 77065       \$100.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Joel Dempsey       out-of-state PAC (ID#)         Contributor address;       City; State; Zip Code Houston, TX 77091       Amount of contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$100.00         Principal occupation / Job title (See Instructions)       City; State; Zip Code Houston, TX 77091       Amount of contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)         Contributor address;       City; State; Zip Code       Amount of contribution (\$)	Principal occu	pation / Job title (See Instructions) 9	imployer (See Instructions)
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date 6/30/2015       Full name of contributor Joel Dempsey       out-of-state PAC (D#) S100.00       Amount of contribution (\$) \$100.00         Contributor address;       City; State; Zip Code Houston, TX 77091       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor Contributor address;       Out-of-state PAC (ID#) Contributor address;       Amount of contribution (\$)         Date       Full name of contributor Contributor address;       Out-of-state PAC (ID#) Contributor address;       Amount of contribution (\$)			Amount of contribution (\$)
Date 6/30/2015       Full name of contributor Joel Dempsey		-	
6/30/2015       Joel Dempsey       Sinduit of contribution (\$)         Contributor address;       City; State; Zip Code Houston, TX 77091       \$100.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         Contributor address;       City; State; Zip Code       Amount of contribution (\$)	Principal occuj	pation / Job title (See Instructions)	mployer (See Instructions)
Houston, TX       77091         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         Amount of contribution (\$)       Contributor address;       City;		l turned to the	, another of contribution (e)
Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of contribution (\$)       Contributor address;     City;     State;     Zip Code			
Contributor address; City; State; Zip Code	Principal occu	pation / Job title (See Instructions)	mployer (See Instructions)
	Date	Full name of contributor out-of-state PAC (ID#:	) Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zij	Code
	Principal occu	pation / Job title (See Instructions)	mployer (See Instructions)

The	e Instruction Guide explains how to com	plete this form.	1 Total pages Schedule E:
FILER NAME Matthew Murph	-		3 3 Filer ID (Ethics Commission File
matthew murph	iy		
TOTAL OF U	NITEMIZED LOANS		<b>\$</b> 10,332.55
Date of loan 1/31/2015	7 Name of lender Out-of-state Matthew Murphy	e PAC (ID#:	_) <b>9</b> Loan Amount (\$) \$200.00
ls lender a financial Institution?	8 Lender address; City; 3209 Prospect Housto	State; Zip Code on, TX 77004	<b>10</b> Interest rate 0%
Y N			<b>11</b> Maturity date
2 Principal occupat Designer	ion / Job title (See Instructions)	13 Employer (See Instruction Firetrol	pns)
4 Description of Co	llateral	account (See Instruction	were deposited into political ns)
🗶 none		X	
GUARANTOR INFORMATION	<ul> <li>17 Name of guarantor</li> <li>18 Guarantor address; City;</li> </ul>	State; Zip Code	<b>19</b> Amount Guaranteed (\$)
GUARANTOR INFORMATION	<b>18</b> Guarantor address; City;	· · · · · · · · · · · · · · · · · · ·	
GUARANTOR INFORMATION	<b>18</b> Guarantor address; City;	State; Zip Code 21 Employer (See Instruction	
GUARANTOR INFORMATION	<b>18</b> Guarantor address; City; ation (See Instructions)	State; Zip Code 21 Employer (See Instruction	ons)
GUARANTOR INFORMATION INFORMATION Principal Occupa Date of loan 2/28/2015 Is lender	18 Guarantor address; City; ation (See Instructions) Name of lender	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	Dons) ) Loan Amount (\$) \$400.00 
GUARANTOR INFORMATION INFORMATION Principal Occupa Date of loan 2/28/2015	<b>18</b> Guarantor address;       City;         ation (See Instructions)         Name of lender         Matthew Murphy	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	Loan Amount (\$) \$400.00
GUARANTOR INFORMATION INFORMATION Derincipal Occupa Date of loan 2/28/2015 Is lender a financial Institution? Y N	18 Guarantor address;       City;         ation (See Instructions)         Name of lender       out-of-state         Matthew Murphy         Lender address;       City;	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	Dons) Loan Amount (\$) \$400.00 Interest rate 0% Maturity date
GUARANTOR INFORMATION INFORMATION INFORMATION Date of loan 2/28/2015 Is lender a financial Institution? Y N Principal occupat Designer Description of Col	18 Guarantor address;       City;         ation (See Instructions)         Name of lender       out-of-state         Matthew Murphy         Lender address;       City;         3209 Prospect       Houstor         ion / Job title (See Instructions)	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	ons) ) Loan Amount (\$) ) \$400.00 Interest rate 
GUARANTOR INFORMATION INFORMATION Date of loan 2/28/2015 Is lender a financial Institution? Y N Principal occupat Designer	18 Guarantor address;       City;         ation (See Instructions)         Name of lender       out-of-state         Matthew Murphy         Lender address;       City;         3209 Prospect       Houstor         ion / Job title (See Instructions)	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	ons) ) Loan Amount (\$) ) \$400.00 Interest rate 
<ul> <li>GUARANTOR INFORMATION</li> <li>GUARANTOR INFORMATION</li> <li>INFORMATION</li> <li>INFORMATION</li> <li>Principal Occupat Institution?</li> <li>Y</li> <li>N</li> <li>Principal occupat</li> <li>Designer</li> <li>Description of Cole</li> <li>Inone</li> <li>GUARANTOR</li> </ul>	18 Guarantor address;       City;         ation (See Instructions)         Name of lender       out-of-stat         Matthew Murphy         Lender address;       City;         3209 Prospect       Houstor         ion / Job title (See Instructions)	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	Dons) Loan Amount (\$) \$400.00 Interest rate 0% Maturity date Dons) were deposited into political Is)
<ul> <li>GUARANTOR INFORMATION</li> <li>GUARANTOR INFORMATION</li> <li>INFORMATION</li> <li>INFORMATION</li> <li>Principal Occupat Institution?</li> <li>Y</li> <li>N</li> <li>Principal occupat</li> <li>Designer</li> <li>Description of Cole</li> <li>Inone</li> <li>GUARANTOR</li> </ul>	18 Guarantor address;       City;         ation (See Instructions)       out-of-state         Name of lender       out-of-state         Matthew Murphy       Lender address;         Lender address;       City;         3209 Prospect       Houstor         ion / Job title (See Instructions)         Ilateral         Name of guarantor         Guarantor address;       City;	State; Zip Code 21 Employer (See Instruction te PAC (ID#:	Dons) Loan Amount (\$) \$400.00 Interest rate 0% Maturity date Dons) were deposited into political Is)

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			SCHEDULE E
The	Instruction Guide explains how to com	nplete this form.	1 Total pages Schedule E:
FILER NAME Matthew Murph	у		3 Filer ID (Ethics Commission Filer
TOTAL OF UN	NITEMIZED LOANS		\$
Date of loan 3/31/2015	7 Name of lender Matthew Murphy	te PAC (ID#:)	9 Loan Amount (\$) \$400.00
Is lender a financial Institution? Y N	8 Lender address; City; 3209 Prospect Housto	State; Zip Code on, TX 77004	10 Interest rate         0%         11 Maturity date
2 Principal occupation Designer	on / Job title (See Instructions)	13 Employer (See Instructions) Firetrol	
Description of Coll     X none	ateral	<ul><li><b>15</b> Check if personal funds were account (See Instructions)</li></ul>	e deposited into political
GUARANTOR INFORMATION	<ul><li>17 Name of guarantor</li><li>18 Guarantor address; City;</li></ul>	State; Zip Code	<b>19</b> Amount Guaranteed (\$)
Image: Not applicable           Principal Occupat	tion (See Instructions)	21 Employer (See Instructions)	
		f contraction of the second seco	
Date of loan	Name of lender out-of-sta	nte PAC (ID#:)	Loan Amount (\$)
Date of Ioan 4/16/2015 Is lender a financial Institution?	Matthew Murphy Lender address; City;	State; Zip Code	\$200.00 Interest rate 0%
4/16/2015 Is lender a financial	Matthew Murphy	State; Zip Code	\$200.00 Interest rate
4/16/2015 Is lender a financial Institution? Y N	Matthew Murphy Lender address; City;	State; Zip Code	\$200.00 Interest rate 0%
4/16/2015 Is lender a financial Institution? Y N Principal occupation Designer Description of Colla	Matthew Murphy Lender address; City; 3209 Prospect Housto on / Job title (See Instructions)	State; Zip Code on, TX 77004 Employer (See Instructions) Firetrol Check if personal funds were account (See Instructions)	\$200.00 Interest rate 0% Maturity date
4/16/2015 Is lender a financial Institution? Y N Principal occupation Designer	Matthew Murphy Lender address; City; 3209 Prospect Housto on / Job title (See Instructions)	State; Zip Code on, TX 77004 Employer (See Instructions) Firetrol Check if personal funds were	\$200.00 Interest rate 0% Maturity date
4/16/2015 Is lender a financial Institution? Y N Principal occupation Description of Colla S none GUARANTOR	Matthew Murphy Lender address; City; 3209 Prospect Housto on / Job title (See Instructions)	State; Zip Code on, TX 77004 Employer (See Instructions) Firetrol Check if personal funds were account (See Instructions)	\$200.00 Interest rate 0% Maturity date

			SCHEDULE E
т	he Instruction Guide explains how to c	omplete this form.	1 Total pages Schedule E:
FILER NAME Matthew Mur	phy		3 Filer ID (Ethics Commission File
TOTAL OF	JNITEMIZED LOANS		\$
Date of loan 4/30/2015	7 Name of lender Matthew Murphy	state PAC (ID#:)	9 Loan Amount (\$) \$900.00
Is lender a financial Institution?	8 Lender address; City; 3209 Prospect Hous	State; Zip Code ston, TX 77004	10 Interest rate         0%         11 Maturity date
YU			
2 Principal occup Designer	ation / Job title (See Instructions)	13 Employer (See Instructions Firetrol	s)
Description of C	Collateral	15 Check if personal funds w account (See Instructions)	
GUARANTOR	17 Name of guarantor		<b>19</b> Amount Guaranteed (\$)
X not applicat	pation (See Instructions)	21 Employer (See Instructions	5)
	pation (See Instructions)	21 Employer (See Instructions	s) Loan Amount (\$)
Principal Occu	pation (See Instructions)		T
Principal Occu Date of Ioan 5/31/2015 Is lender	Dation (See Instructions)		Loan Amount (\$) \$8,232.55 Interest rate
Date of loan 5/31/2015	Dation (See Instructions)         Name of lender         Matthew Murphy         Lender address;       City;	state PAC (ID#:)	Loan Amount (\$) \$8,232.55
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N	Dation (See Instructions)         Name of lender         Matthew Murphy         Lender address;       City;	state PAC (ID#:) State; Zip Code	Loan Amount (\$) \$8,232.55 Interest rate 0% Maturity date
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N	Name of lender Matthew Murphy Lender address; City; 3209 Prospect House	state PAC (ID#:) State; Zip Code Ston, TX 77004	Loan Amount (\$) \$8,232.55 Interest rate 0% Maturity date
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N Principal occup Designer Description of C	Dation (See Instructions)         Name of lender         Matthew Murphy         Lender address;         City;         3209 Prospect         Hous         ation / Job title (See Instructions)	state PAC (ID#:) State; Zip Code ston, TX 77004 Employer (See Instructions	) Loan Amount (\$) \$8,232.55 Interest rate 0% Maturity date
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N Principal occup Designer Description of C X none GUARANTOR	Dation (See Instructions)         Name of lender         Matthew Murphy         Lender address;         City;         3209 Prospect         Hous         ation / Job title (See Instructions)	state PAC (ID#:) State; Zip Code ston, TX 77004 Employer (See Instructions Firetrol Check if personal funds we	) Loan Amount (\$) \$8,232.55 Interest rate 0% Maturity date
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N Principal occup Designer Description of C	Dation (See Instructions)         Name of lender       □ out-of-         Matthew Murphy         Lender address;       City;         3209 Prospect       Hous         ation / Job title (See Instructions)	state PAC (ID#:) State; Zip Code ston, TX 77004 Employer (See Instructions Firetrol Check if personal funds we	Loan Amount (\$) \$8,232.55 Interest rate 0% Maturity date s)
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N Principal occup Designer Description of C X none GUARANTOR	Dation (See Instructions)         Name of lender       □ out-of-         Matthew Murphy         Lender address;       City;         3209 Prospect       Hous         ation / Job title (See Instructions)         ollateral         Name of guarantor         Guarantor address;       City;	state PAC (ID#:) State; Zip Code ston, TX 77004 Employer (See Instructions Firetrol Check if personal funds we account (See Instructions)	Loan Amount (\$) \$8,232.55 Interest rate 0% Maturity date s)
Principal Occu Date of Ioan 5/31/2015 Is lender a financial Institution? Y N Principal occup Designer Description of C X none GUARANTOR INFORMATION	Dation (See Instructions)         Name of lender       □ out-of-         Matthew Murphy         Lender address;       City;         3209 Prospect       Hous         ation / Job title (See Instructions)         ollateral         Name of guarantor         Guarantor address;       City;	state PAC (ID#:) State; Zip Code ston, TX 77004 Employer (See Instructions Firetrol Check if personal funds we account (See Instructions)	Loan Amount (\$)       \$8,232.55       Interest rate       0%       Maturity date       s)   ere deposited into political       Amount Guaranteed (\$)

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Over Polling Exp Printing Ex		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)		
		The Instruction Guide explai	ns how to c	omplete this form.			
1 Total pages Schedule F1: 12	1	аме w Murphy			<b>3</b> Filer ID (Ethics Commission Filers)		
4 Date 1/27/2015	5 Payee na Bray Ra						
6 Amount (\$) \$200.00		ddress; City; State; 2 . Post Oak Rd., Ste 1320 n, TX 77055	Zip Code				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)       (b) Description         Consulting Expense       Check if travel outside of Texas, complete Schedule         Check if Austin, TX, officeholder living expense       Political Consultation						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		late / Officeholder name ew Murphy	Cit	Office sought y Council - At Larg	Office held ge Position 4		
Date 2/4/2015	Payee na Bray Ra						
Amount (\$) \$200.00		ddress; City; State; 2 Post Oak Rd., Ste 1320 n, TX 77055	Zip Code				
PURPOSE OF EXPENDITURE		<ul> <li>(See categories listed at the top of this it ing Expense</li> </ul>	schedule)		outside of Texas, complete Schedule T , TX, officeholder living expense ultation		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name ew Murphy	City	Office sought Council - At Larg	Office held je Position 4		
Date 2/20/2015	Payee na Bray Ra			<u></u>			
Amount (\$) \$200.00		ldress; City; State; 2 Post Oak Rd., Ste 1320 n, TX 77055	žip Code				
PURPOSE OF EXPENDITURE		(See categories listed at the top of this ing Expense	ichedule)		outside of Texas, complete Schedule T , TX, officeholder living expense Ultation		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	City	Office sought / Council - At Larg	Office held e Position 4		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

		EXPENDITURE CATE	EGORIES F	OR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Over Polling Exp Printing Ex		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
		The Instruction Guide expla	ins how to co	omplete this form.	
1 Total pages Schedule F1:	1	аме v Murphy			3 Filer ID (Ethics Commission Filers)
4 Date 3/2/2015	5 Payee na Bray Ra				
6 Amount (\$) \$200.00	{	dress; City; State; Post Oak Rd., Ste 1320 n, TX 77055	-		
8 PURPOSE OF EXPENDITURE		(See categories listed at the top of this ing Expense	schedule)	<b></b>	outside of Texas, complete Schedule T n, TX, officeholder living expense Sultation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	City	Office sought y Council - At Lar	Office held ge Position 4
Date 3/9/2015	Payee na Bray Ra				
Amount (\$) \$200.00		dress; City; State; Post Oak Rd., Ste 1320 , TX 77055	Zip Code		
PURPOSE OF EXPENDITURE		(See categories listed at the top of this ing Expense	schedule)		outside of Texas, complete Schedule T , TX, officeholder living expense sultation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name w Murphy	City	Office sought Council - At Larg	Office held ge Position 4
Date 3/18/2015	Payee na Bray Ra				
Amount (\$) \$200.00		dress; City; State; Post Oak Rd., Ste 1320 , TX 77055	Zip Code		
PURPOSE OF EXPENDITURE		(See categories listed at the top of this ng Expense	schedule)		outside of Texas, complete Schedule T , TX, officeholder living expense :Ultation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name w Murphy	City	Office sought Council - At Larg	Office held le Position 4
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense         Event Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense           Accounting/Banking         Fees         Office Overhead/Rental Expense         Transportation Equipment & Related Ex           Consulting Expense         Food/Beverage Expense         Polling Expense         Travel In District           Contributions/Donations Made By         Gift/Awards/Memorials Expense         Printing Expense         Travel Out Of District           Candidate/Officeholder/Political Committee         Legal Services         Salaries/Wages/Contract Labor         Other (enter a category not listed above)							
		The Instructio	n Guide explair	ns how to c	omplete this form.		
<b>1</b> Total pages Schedule F1:	1	аме v Murphy				3 Filer ID (Ethics Commission Filers)	
4 Date 3/23/2015	5 Payee na Bray Ra						
6 Amount (\$) \$200.00	1	ldress; C Post Oak Rd 1, TX 77055	City; State; Z ., Ste 1320	ip Code			
8 PURPOSE OF EXPENDITURE		(See categories liste ting Expense	d at the top of this s	chedule)		l outside of Texas, complete Schedule T n. TX, officeholder living expense Sultation	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholde ew Murphy	r name	Cit	Office sought y Council - At Lar	Office held ge Position 4	
Date 4/2/2015	Payee na Bray Ra						
Amount (\$) \$200.00	1	dress; C Post Oak Rd I, TX 77055	city; State; Z ., Ste 1320	ïp Code			
PURPOSE OF EXPENDITURE		(See categories liste ing Expense	d at the top of this s	chedule)		outside of Texas, complete Schedule T n, TX, officeholder living expense Sultation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholde w Murphy	r name	City	Office sought / Council - At Larg	Office held ge Position 4	
Date 4/20/2015	Payee na Spring	ime 3ranch Repub	licans				
Amount (\$) \$500.00	Payee ac 2315 Ro Houstor		ity; State; Z	ip Code			
PURPOSE OF EXPENDITURE		(See categories liste utions/Donatic		chedule)		outside of Texas, complete Schedule T n, TX, officeholder living expense	
Complete <u>QNLY</u> if direct expenditure to benefit C/OH	1	ate / Officeholde w Murphy	r name	City	Office sought Council - At Larg	Office held ge Position 4	
	AT	ACHADDITIO	NAL COPIES	OF THIS S	SCHEDULE AS NEI	EDED	

# SCHEDULE F1

		EXPENDITURE CAT	EGORIES F	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Over Polling Exp Printing Ex		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
		The Instruction Guide expla	ains how to c	omplete this form.	
1 Total pages Schedule F1:	1	аме v Murphy			3 Filer ID (Ethics Commission Filers)
4 Date 4/22/2015	5 Payee na Bray Ra				
6 Amount (\$) \$200.00		ldress; City; State; Post Oak Rd., Ste 1320 n, TX 77055			
8 PURPOSE OF EXPENDITURE	· · · • •	(See categories listed at the top of thi ing Expense	s schedule)	[]	l outside of Texas, complete Schedule T n, TX, officeholder living expense Sultation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	Cit	Office sought y Council - At Lar	Office held ge Position 4
Date 5/2/2015	Payee na Josh J.				
Amount (\$) \$4,000.00		dress; City; State; idley St. #3105 i, TX 77098	Zip Code		
PURPOSE OF EXPENDITURE		(See categories listed at the top of this ing Expense	s schedule)	<b></b>	outside of Texas, complete Schedule T n, TX, officeholder living expense Sultation
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	City	Office sought / Council - At Lar	Office held ge Position 4
Date 5/11/2015	Payee na Harris (	ime County GOP			
Amount (\$) \$350.00		dress; City; State; ynnwood LN 1, TX 77008	Zip Code		
PURPOSE OF EXPENDITURE		(See categories listed at the top of this utions/Donations	s schedule)	r r	outside of Texas, complete Schedule T n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name w Murphy	City	Office sought / Council - At Larg	Office held ge Position 4
	AT	ACH ADDITIONAL COPIE	S OF THIS S	SCHEDULE AS NEI	EDED

Forms provided by Texas Ethics Commission

		EXPENDITURE CATI	EGORIES F	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Over Polling Exp Printing Ex Salaries/W	pense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
	<b></b>	The Instruction Guide expla	ins how to c	omplete this form.	·
1 Total pages Schedule F1:		аме v Murphy			3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee na	ime			
5/19/2015	Bluesna	ip			
6 Amount (\$) \$32.00	7 Payee ad	ldress; City; State;	Zip Code		
8	(a) Category	(See categories listed at the top of this	schedule)	(b) Description	
PURPOSE	Printing	Expense		Check if trave	l outside of Texas, complete Schedule T
OF		•		Check if Austi	n, TX, officeholder living expense
EXPENDITURE				Push Cards	
9 Complete ONLY if direct	Candid	ate / Officeholder name		Office sought	Office held
expenditure to benefit C/OF		ew Murphy	Cit	y Council - At Lar	
	D				
Date	Payee na				
5/22/2015	Empire	Care			
Amount (\$)	Payee ac	dress; City; State;	Zip Code		
\$48.93	1732 W	estheimer Rd			
	Houstor	i, TX 77098			
	Categon	(See categories listed at the top of this	achadula)	Description	
		everage Expense	schedule)	Description	autoide of Terror complete Calendula T
PURPOSE OF	1000/0	sverage Experise			outside of Texas, complete Schedule T
EXPENDITURE					n, TX, officeholder living expense
				Campaign Di	nner w/Potential Donor
Complete ONLY if direct	Candid	ate / Officeholder name		Office sought	Office held
expenditure to benefit C/OH	Matthe	ew Murphy	City	/ Council - At Larg	ge Position 4
	<u> </u>				
Date	Payee na				
5/23/2015	Hunters	Pub			
Amount (\$)	Payee ac	dress; City; State;	Zip Code		
\$20.00	10549 5	. Post Oak			
· · · · · · · · ·		, TX 77035			
	~ •				
		(See categories listed at the top of this	schedule)	Description	
PURPOSE	r000/B6	everage Expense	Transformation and the second se		outside of Texas, complete Schedule T
EXPENDITURE					n, TX, officeholder living expense
1996 er				Campaign Di	nner w/Potential Donor
·····		to / Office later -		<u></u>	Cliffication (1)
<ul> <li>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</li> </ul>		ate / Officeholder name	~~	Office sought	Office held
,	мацпе	w Murphy	Uny	Council - At Larg	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)				
	The Instruction Guide explain	ns how to complete this form.					
<b>1</b> Total pages Schedule F1:	2 FILER NAME Matthew Murphy		3 Filer ID (Ethics Commission Filers)				
4 Date 5/24/2015	5 Payee name Ninfa's on Navigation						
6 Amount (\$) \$85.02	7 Payee address; City; State; Z 2704 Navigation Blvd Houston, TX 77003	Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this s Food/Beverage Expense	Check if travel	l outside of Texas, complete Schedule T n, TX, officeholder living expense inner w/Potential Donor				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Matthew Murphy	Office sought City Council - At Lar	Office held ge Position 4				
Date 5/26/2015	Payee name Wells Fargo						
Amount (\$) \$5.00	Payee address; City; State; Z	(ip Code					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Fees	Check if travel	outside of Texas, complete Schedule T n, TX, officeholder living expense e				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Matthew Murphy	Office sought City Council - At Larg	Office held ge Position 4				
Date 5/27/2015	Payee name Staples						
Amount (\$) \$69.27	Payee address; City; State; Z 1919 Taylor St., Ste. H Houston, TX 77007	lip Code					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Advertising Expense	Check if travel	outside of Texas, complete Schedule T n, TX, officeholder living expense JSINESS Cards				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Matthew Murphy	Office sought City Council - At Larg	Office held ge Position 4				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED							

		EXPENDITURE	ECATEGORIE	S FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	Office Polling pense Printin	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense es/Wages/Contract Labor	Travel In District Travel Out Of Dist	uipment & Related Expense
		The Instruction Guid	e explains how t	to complete this form.		
<b>1</b> Total pages Schedule F1:		аме w Murphy			3 Filer ID (Eth	ics Commission Filers)
4 Date 5/28/2015	5 Payee na The Eg					
<b>6</b> Amount (\$) \$53.88		ddress; City; S eechnut n, TX 77096	State; Zip Code	3		
8 PURPOSE OF EXPENDITURE		<ul> <li>(See categories listed at the test of the second sec</li></ul>	top of this schedule)		el outside of Texas, cor in, TX, officeholder livi et Lunch	
9 Complete ONLY if direct expenditure to benefit C/OH		late / Officeholder name ew Murphy		Office sought City Council - At Lar	ge Position 4	Office held
Date 5/29/2015	Payee na Splash					
Amount (\$) \$718.45		ldress; City; S ampbell Rd n, TX 77040	State; Zip Code	•		
PURPOSE OF EXPENDITURE		(See categories listed at the t sing Expense	op of this schedule)		l outside of Texas, com n, TX, officeholder livin -Shirts	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy		Office sought City Council - At Lan	ge Position 4	Office held
Date 5/29/2015	Payee n REDCO					
Amount (\$) \$307.67		ldress; City; S ampbell Rd n, TX 77040	itate; Zip Code	2		
PURPOSE OF EXPENDITURE		(See categories listed at the to XPENSE	op of this schedule)	Check if Austin	outside of Texas, com n, TX, officeholder livin ment For Flood	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder nam W Murphy		Office sought City Council - At Larg	ge Position 4	Office held
	AT	TACH ADDITIONAL C	OPIES OF TH	IS SCHEDULE AS NE	EDED	

		EXPENDITURE CAT	EGORIES F	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica	Fe Fe By G	vent Expense ees bod/Beverage Expense ift/Awards/Memorials Expense egal Services	Office Ove Polling Exp Printing Ex		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)	
		The Instruction Guide expl	ains how to c	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAM Matthew M				3 Filer ID (Ethics Commission Filers)	
4 Date 5/29/2015	5 Payee name GETCLEA	RSTREAM.COM				
6 Amount (\$) \$29.00	7 Payee addre P.O. Box Pensacola		Zip Code			
8 PURPOSE OF EXPENDITURE		ee categories listed at the top of thi g Expense	s schedule)	[	el outside of Texas, complete Schedule T in, TX, officeholder living expense ate Service	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		/ Officeholder name Murphy	Cit	Office sought y Council - At Lar	Office held ge Position 4	
Date 5/31/2015	Payee name Costas Eli					
Amount (\$) \$30.50	Payee addre 2239 Rich Houston, 7	mond Ave.	Zip Code			
PURPOSE OF EXPENDITURE		ee categories listed at the top of this erage Expense	s schedule)	Check if Austin	outside of Texas, complete Schedule T n, TX, officeholder living expense inner w/Potential Donor	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		/ Officeholder name Murphy	City	Office sought / Council - At Lar	Office held ge Position 4	
Date 5/31/2015	Payee name PayPal.co					
Amount (\$) \$154.20	Payee addre	ess; City; State;	Zip Code			
PURPOSE OF EXPENDITURE	Category (S Fees	ee categories listed at the top of this	s schedule)	Check if Austin	outside of Texas, complete Schedule T n, TX, officeholder living expense ICESSING FEES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		/ Officeholder name Murphy	City	Office sought / Council - At Larç	Office held ge Position 4	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

		EXPENDITURE CA	TEGORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica		Event ExpenseLoan Repayment/ReimbursementFeesOffice Overhead/Rental ExpenseFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting ExpenseLegal ServicesSalaries/Wages/Contract Labor			Solicitation/Fundraising Expe Transportation Equipment & F Travel In District Travel Out Of District Other (enter a category not lis	Related Expense
		The Instruction Guide exp	plains how to c	omplete this form.		
1 Total pages Schedule F1:		аме v Murphy			3 Filer ID (Ethics Comm	ission Filers)
4 Date 6/1/2015	5 Payee na Facebo					
6 Amount (\$) \$108.46	7 Payee ad	ldress; City; State;	Zip Code			
8 PURPOSE OF EXPENDITURE		(See categories listed at the top of t sing Expense	this schedule)		l outside of Texas, complete Sche n, TX, officeholder living expense Ivertising	dule T
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	Cit	Office sought y Council - At Lar	Office ge Position 4	held
Date 6/2/2015	Payee na Josh J.					
Amount (\$) \$2,000.00		ldress; City; State; udley St. #3105 n, TX 77098	Zip Code			
PURPOSE OF EXPENDITURE		(See categories listed at the top of t ing Expense	his schedule)		outside of Texas, complete Scher n, TX, officeholder living expense sultation	tule T
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	Cit	Office sought y Council - At Lar	Office ge Position 4	held
Date 6/8/2015	Payee na GoDado					
Amount (\$) \$20.34	Payee ad	ldress; City; State;	Zip Code			
PURPOSE OF EXPENDITURE		(See categories listed at the top of t sing Expense	his schedule)		outside of Texas, complete Scheo , TX, officeholder living expense ebsite URL	lule T
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ate / Officeholder name ew Murphy	Cit	Office sought y Council - At Larç	Office ge Position 4	held
uuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuuu	ATT	ACH ADDITIONAL COPI	ES OF THIS	SCHEDULE AS NEI	EDED	

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising ExpenseEvent ExpenseLoan Repayment/ReimbursementSolicitation/Fundraising ExpenseAccounting/BankingFeesOffice Overhead/Rental ExpenseTransportation Equipment & Related ExpenseConsulting ExpenseFood/Beverage ExpensePolling ExpenseTravel In DistrictContributions/Donations Made ByGift/Awards/Memorials ExpensePrinting ExpenseTravel Out Of DistrictCandidate/Officeholder/Political CommitteeLegal ServicesSalaries/Wages/Contract LaborOther (enter a category not listed above)							
	The Instruction Guide explains h	now to complete this form.					
1 Total pages Schedule F1:	2 FILER NAME Matthew Murphy		3 Filer ID (Ethics Commission Filers)				
4 Date 5/14/2015	5 Payee name The Houston Club						
6 Amount (\$) \$5,130.00	7 Payee address; City; State; Zip 0 910 Louisiana St, Suite 4900 Houston, TX 77002	Code					
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Event Expense	Check if travel	outside of Texas, complete Schedule T n. TX, officeholder living expense N For Meet & Greet				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Matthew Murphy	Office sought City Council - At Larg	Office held ge Position 4				
Date 5/16/2015	Payee name Houston Young Republicans						
Amount (\$) \$45.00	Payee address; City; State; Zip C 2145 Hamilton Ave San Jose, CA 95125	Code					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Advertising Expense	Check if travel	outside of Texas, complete Schedule T , TX, officeholder living expense ces-Website				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Matthew Murphy	Office sought City Council - At Larg	Office held le Position 4				
Date 5/16/2015	Payee name Local Pour						
Amount (\$) \$67.83	Payee address; City; State; Zip C 1952 W. Gray, Ste. A Houston, TX 77019	Code					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Food/Beverage Expense	Check if travel Check if Austin,	outside of Texas, complete Schedule T , TX, officeholder living expense nner w/Potential Donor				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Matthew Murphy	Office sought City Council - At Larg	Office held e Position 4				
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEE	DED				

		EXPENDITURE CATE	GORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee		Event ExpenseLoan Repayment/ReimbursementFeesOffice Overhead/Rental ExpenseFood/Beverage ExpensePolling ExpenseGift/Awards/Memorials ExpensePrinting ExpenseLegal ServicesSalaries/Wages/Contract Labor			Travel In District Travel Out Of Dis	uipment & Related Expense
		The Instruction Guide explai	ns how to co	omplete this form.		
1 Total pages Schedule F1:		аме w Murphy			3 Filer ID (Et	hics Commission Filers)
4 Date 6/15/2015	5 Payeen Office					
6 Amount (\$) \$63.87	7 Payee a	ddress; City; State; 2	Zip Code			
8 PURPOSE OF EXPENDITURE	-	y (See categories listed at the top of this Expense	schedule)	Check if Aust	el outside of Texas, co in, TX, officeholder liv npaign Packets	ing expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		date / Officeholder name iew Murphy	City	Office sought Council - At Lar	ge Position 4	Office held
Date 6/17/2015	Payee n TARC	ame				
Amount (\$) \$177.00		ddress; City; State; 2 ox 770846 n, TX 77215	Zip Code			
PURPOSE OF EXPENDITURE		y (See categories listed at the top of this s EXPENSE	schedule)		outside of Texas, com n, TX, officeholder livi OrShip	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	1	late / Officeholder name ew Murphy	City	Office sought / Council - At Lan	ge Position 4	Office held
Date 6/22/2015	Payee n Housto	<sup>ame</sup> n Hispanic Chamber of Co	ommerce			
Amount (\$) \$50.00	Payee a	ddress; City; State; Z	Zip Code			
PURPOSE OF EXPENDITURE	Contrib Made E	<ul> <li>(See categories listed at the top of this s utions/Donations</li> <li>Candidate/ older/Political</li> <li>ttee</li> </ul>	schedule)		outside of Texas, con n, TX, officeholder livi Fundraiser	
Complete ONLY if direct expenditure to benefit C/OF		ate / Officeholder name ew Murphy	City	Office sought Council - At Lar	ge Position 4	Office held

Forms provided by Texas Ethics Commission

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

		EXPENDITURE CATE	GORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made E Candidate/Officeholder/Politic		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Over Polling Exp Printing Exp		Travel In District Travel Out Of Distri	ipment & Related Expense
		The Instruction Guide explai	ns how to co	omplete this form.		
1 Total pages Schedule F1:	1	аме w Murphy			3 Filer ID (Ethi	cs Commission Filers)
4 Date 6/30/2015	5 Payee na PayPal					
6 Amount (\$) \$28.87	7 Payee ad	ddress; City; State; Z	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category Fees	✓ (See categories listed at the top of this a	schedule)	Check if Austi	I outside of Texas, com n, TX, officeholder livin DCESSING FEES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		late / Officeholder name ew Murphy	City	Office sought / Council - At Lan	ge Position 4	Office held
Date 6/30/2015	Payee na Corie S	ame itephens				
Amount (\$) \$300.00	1	ddress; City; State; Z sswood Dr TX 77386	Lip Code			
PURPOSE OF EXPENDITURE		/ (See categories listed at the top of this sting Expense	ichedule)		outside of Texas, com n, TX, officeholder living sulation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name ew Murphy	City	Office sought Council - At Lar	ge Position 4	Office held
Date	Payee na	ame				
Amount (\$)	Payee ac	ldress; City; State; Z	Zip Code			
PURPOSE OF EXPENDITURE	Category	I (See categories listed at the top of this at the top of the second s	.chedule)	F	outside of Texas, comp n, TX, officeholder living	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ate / Officeholder name		Office sought		Office held
	AT	TACH ADDITIONAL COPIES	OF THIS S	CHEDULE AS NEI	EDED	

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form. •• Complete only if "Report Type" on page 1 is marked "Final Report" ••			
1	С/ОН І	JAME <b>2</b> Filer ID (Ethics Commission Filers)	
	Matthe	w Murphy	
3	SIGN/	SIGNATURE	
	ing a re	expect any further political contributions or political expenditures in connection with my candidacy. I understand that designat- port as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign utions or make any campaign expenditures without a campaign treasurer appointment on file.	
		Signature of Candidate / Officeholder	
<ul> <li>FILER WHO IS NOT AN OFFICEHOLDER</li> <li>Complete A &amp; B below <i>only</i> if you are not an officeholder.</li> </ul>			
	Α.	CAMPAIGN FUNDS	
	Chec	k only one:	
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.	
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions and unexpended interest or income earned on political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.	
	B.	ASSETS	
	Chec	k only one:	
	$\bowtie$	I do not retain assets purchased with political contributions or interest or other income from political contributions.	
		I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.	
5	OFFICEHOLDER		
	•• Com	plete this section <i>only</i> if you are an officeholder **	
		I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.	
		Signature of Officeholder	