CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to com	plete this form	1 Filer ID(Ethic	s Commission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI	OFF	FICE USE ONLY
OFFICEHOLDER		Richard		Date Receive	d
NAME	NICKNAME	LAST	SUFFIX	10/5/2015	
		Nguyen			
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP COD	E	
OFFICEHOLDER	P.O. Box 56386				
MAILING				Date Hand-delive	ered or Date Postmarked
ADDRESS	Houston TX 77256				
Change of address					
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION		
OFFICEHOLDER	(713) 942-5816				
PHONE					
6 CAMPAIGN	MS/MRS/MR	FIRST	MI	Receipt #	Amount
TREASURER		Vinh	V.	Date Process	ed
NAME	NICKNAME	LAST	SUFFIX	Date Imaged	
		Nguyen			
7 CAMPAIGN	STREET ADDRESS (No PO Box Please	se);	APT/SUITE # ;	CITY; STATE;	ZIP CODE
TREASURER	8115 Riptide Dr.				
ADDRESS					
(Residence)	Houston TX 77072				
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION		
TREASURER PHONE	(281) 736-8408				
	January 15 X 30th day be	fore election Fir	al repport (Attach C/OH - F	R) Exceeded \$500 limit	
9 REPORT TYPE					
	July 15 8th day befo	pre election Ru	noff	15th day after campaig	n treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year		Month	Day Year
COVERED	7/1/2015		THROUGH	9/2	24/2015
11 ELECTION	ELECTION DATE	ELECTIC	N TYPE		
	Month Day Year		— - <i>"</i>		
	11/3/2015	Primary	Runoff	X General	Special
12 OFFICE	OFFICE HELD (if any)	I	13 OFFIC	CE SOUGHT (if known)	
	City Council - District F		City	Council - District F	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH

COVER SHEET PG 2

14 FILER NAME Richard Nguyen

	expenditures may have	political contributions accepted or political expenditures me been made without the candidate's or officeholder's knowl receive notice of such expenditures.	ade by political committees to support the edge or consent. Candidates and office	he candidate / officeholder. These eholders 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			
17 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 OR LESS (O NS, OR GUARANTEES OF LOANS), UNLES		\$ 2.00	
TOTALS	FLEDGES, LOA	NS, OR GUARANTEES OF LOANS), UNLES		\$0.00	
	2 TOTAL POLITIC	2 TOTAL POLITICAL CONTRIBUTIONS			
	(OTHER THAN I	\$12,750.00			
EXPENDITURE	3 TOTAL POLITIC				
TOTALS	0	\$			
	4 TOTAL POLITICAL EXPENDITURES				
	T			\$34,025.29	
CONTRIBUTION	5 TOTAL POLITIC	AL CONTRIBUTIONS MAINTAINED AS OF	THE LAST DAY		
BALANCE	OF REPORTING	PERIOD		\$53,751.16	
OUTSTANDING LOAN		PAL AMOUNT OF ALL OUTSTANDING LOA	NS AS OF THE		
TOTALS		HE REPORTING PERIOD		\$0.00	
18 AFFIDAVIT					
		report is true ar	m, under penalty of perjury, th nd correct and includes all info under Title 15, Election Code	ormation required to be	
			Richard Nguye	n	
			Signature of Candidate or	Officeholder	
AFFIX NOT STAMP / SE	AL ABOVE				
Sworn to and subscribed	before me, by the said	L L	, this the	day	
of	, 20	, to certify which, witness my ha	nd and seal of office.		
Signature of officer admi	nistering oath	Print name of officer administering oa	th Title of office	r administering oath	

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 F	9 FILER NAME Richard Nguyen 20 Filer ID (Ethics Commission Filers)					
21	S	SUB	TOTAL			
	NAME OF SCHEDULE AMOUNT					
1		12750				
2	2 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 0					
3		SCHEDULE B: PLEDGED CONTRIBUTIONS	0			
4	Γ	SCHEDULE E: LOANS	0			
5	Γ	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	34025			
6	Γ	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	3386			
7	Γ	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTION	IS 0			
8	Γ	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	0			
9	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH					
10	Γ	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRI	BUTIONS 0			
11	1 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER 0					

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

C/OH NAME Richard Nguyen

FORM C/OH ADDENDUM

ACCOUNT # (Ethics Commission filers)

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

SCHEDULE A1

The Instruction G	Buide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME F	Richard Nguyen			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor Cigna Corporation PAC	X out of state F	PAC(ID# C00085316)	7 Amount of contributions (\$)
8/20/2015	6 Contributor address;	City; Philadelphia	State; Zip Code PA 19192	1000
8 Principal occu	Jupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Barbara Groves	out of state F	PAC(ID#)	7 Amount of contributions (\$)
8/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	100
8 Principal occu	I upation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4 Date	5 Full name of contributor Garnet Coleman	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77288	500
8 Principal occu State Rep/Pre	upation / Job title (See Instructions) es & CEO		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Alvin Nguyen	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/3/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77459	1000
8 Principal occu Dentist	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state F	PAC(ID#)	F = 1 24

SCHEDULE A1

- 1 1 2 21	<u></u>			
he Instruction Guide explains how to complete this form.			1 Total Pages Schedule A1:	
	Diskand Navyan			2 Files ID (Ethics Commission filess)
2 FILER NAME	Richard Nguyen			3 Filer ID (Ethics Commission filers)
	Theldon Branch			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/14/2015		Houston	TX 77025	500
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
President/Fi	inancial Analyst			
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Hall Attorneys PC		х <i>У</i>	7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	•
9/14/2015		Austin	TX 78701	500
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	L ctions)
4 Date	5 Full name of contributor	out of state		
4 Date	SW LIUNA PAC (Southwest			7 Amount of contributions (\$)
	Laborers District Council)			
	2 On tributer of desce	015		-
0/21/2015	6 Contributor address;	City;	State; Zip Code	500
9/21/2015		Austin	TX 78751	500
8 Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
0 1 11101001 00				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Rao Polavarapu	—		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/21/2015		Houston	TX 77036	2500
			-	
-	cupation / Job title (See Instructions)		9 Employer (See Instru	ctions)
Real Estate				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
				1

SCHEDULE	A1
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The Instruction	Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 FILER NAME	E Richard Nguyen			3 Filer ID (Ethics Commission filers)
	Francis Ding			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	-
9/21/2015		Houston	TX 77024	250
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Ltions)
4 Date	5 Full name of contributor Kenneth Li	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77036	- 200
5/2 1/2010		Touston	1. 11000	200
8 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Wea Lee	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	2000
3 Principal o President	ccupation / Job title (See Instructions)		9 Employer (See Instrue	ctions)
4 Date	5 Full name of contributor Emerson Chu	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77082	- 100
3 Principal o	ccupation / Job title (See Instructions)		9 Employer (See Instrue	Ltions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Mei Ling Hu-Wang			7 Amount of contributions (\$)

SCHEDULE A	\1
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The Instruction (Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Richard Nguyen			3 Filer ID (Ethics Commission filers)
9/21/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77498	500
Dringinglass				4'ere)
3 Principal occ President	upation / Job title (See Instructions)		9 Employer (See Instruc	20015)
4 Date	5 Full name of contributor C.C. Lee	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77036	500
3 Principal occ Owner	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Eugene Wu	out of state I	PAC(ID#)	7 Amount of contributions (\$)
9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	250
3 Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)
1 Date	5 Full name of contributor Yan Liu Chapman	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/21/2015	6 Contributor address;	City; Sugarland	State; Zip Code TX 77479	250
3 Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	l tions)
4 Date	5 Full name of contributor Grace Jacobson	out of state F	PAC(ID#)	7 Amount of contributions (\$)

The Instruction	Guide explains how to complete	e this form.			1 Total Pag	ges Schedule A1:
FILER NAME	E Richard Nguyen				3 Filer ID (Ethics	Commission filers)
	6 Contributor address;	City;	State;	Zip Code		
9/22/2015		The Woodlands	TX 77384			250
Principal o	ccupation / Job title (See Instructions)		9 Employer	(See Instruc	tions)	
Date	5 Full name of contributor	out of state I	PAC(ID#)			
	Dieu Thao Nguyen				7 A	mount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code		
9/23/2015		Houston	TX 77036			500
Principal o Owner	ccupation / Job title (See Instructions)		9 Employer	(See Instruc	tions)	
Date	5 Full name of contributor	out of state I	PAC(ID#)			
	Cecil Fong				7 A	mount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code		
9/23/2015		Houston	TX 77071			500
Principal o	ccupation / Job title (See Instructions)		9 Employer	(See Instruc	tions)	
President						
Date	5 Full name of contributor	out of state I	PAC(ID#)			
	Norma Mendoza				7 A	mount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code		
9/23/2015		Houston	TX 77082			100
Principal o	ccupation / Job title (See Instructions)		9 Employer	(See Instruc	L tions)	
8 Principal o	L ccupation / Job title (See Instructions)		9 Employer	(See Instruc	L tions)	

The Instruction C	Guide explains how to complete	this form.			1 Tot	al Pages Schedule A1:
2 FILER NAME I	Richard Nguyen				3 Filer ID	e (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)			
	Jeanette A Rash				7	Amount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code		
9/23/2015		Houston	TX 77020			250
8 Principal occ	upation / Job title (See Instructions)		9 Employer	(See Instruc	tions)	
4 Date	5 Full name of contributor Sheet Metal Workers Local Union #54 PAC	out of state	PAC(ID#)		7	Amount of contributions (\$)
	6 Contributor address;	City;	State;	Zip Code		
9/24/2015		Houston	TX 77018			500
8 Principal occ	upation / Job title (See Instructions)		9 Employer	(See Instruc	tions)	
	ATTACH ADDITION	IAL COPIES	OF THIS S	CHEDULI	E AS NE	EDED
	If contributor is out-of-state PAC,	, please see ins	struction guide	e for additio	nal report	ting requirements

SCHEDULE A1

	The Instruction Guide	explains how to	complete this for	rm
1 Total pages Schedule F1:	² FILER NAME Richard Ngu	iyen		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
7/2/2015	Alief Community Associati	ion		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
200.00	PO Box 1712			
	Houston TX 77411			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptior	า	
		Check if	f travel outside of	Texas, complete Schedule T
		Check if	f Austin, TX, office	eholder living expense
	Contributions/Donations		Sponsorship for	Alief event
	Made By Candidate/Officeholder/Poli	iti		
	cal Committee			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
7/3/2015	A.L.I.E.F. Organization			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
30.00	12134 Huntington Venture	Dr.		
	Houston TX 77099			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptior		
				Texas, complete Schedule T
		Check if		eholder living expense
	Event Expense		Booth for commu	unity event
9 Complete ONLY if direct	Candidate / Officehoder name			office held
expendituree to benefit C/OH		office sought		once held
4 Date	5 Payee name			
7/5/2015	Tong Hur Thuy Quan Luc	Chien		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	

6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
100.00	20814 Patriot Parl	k Lane		
	Katy TX 77449			
8 PURPOSE OF EXPENDITURE	(a) Category		(b) Description	

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	² FILER NAME Richard Nguyer	1	3 Filer ID (Ethics Commission filers)	
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Banquet ticket		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held	
4 Date 7/10/2015	5 Payee name Houston GLBT Caucus			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
40.00	PO Box 66664 Houston TX 77266			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee	Check if travel outside of Te Check if Austin, TX, officeho Membership fees		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought o	ffice held	

	The Instruction Guide	explains how to co	omplete this for	m
1 Total pages Schedule F1:	² FILER NAME Richard Ngu	Jyen		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			-
7/10/2015	Dylan Osborne			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
100.00	1418 Vermont #6			
	Houston TX 77006			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
				Texas, complete Schedule T holder living expense
	Salaries/Wages/Contract Labor		Campaign comm	unications
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
7/15/2015	Sprint 2 Print			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
		Oldic,		
875.00	8748 Clay Rd, Suite 300			
	Houston TX 77080			
8 PURPOSE OF EXPENDITURE		(b) Description		
			ravel outside of T	Texas, complete Schedule T
				holder living expense
	Advertising Expense	F	Push cards printir	ng
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH				
4 Date	5 Payee name			
7/15/2015	Sprint 2 Print			
1/10/2010				

7/15/2015	Sprint 2 Print			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
4,546.50	8748 Clay Rd, Suite 300			
	Houston TX 77080			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descripti	on	

	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguy	en	3 Filer ID (Ethics Commission filers)			
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeh Campaign signage	older living expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			
4 Date	5 Payee name					
7/16/2015	Bank of America					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
61.00	1905 W. Gray Houston TX 77019					
8 PURPOSE OF EXPENDITURE		(b) Description				
	Office Overhead/Rental Expense	Check if travel outside of Te Check if Austin, TX, officeho Campaign checks				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			

	The Instruction Guide	explains how to	complete this for	m.
1 Total pages Schedule F1:	² FILER NAME Richard Ngu	ıyen		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			-
7/20/2015	Dylan Osborne			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
2,500.00	1418 Vermont #6			
	Houston TX 77006			
3 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense		f travel outside of T	Texas, complete Schedule T holder living expense e design
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
Late	5 Payee name			
7/22/2015	Costco Wholesale			
6 Amount (\$) 72.66	7 Payee address; City;3836 Richmond Ave	State;	Zip Code	
	Houston TX 77027			
8 PURPOSE OF EXPENDITURE	(a) Category Food/Beverage Expense		f travel outside of T	Texas, complete Schedule T holder living expense breakfast
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			

7/22/2015	Taco Cabana	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
90.22	3905 Kirby Dr.	
	Houston TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	en	3 Filer ID (Ethics Commission filers)			
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho Food for Council b	older living expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			
4 Date	5 Payee name					
7/27/2015	City of Houston					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
500.00	900 Bagby Houston TX 77002					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
	Fees	Check if travel outside of Te Check if Austin, TX, officeho Filing fee				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			

	The Instruction Guide e	explains how to c	omplete this form	n	
1 Total pages Schedule F1:	² FILER NAME Richard Nguy	yen		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name				
8/2/2015	Aubrey R. Taylor Commun	ications			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
1,250.00	957 Nasa Parkway #251				
	Houston TX 77058				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if	travel outside of T	exas, complete Schedule T	
		Check if	Austin, TX, officeh	nolder living expense	
	Advertising Expense		Advertisement		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	(office held	
expendituree to benefit C/OH					
4 Date	5 Payee name				
8/7/2015	Sprint 2 Print				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
893.06	8748 Clay Rd, Suite 300				
	Houston TX 77080				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if	travel outside of T	exas, complete Schedule T	
		Check if	Austin, TX, officeh	nolder living expense	
	Advertising Expense		Campaign signage	e	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	(office held	
expendituree to benefit C/OH					
4 Date	5 Payee name				
8/8/2015	Costco Wholesale				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		

(b) Description

3836 Richmond Ave

Houston TX 77027

67.80

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	en	3 Filer ID (Ethics Commission filers)		
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho Back to school lund	older living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
8/11/2015	Subway				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
87.68	910 Travis, #T1500 Houston TX 77002				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho YMCA Young Lead	older living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		

The Instruction Guide explains how to complete this form.					
4. Tatal names Cabadula E4.		-	complete this for		
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	en		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name				
8/11/2015	Kroger				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
14.47	4825 Sweetwater Blvd.				
	Sugar Land TX 77479				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptior	 າ		
		Check if	f travel outside of 1	Fexas, complete Schedule T	
				holder living expense	
	Food/Beverage Expense		YMCA Young Lea		
	roou/beverage Expense				
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held	
expendituree to benefit C/OH		onice bought			
4 Date	5 Payee name				
		ol Contor			
8/16/2015	Phap Luan Buddhist Cultura		7. 0. 1.		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
400.00	13913 S. Post Oak Rd.				
	Houston TX 77045				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptior	า		
		Check if	f travel outside of 7	Fexas, complete Schedule T	
		Check if	f Austin, TX, office	holder living expense	
	Contributions/Donations		Sponsorship		
	Made By Candidate/Officeholder/Politi	i			
	cal Committee				
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held	
expendituree to benefit C/OH					
4 Date	5 Payee name				
8/20/2015	Xay Dung Magazine				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
500.00	PO Box 1585				

8 PURPOSE OF EXPENDITURE (a) Category

Houston TX 77251

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	n	3 Filer ID (Ethics Commission filers)		
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officehc Advertisement			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ifice held		
4 Date	5 Payee name				
8/20/2015	Strong Strategies LLC				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
6,017.14	5100 San Felipe, #117-E Houston TX 77056				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Consulting Expense	Check if travel outside of Te Check if Austin, TX, officeho Fundraising & com	lder living expense		
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name	office sought of	fice held		

	The Instruction Guid	e explains how to c	omplete this for	m.
1 Total pages Schedule F1:	² FILER NAME Richard Ng	juyen		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
8/21/2015	FireWatch Custom Tees	& Apparel		
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
602.48	12219 Alief Clodine			
	Houston TX 77083			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if	travel outside of T	Fexas, complete Schedule T
		Check if	Austin, TX, officel	holder living expense
	Advertising Expense		T-shirts	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date				
	5 Payee name			
8/21/2015	Opinion Analysts, Inc. 7 Payee address; City;	Ctoto	Zip Code	
6 Amount (\$)		State;	Zip Code	
370.19	400 West 14th Street, Suit	le 220		
	Austin TX 78701			
8 PURPOSE OF EXPENDITURE		(b) Description		
				Fexas, complete Schedule T
				holder living expense
	Office Overhead/Rental		Voter file data	
	Expense		voter nie data	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH		_		
4 Date	5 Payee name			
8/21/2015	Johnston Campaigns			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,264.19	2978 Rising Tide Lane			
	Houston TX 77573			

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	3 Filer ID (Et	thics Commission filers)		
	Advertising Expense	Check if travel outside of Texas, complete Check if Austin, TX, officeholder living exp Door hangers and campaign sigr	bense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	fice sought office held			
4 Date	5 Payee name				
8/22/2015	Sprint 2 Print				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
1,387.22	8748 Clay Rd, Suite 300 Houston TX 77080				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Advertising Expense	Check if travel outside of Texas, complete Check if Austin, TX, officeholder living exp Campaign signage			
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name c	fice sought office held			

8 PURPOSE OF EXPENDITURE (a) Category

	The Instruction Guide ex	xplains how to co	omplete this form	۱.	
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	en		3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name				
8/31/2015	Alief Community Association	n			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
150.00	PO Box 1712				
	Houston TX 77411				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if tr	ravel outside of Te	exas, complete Schedule T	
		Check if A	Austin, TX, officeho	older living expense	
	Contributions/Donations	- LJ - F	Parade entry fee		
	Made By				
	Candidate/Officeholder/Politi cal Committee				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	0	ffice held	
4 Date	5 Payee name				
9/5/2015	Ruben Davis				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
300.00	8335 Bird Meadow Lane				
	Missouri City TX 77489-622	20			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
		Check if tr	ravel outside of Te	exas, complete Schedule T	
		Check if A	Austin, TX, officeho	older living expense	
	Contributions/Donations	μ μ	Annual prayer brea	akfast sponsorship	
	Made By				
	Candidate/Officeholder/Politi cal Committee				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	0	ffice held	
[
4 Date	5 Payee name				
9/8/2015	Costco Wholesale				
6 Amount (\$)	7 Payee address; City;	State;	Zip Code		
36.78	17520 Southwest Freeway				
	Sugar Land TX 77479				

(b) Description

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	n 3 Filer ID (Ethics Commission filers)			
	Event Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Event flowers			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			
4 Date	5 Payee name				
9/10/2015	SGN-TV, Inc.				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
80.00	10613 Bellaire Blvd, Suite 270 Houston TX 77072)			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Advertising Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense TV Advertisement			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held			

	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Ng	juyen	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
9/10/2015	Saigon Houston Radio					
6 Amount (\$)	7 Payee address; City;	State; Zip	Code			
60.00	10613 Bellaire Blvd, Suite	900				
	Houston TX 77072					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
		Check if trav	el outside of Texas, complete Schedule T			
		Check if Aus	tin, TX, officeholder living expense			
	Advertising Expense	Rad	lio advertisement			
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held			
expendituree to benefit C/OH		ennee eeugin				
4 Date	5 Payee name					
9/10/2015	Saigon Houston Radio					
6 Amount (\$)	7 Payee address; City;	State; Zip	Code			
60.00	10613 Bellaire Blvd, Suite	900				
	Houston TX 77072					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
		Check if trav	el outside of Texas, complete Schedule T			
		Check if Aus	tin, TX, officeholder living expense			
	Advertising Expense	Rad	lio advertisement			
			<i>(</i> ,),),)			
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name	office sought	office held			
	Candidate / Officehoder name	office sought	office held			

4 Date	5 Payee name	
9/10/2015	Far East Printing	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
350.00	7617 Boone Road	
	Houston TX 77072	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	'n	3 Filer ID (Ethics Commission filers)	
	Solicitation/Fundraising Expense	Check if travel outside of Te Check if Austin, TX, officeho Fundraiser Invitatio	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	
4 Date	5 Payee name			
9/12/2015	The French Corner			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
487.13	1104 Old Spanish Trail Houston TX 77054			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Event Expense	Check if travel outside of Te Check if Austin, TX, officeho Alief Job Fair food	older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held	

	The Instruction Guide	explains how to c	complete this for	m.
1 Total pages Schedule F1:	² FILER NAME Richard Ngu	iyen		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
9/14/2015	Johnston Campaigns			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
5,773.60	2978 Rising Tide Lane			
	League City TX 77573			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if	travel outside of T	Fexas, complete Schedule T
		Check if	Austin, TX, officel	holder living expense
	Advertising Expense		Campaign mailer	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH		onioe oougni		
4 Date	5 Payee name			
9/14/2015	KLM Public Affairs LLC			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,500.00	2028 Buffalo Terrace			
	Houston TX 77019			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if	travel outside of T	Fexas, complete Schedule T
		Check if	Austin, TX, officel	holder living expense
	Consulting Expense		Direct mail consul	lting
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH		onice sought		
4 Date	5 Payee name			
9/21/2015	Alvin Byrd			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
2,500.00	2010 Roanwood Dr.			
	Houston TX 77090			

8 PURPOSE OF EXPENDITURE (a) Category

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Richard Nguye	n	3 Filer ID (Ethics Commission filers)		
	Salaries/Wages/Contract Labor	Check if travel outside of Te Check if Austin, TX, officeho Campaign manage	older living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
9/24/2015	Kim Son Bellaire				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
310.77	10503 Bellaire Blvd. Houston TX 77072				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Food/Beverage Expense	Check if travel outside of Te Check if Austin, TX, officeho Event refreshment	older living expense		
 9 Complete ONLY if direct expendituree to benefit C/OH 	Candidate / Officehoder name	office sought o	ffice held		

	The Instruction Guide ex	valains how to	complete this for	m
1 Total pages Schodula E1:		-		3 Filer ID (Ethics Commission filers)
1 Total pages Schedule F1:	² FILER NAME Richard Nguy	en		3 Fliel ID (Ethics Commission fliers)
4 Date	5 Payee name			
9/24/2015	The Home Depot			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
400.00	6800 Sam Houston Parkway	1		
	Houston TX 77072			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	ı	
		Check if	travel outside of	Texas, complete Schedule T
		Check if	Austin, TX, office	holder living expense
	Advertising Expense		Campaign signad	ge materials
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
9/24/2015	Piryx, Inc.			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
47.40	649 Mission St, #204			
	San Francisco CA 94105			
8 PURPOSE OF EXPENDITURE		(b) Description)	
				Texas, complete Schedule T
				holder living expense
	Fees		Online donation f	66
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

U	NPAID INCURRED	(DE	BLIGATIONS			SCHEDULE F2
				The Instruction Guide explains	how	w to complete this form.	
1	Total pages Schedule F2:	2		FILER NAME Richard Nguye	n	3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED UNPA	١D) IN(CURRED OBLIGATIONS		\$\$3,386.27	
5	Date	6		Payee name			
	9/25/2015			Phach Nguyen			
7	Amount (\$)	8		Payee address; City;	S	State; Zip Code	
	965.00			11727 Acadian Dr.			
				Houston TX 77099			
9	TYPE OF EXPENDITURE		Х	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(8	a) C	ategory	(b)	Description	
					ΙΓ	Check if travel outside of Texas, complete Schedu	ule T
						Check if Austin, TX, officeholder living expense	
				Salaries/Wages/Contract		Sign distribution	
				Labor			
11	Complete ONLY if direct expendituree to benefit C/OH	С	anc	lidate / Officehoder name		office sought offic	e held
5	Date	6		Payee name			
	9/25/2015			Anh Tran			
7	Amount (\$)	8		Payee address; City;	S	State; Zip Code	
	910.00			11727 Acadian Dr.			
			_	Houston TX 77099			
9	TYPE OF EXPENDITURE		Х	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(8	a) C	ategory	(b)	Description	
						Check if travel outside of Texas, complete Schedu	ule T
						Check if Austin, TX, officeholder living expense	
				Salaries/Wages/Contract Labor		Sign distribution	
				Labor			
11	Complete ONLY if direct expendituree to benefit C/OH		anc	lidate / Officehoder name		office sought offic	e held
5	Date	6		Payee name			
	9/2/2015			-			
7	9/2/2015 Amount (\$)	8		Strong Strategies, LLC Payee address; City;	C	State; Zip Code	
'					0		
1	1,511.27	1		5100 San Felipe			

U	NPAID INCURRED	C	DB	LIGATIONS			SCHEDULE F2
				The Instruction Guide explain	ns ho	v t	to complete this form.
1	Total pages Schedule F2:	2		FILER NAME Richard Nguy	/en		3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPA	ID	INC	CURRED OBLIGATIONS			\$\$3,386.27
				Unit 117E Houston TX 77056			
9	TYPE OF EXPENDITURE		X	Political			Non-Political
10	PURPOSE OF EXPENDITURE	(8	a) Ca	ategory Consulting Expense	(b)		Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fundraising & compliance services
11	Complete ONLY if direct expendituree to benefit C/OH	С	and	idate / Officehoder name			office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED