FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 50 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Annise NAME Date Received NICKNAME LAST **SUFFIX** Parker CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O.Box 66513 MAILING Receipt # Amount **ADDRESS** Change of Address Houston, TX 77266 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** NAME NICKNAME LAST **SUFFIX** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded \$500 limit Х **PERIOD** Month Day Year Month Day Year COVERED **THROUGH** 01/01/2015 06/30/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Mayor of Houston **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 50

13 C / OH NAME	Parker, Annise		14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure. These expenditures may have been made without the officeholders are required to report this information.	he candidate's or officeho	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	S	
16 CONTRIBUTION TOTALS		L AL CONTRIBUTIONS OF \$50 OR LESS (OTHER T ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 116,710.00
EXPENDITURE TOTALS	3. TOTAL POLITIC.	AL EXPENDITURES OF \$100 OR LESS, UNLESS	ITEMIZED	\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 93,090.42
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	\$ 233,072.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O	OF THE LAST DAY	\$ 0.00
17 AFFADAVIT				
		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.		
		Signature of 0	Candidate or Officeholder	r
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	er administering	Printed name of officer administering	Title of officer ac	dministering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 50
18 FII	ER NAM	1E	19 Filer ID		
Pa	arker, Aı				
		SUBTOTALS			SUBTOTAL AMOUNT
N/	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	116,710.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		₩	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	₩	77,051.19
6.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	16,039.23
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		₩	
9.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
10	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
11	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	77.10

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/19 Rpt: 4/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 04/07/2015	 Full name of contributor out-of-state PAC (ID#:_Adam, Betty Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$250.00
_		Houston, TX 77019-3007				
8	Episcopal pr	pation / Job title (See Instructions) riest	9 Employer (See Instructions) n/a)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_Andrews & Kurth Texas PAC Contributor address; City; State; Zip Code	_		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77002-2929 spation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
		parent for the (eee menactions)		,		
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_Appel, Madeleine Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Houston, TX 77096-2501				
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions) N/A)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_Bak, Steven Contributor address; City; State; Zip Code Houston, TX 77080			Amount of Contribution (\$)	\$500.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions) Parsons Brinckerhoff Inc			
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_Bono, Michael Contributor address; City; State; Zip Code Houston, TX 77005-3454			Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions) Strumbono Holdings LLC			
			•			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/19 Rpt: 5/50	
2	FILER NAME			3	Filer ID	
	Parker, Ann	ise				
4	Date 05/13/2015	Full name of contributor out-of-state PAC (ID#:_ Bostic, Jacqueline Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00
		Houston, TX 77021-1617				
8	Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions N/A	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	05/20/2015	Bouchard, Anthony				\$100.00
		Contributor address; City; State; Zip Code				
		Wilmette, IL 60091-1454				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	05/18/2015	Bracewell & Giuliani LLP Contributor address; City; State; Zip Code				\$2,500.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77002-2770				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	05/12/2015	Brewster, Jamie				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77098-1608				
	Principal occu Administrato	upation / Job title (See Instructions)	Employer (See Instructions Upper Kirby District	<u>. </u>		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	05/19/2015	Brown, Peter H				\$500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77098-5333				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/19 Rpt: 6/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 05/18/2015	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
		Houston, TX 77004-7449				
8	Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Burney & Foreman)		
	Date 05/19/2015	Full name of contributor out-of-state PAC (ID#:_ CH2M Hill Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
	Principal occu	Dallas, TX 75251-2224 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Callaway, Catherine Contributor address; City; State; Zip Code N Houston, TX 77056			Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Dynergy)		
	Date 04/01/2015	Full name of contributor out-of-state PAC (ID#:_ Cardona, James Contributor address; City; State; Zip Code Houston, TX 77023-2022)		Amount of Contribution (\$)	\$5.00
	Principal occu N/A	pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Carollo Engineers Texas PAC Contributor address; City; State; Zip Code Costa Mesa, CA 92626-3088			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/19 Rpt: 7/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 04/06/2015	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
_		Houston, TX 77006-2840				
8	psychothera	pation / Job title (See Instructions) pist	9 Employer (See Instructions self	5)		
	Date 05/01/2015	Full name of contributor out-of-state PAC (ID#:_ Chan, Waynette A Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77005-1200 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Consultant	·	Self			
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Clifford, Cindy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77019-4815				
	Principal occu Owner PR F	pation / Job title (See Instructions) irm	Employer (See Instructions The Clifford Group inc.	5)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Clutterbuck for Council Contributor address; City; State; Zip Code Houston, TX 77005-1530)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Collins, Jeff Contributor address; City; State; Zip Code Cypress, TX 77429-5148			Amount of Contribution (\$)	\$1,000.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions LJA Engineering & Surv		ng Inc.	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/19 Rpt: 8/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 05/18/2015	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_	Dringing! goog	Jersey Village, TX 77040-2062	Continue (Continue to an analysis and an analy			
8	Vice Preside	pation / Job title (See Instructions) ent	9 Employer (See Instructions Cobb Fendley	5)		
	Date 05/16/2015	Full name of contributor out-of-state PAC (ID#:_ Conner, C.C. Contributor address; City; State; Zip Code Houston, TX 77006-4125			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Arts Administrator		strator	Retired			
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Council, Michelle Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Houston, TX 77007-7129				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_ Criner, Sanford Contributor address; City; State; Zip Code Houston, TX 77019-1511			Amount of Contribution (\$)	\$1,000.00
	Principal occu Real estate	pation / Job title (See Instructions)	Employer (See Instructions CBRE)		
	Date 04/11/2015	Full name of contributor out-of-state PAC (ID#:_ Cummings, Sharon Contributor address; City; State; Zip Code Houston, TX 77025-4236			Amount of Contribution (\$)	\$250.00
	Principal occu Public health	pation / Job title (See Instructions)	Employer (See Instructions University of Texas Hea		Science Center at Houst	

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 6/19 Rpt: 9/50	
2	FILER NAME Parker, Anni			3 Filer ID	
4	Date 04/08/2015	 Full name of contributor		7 Amount of Contribution (\$)	\$5,000.00
_		Houston, TX 77098-2004			
8	Principal occu President	pation / Job title (See Instructions)	9 Employer (See Instructions) Dannenbaum Engineering		
	Date 04/08/2015	Full name of contributor		Amount of Contribution (\$)	\$5,000.00
	Principal occu Homemaker	pation / Job title (See Instructions)	Employer (See Instructions) Self)	
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Davis, Marthea Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$100.00
	Principal occu	Houston, TX 77021-2249 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 05/15/2015	Full name of contributor out-of-state PAC (ID#: Delaney, Alphonso Contributor address; City; State; Zip Code Houston, TX 77026-7429		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions) Retired)	
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Denham, Dawn Contributor address; City; State; Zip Code Pearland, TX 77584-4654)	Amount of Contribution (\$)	\$60.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	

	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 7/19 Rpt: 10/50	
2	FILER NAME Parker, Anni			3 Filer ID	
4	Date 05/18/2015	 Full name of contributor		7 Amount of Contribution (\$)	\$5,000.00
_		Houston, TX 77006-6134			
8	Principal occu Civil Engine	·	9 Employer (See Instructions) Edminster Hinshaw Rus		
	Date 05/07/2015	Full name of contributor out-of-state PAC (ID#:_Elliott, Douglas Contributor address; City; State; Zip Code Houston, TX 77005-1504)	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions self employed)	
	Date 04/17/2015	Full name of contributor out-of-state PAC (ID#:_ Evergreen, Alice Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$250.00
	Principal occu	Houston, TX 77023-4541 pation / Job title (See Instructions)	Employer (See Instructions	.	
	Legal Secret	·	Greenberg Traurig LLP)	
	Date 05/17/2015	Full name of contributor out-of-state PAC (ID#:_Fisher, Vallarie Contributor address; City; State; Zip Code Houston, TX 77043-4516		Amount of Contribution (\$)	\$250.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)	
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_Fowler, Cynthia Contributor address; City; State; Zip Code Houston, TX 77006-6325)	Amount of Contribution (\$)	\$500.00
	Principal occu Volunteer	pation / Job title (See Instructions)	Employer (See Instructions Retired		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/19 Rpt: 11/50	
2	FILER NAME			3	Filer ID	
	Parker, Anni	ise				
4	Date 05/05/2015	 Full name of contributor out-of-state PAC (ID#:_ Friedman, J. Kent Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
		Houston, TX 77024-7040				
8	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Haynes and Boone LLP)		
	Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	05/18/2015	Fulbright & Jaworski L.L.P. Texas Committee				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77010-3095				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 04/08/2015	Full name of contributor out-of-state PAC (ID#:_ Gibson, Steve			Amount of Contribution (\$)	\$500.00
		Contributor address; City; State; Zip Code				
	Dringinal accu	Houston, TX 77019-3105 upation / Job title (See Instructions)	Employer (See Instructions			
	Real estate	pation / Job title (See Instructions)	Western General	,		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	±0.500.00
	05/18/2015	Glazier, Bob				\$2,500.00
		Contributor address; City; State; Zip Code				
	Dringinal accu	Houston, TX 77055-3433	Employer (See Instructions			
	Retired	ipation / Job title (See Instructions)	N/A)		
	Date	Full name of contributor	C00266585)		Amount of Contribution (\$)	
	05/18/2015	Greenberg Traurig PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Albany, NY 12207-2510				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/19 Rpt: 12/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 05/25/2015	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
		Sugar Land, TX 77479-4330				
8	Principal occu Engineer	pation / Job title (See Instructions)	9 Employer (See Instructions Gunda Corporation)		
	Date 05/04/2015	Full name of contributor out-of-state PAC (ID#:_ Hagner, Robert Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Dringinal occu	Houston, TX 77079-2520 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired	pation / Job title (See Instructions)	none)		
	Date 05/18/2015	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77098-3916				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/17/2015	Full name of contributor out-of-state PAC (ID#:_Holland-Nelson, Leisa Contributor address; City; State; Zip Code Houston, TX 77057-2257)		Amount of Contribution (\$)	\$250.00
	Principal occu Owner/Foun	pation / Job title (See Instructions) der4	Employer (See Instructions ContentActive LLC)		
	Date 05/01/2015	Full name of contributor out-of-state PAC (ID#:_ Hu, Shou Ting Contributor address; City; State; Zip Code Bellaire, TX 77401-3711)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Geotechnica	pation / Job title (See Instructions) Il Engineer	Employer (See Instructions Aviles Engineering Corp		ation	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/19 Rpt: 13/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 05/15/2015	 Full name of contributor out-of-state PAC (ID#:_ James, Brian Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_		Houston, TX 77056-1005				
8	Consultant	pation / Job title (See Instructions)	9 Employer (See Instructions Sapient	5)		
	Date 04/13/2015	Full name of contributor out-of-state PAC (ID#:_ John, Bette Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77079-4100 pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>		
	retired	pation 7 oob title (occ mondellons)	none	')		
	Date 05/20/2015	Full name of contributor out-of-state PAC (ID#:_ Johnson, Steven Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Ashland, MA 01721-3019				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_Kalaga, Jaya Contributor address; City; State; Zip Code Sugar Land, TX 77479-5926			Amount of Contribution (\$)	\$5,000.00
	Principal occu Office Mana	pation / Job title (See Instructions) ger	Employer (See Instructions KIT Professionals Inc.	()		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_Kalaga, Sudhakar Contributor address; City; State; Zip Code Sugar Land, TX 77479-5926			Amount of Contribution (\$)	\$5,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions KIT Professionals Inc.	<u> </u>		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE /		
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 11/19 Rpt: 14/50		
2	FILER NAME Parker, Anni			3 Filer ID		
4	Date 05/13/2015	 Full name of contributor		7 Amount of Contribution (\$)	\$250.00	
_		Houston, TX 77006-4520				
8	Principal occu Lawyer	pation / Job title (See Instructions)	9 Employer (See Instructions Beirne Maynard & Parso			
	Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 Kennedy, Nathelyne Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$5,000.00		
	Principal occu	Houston, TX 77036-3366	Employer (See Instructions)		
			Nathelyene Kennedy & A			
	Date Full name of contributor out-of-state PAC (ID#:) 05/15/2015 Kilambi, Madhu Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00		
		Sugar Land, TX 77479-2876				
	Principal occu CIVIL CONS	pation / Job title (See Instructions) SULTING	Employer (See Instructions ARKK ENGINEERS LLC	,		
	Date 04/20/2015	Full name of contributor out-of-state PAC (ID#:_Lents, Ann Contributor address; City; State; Zip Code Houston, TX 77019-3210		Amount of Contribution (\$)	\$1,000.00	
	Principal occu retired/inves	pation / Job title (See Instructions) tments	Employer (See Instructions none)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ McCrary, M.R. Contributor address; City; State; Zip Code Houston, TX 77089-2222)	Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS			SCH	EDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule Sch: 12/19 Rpt: 15	
2	FILER NAME			3 Filer ID	
	Parker, Anni	ise			
4	Date 05/18/2015	Full name of contributor)	7 Amount of Contribution	on (\$) \$120.00
		San Antonio, TX 78258-4875			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	Date Full name of contributor out-of-state PAC (ID#:) 04/15/2015 Melnick, matilda Contributor address; City; State; Zip Code		Amount of Contribution	on (\$) \$250.00	
	Dringing!	Houston, TX 77063-2470	Frankrian (Cookarations		
	M.D.	upation / Job title (See Instructions)	Employer (See Instructions Retired	S)	
	Date 06/22/2015	Full name of contributor out-of-state PAC (ID#:_ Mischer Investments LP Contributor address; City; State; Zip Code		Amount of Contribution	\$1,000.00
		Houston, TX 77046-0923			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_Mitchell, Stephen Contributor address; City; State; Zip Code Albuquerque, NM 87111-8181		Amount of Contribution	on (\$) \$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_ Monsour, Trey Contributor address; City; State; Zip Code Houston, TX 77003-3238		Amount of Contribution	on (\$) \$500.00
	Principal occu Attorney (pa	upation / Job title (See Instructions) urtner)	Employer (See Instructions K&L Gates	s)	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1	
	The Instruc	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 13/19 Rpt: 16/50	
2	FILER NAME Parker, Anni	se			3	Filer ID	
4	Date 04/06/2015	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
_	Deinsinal assu	Houston, TX 77006-3221	- 10	Employer (Cool lockwestic no	<u></u>		
8	Archeologist	pation / Job title (See Instructions)		Employer (See Instructions Moore Archeological Co		ulting Inc.	
	Date Full name of contributor out-of-state PAC (ID#:) 04/22/2015 Paez, Tina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Principal occu	Houston, TX 77096-5920 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	manager	,		city of houston	,		
	Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 Peavy, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00		
		Houston, TX 77288-0043					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Retired	s)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (Petteway, Theola Contributor address; City; State; Zip Code Houston, TX 77004-4367				Amount of Contribution (\$)	\$100.00
	Principal occu Executive Di	pation / Job title (See Instructions) rector		Employer (See Instructions OST/Almeda Corridors		development Authority	
Date Full name of contributor out-of-state PAC (ID#:) Purser, Ray Contributor address; City; State; Zip Code Houston, TX 77009-1003			Amount of Contribution (\$)	\$1,000.00			
	Principal occu Vice Preside	pation / Job title (See Instructions) nt		Employer (See Instructions Comcast	s)		
			•				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/19 Rpt: 17/50	
2	FILER NAME			3	Filer ID	
	Parker, Anni	ise				
4	Date 06/22/2015	Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
		Houston, TX 77079-3098				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Rash, Jeanette Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Houston, TX 77020-2030				
	Principal occu President	ipation / Job title (See Instructions)	Employer (See Instructions Zone One Auto Storage			
	Date Full name of contributor out-of-state PAC (ID#:) 05/01/2015 Rhinehart, Paula Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
		Friendswood, TX 77546-2216				
	Principal occu Managing D	pation / Job title (See Instructions) irector	Employer (See Instructions Sirius Solutions LLLP	i)		
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_ Robertson, Lillie Contributor address; City; State; Zip Code Houston, TX 77002-7913			Amount of Contribution (\$)	\$5,000.00
	Principal occu Investor	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 04/06/2015	Full name of contributor out-of-state PAC (ID#:_ Robison, Ann Contributor address; City; State; Zip Code Houston, TX 77009-6734			Amount of Contribution (\$)	\$250.00
	Principal occu Executive D	ipation / Job title (See Instructions) irector	Employer (See Instructions the Montrose Center)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 15/19 Rpt: 18/50	
2	FILER NAME			3 Filer ID	
	Parker, Anni	ise			
4	Date 05/18/2015	 Full name of contributor		7 Amount of Contribution (\$)	\$100.00
		Houston, TX 77005-2151			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 04/15/2015	Full name of contributor out-of-state PAC (ID#:_ Samandari, Sudy Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$250.00
		Houston, TX 77079-6126			
	Principal occu Hair designe	pation / Job title (See Instructions)	Employer (See Instructions On Sunset Boulevard In		
	Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 Sandt, Justin Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$75.00	
		Houston, TX 77055-7324			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 05/30/2015	Full name of contributor out-of-state PAC (ID#:_Singh, Varinder (Bobby) Contributor address; City; State; Zip Code Houston, TX 77041-6634)	Amount of Contribution (\$)	\$5,000.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Isani Consultants)	
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Spinks, Melvin Contributor address; City; State; Zip Code Cypress, TX 77429-5000)	Amount of Contribution (\$)	\$5,000.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Civiltech Engineering Inc		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	LE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/19 Rpt: 19/50	
2	FILER NAME Parker, Anni			3	Filer ID	
4	Date 05/20/2015	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	Daine in all a second	Houston, TX 77079-6911				
8	Engineer	pation / Job title (See Instructions)	Employer (See Instructions) AECOM)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/20/2015 Sreerama, Karunakar Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Houston, TX 77059-3166 pation / Job title (See Instructions)	Employer (See Instructions)		
	Principal occupation 7 300 title (See instructions) President ESPA Corp. Inc.		,			
	Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 Surface, Michael Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Fulshear, TX 77441-4130				
	Principal occu Requested	pation / Job title (See Instructions)	Employer (See Instructions Requested)		
Date Full name of contributor out-of-state PAC (ID#:) 04/06/2015 Tabarovsky, Sophya Contributor address; City; State; Zip Code Cypress, TX 77429-4750			Amount of Contribution (\$)	\$250.00		
	Principal occu Journalism	pation / Job title (See Instructions)	Employer (See Instructions Self)		
Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 The Houston 8 Team LLC Contributor address; City; State; Zip Code Houston, TX 77019-4815			Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 17/19 Rpt: 20/50		
2	FILER NAME Parker, Anni			3	Filer ID		
4	Date 05/20/2015	Full name of contributor)	7	Amount of Contribution (\$)	\$100.00	
_		Houston, TX 77056-2320					
8	Principal occu Engineer	pation / Job title (See Instructions)	9 Employer (See Instructions TCB - AECOM)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 Trandell, Roger Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Principal occu	Houston, TX 77056-6832	Employer (See Instructions)			
	Project Manager Retired		,				
	Date Full name of contributor out-of-state PAC (ID#:) 05/01/2015 Truxillo, Bart Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
		Houston, TX 77008-4342					
	Principal occu architect	pation / Job title (See Instructions)	Employer (See Instructions self)			
	Date 05/28/2015	Full name of contributor out-of-state PAC (ID#:_ Tudor, Phoebe Contributor address; City; State; Zip Code Houston, TX 77006-6333			Amount of Contribution (\$)	\$5,000.00	
	Principal occu Homemaker	pation / Job title (See Instructions) /volunteer	Employer (See Instructions N/A)			
	Date 05/18/2015	Full name of contributor out-of-state PAC (ID#:_ Wengler, Frank Contributor address; City; State; Zip Code . Cypress, TX 77429)		Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDUI	DULE A1	
	The Instru	ction Guide explains how to complete this 1	form.		Total pages Schedule A1: Sch: 18/19 Rpt: 21/50		
2	FILER NAME Parker, Anni			3	Filer ID		
4	Date 04/30/2015	 Full name of contributor out-of-state PAC (ID#:_Weston, David Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$250.00	
	Dringing ogg	League City, TX 77573-6435 pation / Job title (See Instructions)	9 Employer (See Instructions)				
8	Area Manag		HDR Engineering Inc)			
	Date Full name of contributor x out-of-state PAC (ID#: C00251843) 06/10/2015 Weston Solutions Inc. Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
Washington, DC 20036-5546 Principal occupation / Job title (See Instructions) Employer (See Instruction)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/18/2015 Winkler, Bradley Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
	Principal occu	Houston, TX 77099-2918 pation / Job title (See Instructions)	Employer (See Instructions))			
		,		,			
	Date 06/30/2015	Full name of contributor out-of-state PAC (ID#:_ Wyatt, Anjanette Contributor address; City; State; Zip Code Houston, TX 77026-2133)		Amount of Contribution (\$)	\$250.00	
	Principal occu Pharmacist	pation / Job title (See Instructions)	Employer (See Instructions) Clinical Care Pharmaacy				
	Date Full name of contributor out-of-state PAC (ID#:) Vanamandala, Ravi Contributor address; City; State; Zip Code Houston, TX 77584-4312			Amount of Contribution (\$)	\$2,500.00		
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions) Geotest Engineering)			

MONEI	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1		
The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 19/19 Rpt: 22/50			
FILER NAME Parker, Anni				3	Filer ID	
Date 05/17/2015	Zarinkelk, Giti 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$5,000.00
Principal occu	Houston, TX 77019	T _a	Employer (See Instructions)			
President	pation / Job title (See instructions)				rices Inc	
	The Instru FILER NAME Parker, Ann Date 05/17/2015	The Instruction Guide explains how to complete this FILER NAME Parker, Annise Date 05/17/2015 5 Full name of contributor out-of-state PAC (ID#: 2arinkelk, Giti 6 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions)	The Instruction Guide explains how to complete this form FILER NAME Parker, Annise Date 05/17/2015 5 Full name of contributor out-of-state PAC (ID#:	The Instruction Guide explains how to complete this form. FILER NAME Parker, Annise Date 05/17/2015 5 Full name of contributor out-of-state PAC (ID#:) Zarinkelk, Giti 6 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	The Instruction Guide explains how to complete this form. FILER NAME Parker, Annise Date 05/17/2015 Carinkelk, Giti G Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	The Instruction Guide explains how to complete this form. FILER NAME Parker, Annise Date 05/17/2015 6 Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) 1 Total pages Schedule A1: Sch: 19/19 Rpt: 22/50 3 Filer ID 7 Amount of Contribution (\$) 7 Amount of Contribution (\$)

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to co	omple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 1/25 Rpt: 23/50	Parker, Annise		
4	Date	5 Payee name		<u>'</u>
	01/29/2015	AT&T		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$47.98	PO Box 105414		
		Atlanta, GA 30348		
8	PURPOSE		(h)	Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	2.100		Check if Austin, TX, officeholder living expense
				Campaign cell phone
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held
	experiorare to benefit C/O	'		
	Date	Payee name		
	03/02/2015	AT&T		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$47.98	PO Box 105414		
		Atlanta, GA 30348		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE			Check if Austin, TX, officeholder living expense
				Campaign telephone
_	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office held
	expenditure to benefit C/OI		agrit	Office field
-	Date			
	Date	Payee name		
	05/05/2015	AT&T		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$55.82	PO Box 105414		
		Atlanta, GA 30348		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Campaign cell phone
				-
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
	expenditure to benefit C/OI			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeriolder/Folitica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
_	Sch: 2/25 Rpt: 24/50	Parker, Annise
4	Date	5 Payee name
	06/05/2015	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.82	PO Box 105414
	, , , ,	
		Atlanta, GA 30348
8	PURPOSE	
o	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign cell phone
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oi	7
	Date	Payee name
	03/02/2015	Amegy Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.00	1801 Main St.
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Banking fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	01/02/2015	American Express
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.95	PO Box 53852
		Phoenix, AZ 85072
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Processing Fees
		Greate Gara i rocessing i des
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

l		The Instruction Guide explains how to complete t	this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 3/25 Rpt: 25/50	Parker, Annise	
4	Date	5 Payee name	·
	02/02/2015	American Express	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$7.95	PO Box 53852	
		Phoenix, AZ 85072	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription
	OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
		Cr	redit Card Processing Fees
Ļ	Complete ONLY if disent	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/OI		Office held
┝		1	
	Date	Payee name	
L	03/02/2015	American Express	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$7.95	PO Box 53852	
L		Phoenix, AZ 85072	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) De	escription
	EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		1	redit card processing fees
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI)H	
H	Date	Payee name	
	04/07/2015	American Express	
H	Amount (\$)	Payee address; City; State; Zip Code	
l	\$13.00	PO Box 53852	
l	¥20.00		
		Phoenix, AZ 85072	
	PURPOSE		ecoription
l	OF	, , ,	escription Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Cr	redit card processing fees
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
L	expenditure to benefit C/OI	nn	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID			
	Sch: 4/25 Rpt: 26/50	Parker, Annise			
4	Date	5 Payee name			
	04/06/2015	Callaway, Victoria			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$700.00	10114 W. Temple Dr.			
		Houston, TX 77095			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Contract labor			
		Contract labor			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
ľ	expenditure to benefit C/OI	the state of the s			
H	Date	Payee name			
	05/27/2015	Callaway, Victoria			
┝	Amount (\$)	Payee address; City; State; Zip Code			
	\$175.00	10114 W. Temple Dr.			
	4170.00	1011 T T T T T T T T T T T T T T T T T T			
		Houston, TX 77095			
┡	PURPOSE				
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Contract labor			
L					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experialiture to benefit C/Oi				
	Date	Payee name			
	01/20/2015	Canopy			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	3939 Montrose Blvd.			
		Houston, TX 77006			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Catering for officeholder event			
		Catering for officeriolaer event			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
\vdash					
ĺ					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 5/25 Rpt: 27/50	Parker, Annise				
4	Date	5 Payee name				
	06/01/2015	Canopy				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$191.19	3939 Montrose Blvd.				
		Houston, TX 77006				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Catering for campaign event				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
F	Date	Payee name				
	06/08/2015	Canopy				
⊢	Amount (\$)	Payee address; City; State; Zip Code				
	\$2,465.00	3939 Montrose Blvd.				
	, ,					
		Houston, TX 77006				
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Catering for campaign event				
L	Commiste ONII V if disent	Candidate/Officeholder name Office sought Office held				
	Complete ONLY if direct expenditure to benefit C/OI					
⊨	D-1-					
	Date 01/14/2015	Payee name Cricket Communications				
	Amount (\$) \$33.25	Payee address; City; State; Zip Code PO Box 660021				
	\$33.25	PO BOX 660021				
		Dallag TV 75000				
L		Dallas, TX 75266				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Campaign cell phone				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
L	expenditure to benefit C/OI	1				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor,

	Candidate/Officeriolder/Folitica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 6/25 Rpt: 28/50	Parker, Annise
Ļ	<u> </u>	
4	Date	5 Payee name
	02/03/2015	Cricket Communications
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$33.25	PO Box 660021
		Dallas, TX 75266
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign cell phone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/02/2015	Cricket Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.25	PO Box 660021
		Dallas, TX 75266
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign cell phone
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/05/2015	Cricket Communications
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.25	PO Box 660021
	Ψ33.23	1 0 500 000021
		Dallag TV 7F2CC
		Dallas, TX 75266
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign cell phone
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeriolide//Folitica	The Instruction Guide explains how to con	-	te this form
1	Total pages Cabadula F1:	•	пріс	3 Filer ID
1	Total pages Schedule F1: Sch: 7/25 Rpt: 29/50			3 FIIEI ID
	·	Parker, Annise		
4	Date	5 Payee name		
	06/05/2015	Cricket Communications		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$33.25	PO Box 660021		
		Dallas, TX 75266		
8	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(2)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Onice Overnead/Nertal Expense		Check if Austin, TX, officeholder living expense
				Campaign cell phone
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	1		
_	Date	Payee name		
	02/26/2015	FBO Dwight Bazile		
	Amount (\$)	Payee address; City; State; Zip Coo	do	
	\$1,000.00	1200 Travis	uc	
	Ψ1,000.00	1200 114415		
		Houson, TX 77002		
	PURPOSE OF	, ,	(b)	Description
	EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Memorial expense for Capt. Dwight Bazile
				3
_	Complete ONLY if direct	Candidate/Officeholder name Office soug	thr	Office held
	expenditure to benefit C/OI		,	
_	Data	Device name		
	Date	Payee name Gateway Services		
	01/05/2015	•		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$27.95	7565 Irvine Center Dr.		
		Irvine, CA 92618		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Credit Card Processing Fees
_				200
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
		•		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID		
	Sch: 8/25 Rpt: 30/50	Parker, Annise				
4	Date	5 Payee name		<u> </u>		
	02/03/2015	Gateway Services				
6	Amount (\$)	7 Payee address; City; State; Zip C	ode			
	\$27.95	7565 Irvine Center Dr.				
		Irvine, CA 92618				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.		
	LAI LINDITORE			Credit cord processing food		
				Credit card processing fees		
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held		
9	expenditure to benefit C/OI		ugnt	Office field		
_	Data	P				
	Date 03/02/2015	Payee name				
		Gateway Services	1 -			
	Amount (\$)	Payee address; City; State; Zip C	ode			
	\$27.95	7565 Irvine Center Dr.				
		Irvine, CA 92618				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
				Credit card processing fees		
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held		
	expenditure to benefit C/OI	1				
	Date	Payee name				
	05/05/2015	Gateway Services				
	Amount (\$)	Payee address; City; State; Zip C	ode			
	\$27.95	7565 Irvine Center Dr.				
		Irvine, CA 92618				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.		
	LAPENDITORE			Check if Austin, TX, officeholder living expense		
				Credit card processing fees		
_	Complete ONLY if direct	Candidate/Officeholder name Office so	labt	Office hold		
	Complete ONLY if direct expenditure to benefit C/OI		uynı	Office held		
_						
l						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 9/25 Rpt: 31/50	Parker, Annise		
4	Date	5 Payee name		
	06/02/2015	Gateway Services		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$27.95	7565 Irvine Center Dr.		
		Irvine, CA 92618		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
				Credit card processing fees
				Croak sara processing roce
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	l aht	Office held
	expenditure to benefit C/OI		9	
-	Date	Payee name		
	04/09/2015	Greater Houston Partnership		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$5,710.00	1200 Smith St.		
	, , , , , , , , , , , , , , , , , , , ,	Suite 700		
		Houston, TX 77002		
-	PURPOSE		(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(5)	X Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Traver out or blother		Check if Austin, TX, officeholder living expense
				Expenses for trade mission to India
			<u> </u>	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
	- p			
	Date	Payee name		
	06/18/2015	Harris County Democratic Party		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$10,000.00	1445 N. Loop W.		
		Suite 110		
		Houston, TX 77008		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense Dinner sponsorship
				Zillior oponoorollip
-	Complete ONLY if direct	Candidate/Officeholder name Office sou	l ight	Office held
	expenditure to benefit C/OI		J. 11	255 11010
H				
ı				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 10/25 Rpt: 32/50	Parker, Annise		
4	Date	5 Payee name		1
	04/24/2015	Houston First Corporation		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$2,350.00	501 Preston		
		4th Floor		
		Houston, TX 77002		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Expenses for City event
				Expenses for only event
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office held
	expenditure to benefit C/OI		.g	Cince Hold
-	Date	Payee name		
	06/29/2015	Houston Zoo		
	Amount (\$)	Payee address; City; State; Zip Co	nde	
	\$1,120.00	1513 N. MacGregor		
	, -,			
		Houston, TX 77030		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Tickets for City event
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>ı</u> ıght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	02/03/2015	International Women's Forum Leadership Four	ndat	ion
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$500.00	2120 L Street NW		
		Suite 460		
		Washinton, DC 20037		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Sponsorship for Houston event
				opensorally for Flouaton event
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	laht	Office held
	expenditure to benefit C/OI		4911L	Office Held
\vdash				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

			The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID
	Sch: 11/25 Rpt: 33/50		Parker, Annise		
4	Date	5	Payee name		
	05/15/2015		Kyrsten Sinema for Congress		
6	Amount (\$)	ı	Payee address; City; State; Zip Co	ode	
	\$250.00		PO Box 25879		
			Tempe, AZ 85285		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense Campaign Contribution
					Campaign Continuation
9	Complete ONLY if direct		Candidate/Officeholder name Office sou	l laht	Office held
ľ	expenditure to benefit C/O		0.100 000	·9···	Since near
H	Date	Π	Payee name		
	03/31/2015	ı	Lone Star Strategies		
┝	Amount (\$)	_	Payee address; City; State; Zip Co	nde	
	\$1,250.00	ı	10709 Marsha Ln.	Juc	
	Ψ1,230.00		10700 Maisha En.		
			Houston TV 77024		
L		├	Houston, TX 77024		
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Consulting Expense		Check if Austin, TX, officeholder living expense
					Compliance consulting fee
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ight	Office held
	expenditure to benefit C/Ol	Н			
	Date		Payee name		
	06/01/2015		Lone Star Strategies		
	Amount (\$)		Payee address; City; State; Zip Co	ode	
	\$500.00		10709 Marsha Ln.		
			Houston, TX 77024		
Г	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Consulting Expense		Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE				Check if Austin, TX, officeholder living expense
					Compliance consulting fee
\vdash	Complete ONLY if direct	Ļ	Candidate/Officeholder name Office sou	laht Iaht	Office held
	expenditure to benefit C/O		variationale/Officeriolider frame Office Soc	ıyılı	Office field
\vdash					
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 12/25 Rpt: 34/50	Parker, Annise
4	Date	5 Payee name
	01/06/2015	Merchant Bankcard
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$41.95	PO Box 6600
		Hagerstown, MD 21740
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Processing Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	01/06/2015	Merchant Bankcard
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$41.95	PO Box 6600
	,	
		Hagerstown, MD 21740
H	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	01/06/2015	Merchant Bankcard
l	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	PO Box 6600
		Hagerstown, MD 21740
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
		5.55.1. 5.1. 1
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
\vdash		
ĺ		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 13/25 Rpt: 35/50	Parker, Annise
4	Date	5 Payee name
	02/03/2015	Merchant Bankcard
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$19.95	PO Box 6600
		Hagerstown, MD 21740
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit card processing fees
		Credit card processing rees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	02/03/2015	Merchant Bankcard
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$41.95	PO Box 6600
	Ψ+1.55	1 O Box 0000
		Hagaretown MD 21740
L	DUDDOOT.	Hagerstown, MD 21740
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	
	Date	Payee name
	02/03/2015	Merchant Bankcard
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.95	PO Box 6600
		Hagerstown, MD 21740
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit card processing fees
		2.5an 5an a p. 55555g
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
ı		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 14/25 Rpt: 36/50	Parker, Annise	
4	Date	5 Payee name	_
	03/02/2015	Merchant Bankcard	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$19.95	PO Box 6600	
		Hagerstown, MD 21740	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit card processing fees	
Ļ	0 1: 0:::::::::::::::::::::::::::::::::		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	·		_
	Date	Payee name	
L	03/02/2015	Merchant Bankcard	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.95	PO Box 6600	
		Hagerstown, MD 21740	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit card processing fees	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
F	Date	Payee name	-
	03/02/2015	Merchant Bankcard	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$41.95	PO Box 6600	
		Hagerstown, MD 21740	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Credit card processing fees	
L			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	Superiorder to borront 0/01		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		ler ID
	Sch: 15/25 Rpt: 37/50	Parker, Annise	
4	Date	5 Payee name	
	05/05/2015	Merchant Bankcard	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$380.54	PO Box 6600	
	!	MD 04740	
Ļ		Hagerstown, MD 21740	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of	of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking	·
	!	Credit card process	sing fees
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	05/05/2015	Merchant Bankcard	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.95	PO Box 6600	
	!	MD 04740	
_		Hagerstown, MD 21740	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of the control of t	of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside to Check if Austin, TX, offi	·
	!	Credit card process	sing fees
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	experialiture to benefit 6/01	JII	
	Date	Payee name	
	05/05/2015	Merchant Bankcard	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.25	PO Box 6600	
		Hagerstown, MD 21740	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside a	of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside to Check if Austin, TX, offi	
		Credit card process	sing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	JH	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 16/25 Rpt: 38/50	Parker, Annise				
4	Date	5 Payee name				
	05/05/2015	Merchant Bankcard				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$41.95	PO Box 6600				
		Hagerstown, MD 21740				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Credit card processing fees				
		Credit data processing rees				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	expenditure to benefit C/OI					
F	Date	Payee name				
	05/05/2015	Merchant Bankcard				
⊢	Amount (\$)	Payee address; City; State; Zip Code				
	\$532.78	PO Box 6600				
	4002.110	1 0 26% 0000				
		Hagerstown, MD 21740				
⊢	PURPOSE	<u> </u>				
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Credit card processing fees				
L						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
L	experianci o to borioni Grei					
	Date	Payee name				
	06/03/2015	Merchant Bankcard				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$19.95	PO Box 6600				
		Hagerstown, MD 21740				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Credit card processing fees				
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI					
H						
1						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID							
	Sch: 17/25 Rpt: 39/50	Parker, Annise							
4	Date	5 Payee name							
	06/03/2015	Merchant Bankcard							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$27.80	PO Box 6600							
		Hagerstown, MD 21740							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.							
	EXI ENDITORE	Check if Austin, TX, officeholder living expense							
		Credit card processing fees							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
_	Data								
	Date 06/03/2015	Payee name Merchant Bankcard							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$41.95	PO Box 6600							
		Hagerstown, MD 21740							
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
		Credit card processing fees							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI	1							
	Date	Payee name							
	06/03/2015	Merchant Bankcard							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$125.24	PO Box 6600							
		Hagerstown, MD 21740							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.							
	EXPENDITURE	Check if Austin, TX, officeholder living expense							
		Credit card processing fees							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID		
	Sch: 18/25 Rpt: 40/50	Parker, Annise				
4	Date	5 Payee name				
	06/03/2015	Merchant Bankcard				
6	Amount (\$)	7 Payee address; City; State; Zip Co	de			
	\$525.25	PO Box 6600				
		Hagerstown, MD 21740				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
				Credit card processing fees		
				Great care processing rece		
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held		
	expenditure to benefit C/O		9			
-	Date	Payee name				
	01/06/2015	NGP VAN Inc.				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$1,950.00	1101 15th St. NW	uo			
	+ =,000.00	Suite 500				
		Washington, DC 20005				
	PURPOSE	-	(h)	Description		
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(D)	Description Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Cinide Overhead/Nerital Expense		Check if Austin, TX, officeholder living expense		
				Fundraising Database		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ght	Office held		
	- CAPCHARLATO TO SOLIOIR GAO					
	Date	Payee name				
	03/31/2015	NGP VAN Inc.				
	Amount (\$)	Payee address; City; State; Zip Co	de			
	\$2,250.00	1101 15th St. NW				
		Suite 500				
		Washington, DC 20005				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
				Fundraising database subscription		
H	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held		
	expenditure to benefit C/O		J			
-						
•						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID					
	Sch: 19/25 Rpt: 41/50	Parker, Annise					
4	Date	5 Payee name					
	06/16/2015	NGP VAN Inc.					
	Amount (\$) \$602.25	7 Payee address; City; State; Zip Code 1101 15th St. NW Suite 500 Washington, DC 20005					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign fundraising database					
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
L	01/05/2015	Paymentech					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$27.00	PO Box 6600 Hagerstown, MD 21740					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
ſ	Date	Payee name					
	02/02/2015	Paymentech					
	Amount (\$) \$27.00	Payee address; City; State; Zip Code PO Box 6600					
		Hagerstown, MD 21740					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

			The Instruction Guide explains how to o	compl	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID
	Sch: 20/25 Rpt: 42/50		Parker, Annise		
4	Date	5	Payee name		
	03/02/2015		Paymentech		
6	Amount (\$)	7	Payee address; City; State; Zip C	Code	
	\$27.00		PO Box 6600		
			Hagerstown, MD 21740		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Credit card processing fees
					Great dard prodessing rees
9	Complete ONLY if direct		Candidate/Officeholder name Office so	<u>l</u> ouaht	Office held
	expenditure to benefit C/O		San and and a san a	, ag	C.IIGC IIGG
_	Date	Π	Payee name		
	05/05/2015		Paymentech		
	Amount (\$)	H	Payee address; City; State; Zip C	Code	
	\$27.00		PO Box 6600	Jouc	
	Ψ21.00		. 6 26X 6666		
			Hagerstown, MD 21740		
	PURPOSE	(2)		(h)	Description
	OF	(4)	Category (See Categories listed at the top of this schedule) Accounting/Banking	(5)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Accounting/Danking		Check if Austin, TX, officeholder living expense
					Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office so	ought	Office held
	experialiture to benefit C/Or				
	Date		Payee name		
	06/03/2015		Paymentech		
	Amount (\$)		Payee address; City; State; Zip C	Code	
	\$27.00		PO Box 6600		
			Hagerstown, MD 21740		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Credit card processing fees
					Credit Card processing lees
	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office so	nuaht	Office held
	expenditure to benefit C/O		Januare/Onicenduct name Office St	Jugiil	Office Held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID				
	Sch: 21/25 Rpt: 43/50	Parker, Annise					
4	Date	5 Payee name	•				
	01/08/2015	Sprint					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$108.04	PO Box 660075					
		Dallas, TX 75266					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.				
			Check if Austin, TX, officeholder living expense Officeholder cell phone				
			Officeriolider cell priorie				
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held				
ľ	expenditure to benefit C/OI		e inde nota				
_	Date	Payee name					
	02/03/2015	Sprint					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$108.14	PO Box 660075					
	¥-20						
		Dallas, TX 75266					
	PURPOSE) Description				
	OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Sinos evernodari expense	Check if Austin, TX, officeholder living expense				
			Campaign cell phone				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough H	t Office held				
		T					
	Date	Payee name					
	03/02/2015	Sprint					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$108.14	PO Box 660075					
		_ ,, _,,,					
		Dallas, TX 75266					
	PURPOSE OF	, , ,	Description				
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
			Campaign cell phone				
			-				
	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held				
	expenditure to benefit C/OI	Н					

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		xpense Vages/	Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	
L	Sch: 22/25 Rpt: 44/50	Parker, Anr	nise						
4	Date	5 Payee name							
	05/05/2015	Sprint							
6	Amount (\$)	7 Payee addre	ss; City; S	State; Zip Co	ode				
	\$221.80	PO Box 66	0075						
		Dallas, TX	75266						
8	PURPOSE OF		ee Categories listed at the top of th	nis schedule)	(b)	Description			
	EXPENDITURE	Office Over	head/Rental Expense					e of Texas. Complete Schedule T. officeholder living expense	
					'	Campaign cel			
						, 5	٠		
9	Complete ONLY if direct		iceholder name	Office sou	ıght			Office held	
	expenditure to benefit C/OI	H 							
	Date	Payee name							
L	06/05/2015	Sprint							
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$119.69	PO Box 66	0075						
L		Dallas, TX	75266						
	PURPOSE OF		ee Categories listed at the top of th	nis schedule)	(b)	Description			
	EXPENDITURE	Office Over	head/Rental Expense			-		e of Texas. Complete Schedule T. officeholder living expense	
						Campaign cel			
						. 0	•		
	Complete ONLY if direct		iceholder name	Office sou	ıght			Office held	
	expenditure to benefit C/OI	H 							
	Date	Payee name							
	03/25/2015	Storefront F	Political Media						
	Amount (\$)	Payee addre	•	State; Zip Co	ode				
	\$16,338.28	160 Pine S	t.						
		Suite 700							
		San Francis	sco, CA 94111						
	PURPOSE	(a) Category (S	ee Categories listed at the top of th	nis schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense			—		e of Texas. Complete Schedule T. officeholder living expense	
						Newspaper a			
						,			
	Complete ONLY if direct		iceholder name	Office sou	<u>L</u> ıght			Office held	
	expenditure to benefit C/OI	H							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 23/25 Rpt: 45/50	Parker, Annise				
4	Date	5 Payee name				
	05/05/2015	Texas Workforce Commission				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
l	\$30.00	2810 E. Martin Luther King Jr. Blvd.				
		Austin, TX 78702				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor				
		Check if Austin, TX, officeholder living expense				
		Payroll taxes				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
ľ	expenditure to benefit C/Ol					
┝	Data	David and the second se				
	Date 01/29/2015	Payee name United States Treasury				
L						
l	Amount (\$)	Payee address; City; State; Zip Code				
	\$42.00	1619 E. Woodward St.				
L		Austin, TX 78701				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Payroll taxes				
		, in the second				
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	1				
	Date	Payee name				
	03/10/2015	United States Treasury				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$211.00	1619 E. Woodward St.				
		Austin, TX 78701				
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
l		Payroll taxes				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
L	experience to beliefft G/O	·				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to com	nple	te this form.	
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID	
	Sch: 24/25 Rpt: 46/50	Parker, Annise			
4	Date	5 Payee name			
	01/30/2015	Wade, Keith			
6	Amount (\$)	7 Payee address; City; State; Zip Cod	de		
	\$5,000.00	PO Box 88031			
		Houston, TX 77288			
8	PURPOSE OF	2 ((b)	Description	
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
				Contract Labor	
9	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held	_
	expenditure to benefit C/OI	1			
	Date	Payee name			_
	03/02/2015	Wade, Keith			
	Amount (\$)	Payee address; City; State; Zip Cod	de		
	\$5,000.00	PO Box 88031			
		Houston, TX 77288			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.	
				Check if Austin, TX, officeholder living expense Contract labor	
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held	_
	expenditure to benefit C/OI	1			
	Date	Payee name			_
	04/01/2015	Wade, Keith			
	Amount (\$)	Payee address; City; State; Zip Cod	de		_
	\$5,000.00	PO Box 88031			
		Houston, TX 77288			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	_
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.	
	ZAI ZABITORZ			Check if Austin, TX, officeholder living expense Contract labor	
				Contract labor	
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ıht	Office held	_
	expenditure to benefit C/OI	9	,	Since field	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID	
	Sch: 25/25 Rpt: 47/50		Parker, Annise				
4	Date	5	Payee name				
	05/04/2015		Wade, Keith				
6	Amount (\$)	ı		State; Zip Co	de		
	\$5,000.00		PO Box 88031				
			Houston, TX 77288				
8	PURPOSE OF		Category (See Categories listed at the top of	this schedule)	(b)	Description	
	EXPENDITURE		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
						Contract labor	
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght	Office held	
	expenditure to benefit C/O				-		
	Date		Payee name				
	06/01/2015	ı	Wade, Keith				
	Amount (\$)	H	Payee address; City;	State; Zip Co	de		
	\$5,000.00		PO Box 88031				
			Houston, TX 77288				
	PURPOSE		Category (See Categories listed at the top of	this schedule)	(b)	Description	
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of Salaries/Wages/Contract Labor	this schedule)	(b)	Check if travel outside of Texas. Complete Schedule T.	
	OF			this schedule)		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF			this schedule)		Check if travel outside of Texas. Complete Schedule T.	
	OF			this schedule) Office sou		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	
	OF EXPENDITURE Complete ONLY if direct		Salaries/Wages/Contract Labor			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor	

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME 3 Filer ID Sch: 1/1 Rpt: 48/50 Parker, Annise \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 06/19/2015 Storefront Political Media Amount (\$) Payee address; City; State; Zip Code \$16,039.23 160 Pine St. Suite 700 San Francisco, CA 94111 TYPE OF Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Newspaper ads 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCH	FD	ш	F	k
эсп	ᄆ	UL	. =	•

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	The Instruction Guide explains how to complete this form.					otal pages Schedule K: ch: 1/1 Rpt: 49/50		
2	Parker, Annise 3 Fi					r ID		
4	Date 01/17/2015	5	Name of person from whom amount is received Prosperity Bank Address of person from whom amount is received; City; State; Zip Code				8 Amount (\$)	\$20.22
		7	4295 San Felipe Houston, TX 77027 Purpose for which amount is received	ooliti	cal co	ontr	ibution returned to filer	
			Interest					
	Date 01/27/2015		Name of person from whom amount is received Prosperity Bank Address of person from whom amount is received; City; State; Zip Code 4295 San Felipe				Amount (\$)	\$18.96
			Houston, TX 77027					
			Purpose for which amount is received	ooliti	cal co	ontr	ibution returned to filer	
	Date 02/17/2015		Name of person from whom amount is received Prosperity Bank Address of person from whom amount is received; City; State; Zip Code 4295 San Felipe				Amount (\$)	\$18.96
			Houston, TX 77027					
			Purpose for which amount is received	ooliti	cal co	ontr	ibution returned to filer	
	Date 04/30/2015		Name of person from whom amount is received Prosperity Bank Address of person from whom amount is received; City; State; Zip Code 4295 San Felipe				Amount (\$)	\$18.96
			Houston, TX 77027					
			Purpose for which amount is received	ooliti	cal co	ontr	ibution returned to filer	

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 50/50 2 FILER NAME 3 Filer ID Parker, Annise 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Greater Houston Partnership 5 Contribution / Expenditure reported on: X Schedule F1 Schedule A2 Schedule B Schedule B(J) Schedule D Schedule C2 Schedule G Schedule COH-UC Schedule F2 Schedule H Schedule B - SS 6 Dates of Travel 7 Name of person(s) traveling Parker, Annise 8 Departure city or name of departure location 01/01/2015 Houston 9 Destination city or name of destination location 01/01/2015 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Commercial Airplane Trade mission