#### **CANDIDATE / OFFICEHOLDER** FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 51 MS/MRS/MR CANDIDATE / FIRST М **OFFICE USE ONLY OFFICEHOLDER** Carroll G. NAME Date Received NICKNAME LAST **SUFFIX** Robinson CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE Date Hand-delivered or Date Postmarked OFFICEHOLDER P.O Box MAILING Receipt # Amount ADDRESS 8325 X Change of Address Houston, TX 77288 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST МІ TREASURER Mr. L NAME Victor RECEIVED JUL 1 5 2015 **NICKNAME** LAST **SUFFIX CITY SECRETARY** Cardenas Jr. STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; CITY; **TREASURER** 3900 Essex, Suite 700 **ADDRESS** (Residence or Business) Houston, Texas 77027 CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** PHONE

	PHONE	713-355-5007			
8	REPORT TYPE			<b>—</b> ар	oth day after campaign treasurer pointment (officeholder only) nal Report (Attach C/OH-FR)
9	PERIOD COVERED	Month Day Year 01/01/2015	THROUGH	Month Day 06/29/2015	Year
10	ELECTION	ELECTION DATE Month Day Year 11/03/2015	Primary  X General	ELECTION TYPE Runoff Special	Other
11	OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if knd City Controller	own)

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Version V1.0.28282

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 51

13 C / OH NAME	Robinson, Carroll G.	1	4 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure.  These expenditures may have been made without the difficeholders are required to report this information.	e candidate's or officeh	older's knowledge	e or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
Ш	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	3		
16 CONTRIBUTION TOTALS		L AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TH ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$	0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		<b>\$</b> 50,	078.94
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS I	ΓΕΜΙΖΕD	\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 33,	973.40
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA RIOD	ST DAY OF THE	<b>\$</b> 5,	033.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS C TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFADAVIT	•			•	
		I swear, or affirm, under penalty of true and correct and includes all under Title 15, Election Code.  Carroll Signature of Company of Control of Code.	information required to	be reported by me	e
AFFIX NO	ΓARY STAMP / SEAL AB				
		aid	, this the	day	
01	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of office	er administering	Printed name of officer administering	Title of officer a	administering oath	<u> </u>

### **SUBTOTALS - C/OH**

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

					3 of 51
<b>18</b> FIL	ER NAN	AE .	19 Filer ID		
Ro	binson	Carroll G.			
		E SUBTOTALS			SUBTOTAL AMOUNT
NA	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	46,170.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,908.94
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		<del>()</del>	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	33,948.51
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	<b>\$</b>	
8.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b>	24.89
9.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	<b>\$</b>	
10.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	300.00
11.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	_

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/15 Rpt: 4/51	
2	FILER NAME Robinson, C			3	Filer ID	
4	Date 01/16/2015	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$1,500.00
		TX 77002				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 04/21/2015	Full name of contributor out-of-state PAC (ID#:_Austin, Glen  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu	TX 77004 pation / Job title (See Instructions)	Employer (See Instructions			
	- Timoipai occa	pation / cos title (ese metastions)	Employer (Geo metrocione			
	Date 04/01/2015	Full name of contributor out-of-state PAC (ID#:_ Bailey, Carla Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
		TX 77288				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/29/2015	Full name of contributor out-of-state PAC (ID#:_ Bremond, Lucy Contributor address; City; State; Zip Code  TX 77478			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 04/27/2015	Full name of contributor out-of-state PAC (ID#:_ Bruner, Terry  Contributor address; City; State; Zip Code  TX 77025			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/15 Rpt: 5/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	Carroll G.				
4	Date 01/22/2015	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$25.00
		TX 77082				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/02/2015	Colon, Edgardo				\$1,000.00
		Contributor address; City; State; Zip Code				
		TX 77007				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 04/22/2015	Full name of contributor out-of-state PAC (ID#:_ Council, Tony Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		TX 77042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/25/2015	Full name of contributor out-of-state PAC (ID#:_ Evans-Shabazz, Carolyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		TX 77004				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	04/21/2015	Falls Jr, Keffus				\$50.00
		Contributor address; City; State; Zip Code				
		TX 77025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	l	Total pages Schedule A1: Sch: 3/15 Rpt: 6/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	arroll G.				
4	Date 01/26/2015	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$25.00
		TX 77096				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/25/2015	Gilmore, Sharon				\$100.00
		Contributor address; City; State; Zip Code				
		TX 75024				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/13/2015	Glendenning, Rex or Sherese  Contributor address; City; State; Zip Code				\$500.00
		TX 75009				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 01/22/2015	Full name of contributor out-of-state PAC (ID#:_ Guess, John Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		TX 77096				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	06/25/2015	Harani, Vasant				\$250.00
		Contributor address; City; State; Zip Code				
		TX 77056				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/15 Rpt: 7/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	arroll G.				
4	Date 03/11/2015	Full name of contributor		7	Amount of Contribution (\$)	\$250.00
		TX 77021				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 01/23/2015	Full name of contributor out-of-state PAC (ID#:_ Haynes & Boone PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		TX 75082				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/15/2015	Full name of contributor out-of-state PAC (ID#:_ Helfman, Alan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/17/2015	Full name of contributor out-of-state PAC (ID#:_ Hines, Hubert  Contributor address; City; State; Zip Code  TX 77068			Amount of Contribution (\$)	\$250.00
	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 05/11/2015	Full name of contributor out-of-state PAC (ID#:_ Houston Fire Fighters  Contributor address; City; State; Zip Code  TX 77009			Amount of Contribution (\$)	\$5,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<b>S</b> )		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 5/15 Rpt: 8/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	carroll G.				
4	Date 02/25/2015	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Jackson, William</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$250.00
		TX 77027				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	04/02/2015	Johnson, Courtney				\$500.00
		Contributor address; City; State; Zip Code				
		TX 77459				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/20/2015	Johnson, Patrick				\$250.00
		Contributor address; City; State; Zip Code				
		TX 77583				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/02/2015	Johnson, Thomasine				\$200.00
		Contributor address; City; State; Zip Code				
		TX 77459				
	Principal occu	ppation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor uut-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	03/18/2015	Joiner, John				\$100.00
		Contributor address; City; State; Zip Code				
		TX 77056				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
			1			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/15 Rpt: 9/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	arroll G.				
4	Date 02/05/2015	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,500.00
		TX 77584				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/18/2015	Full name of contributor out-of-state PAC (ID#:_ Lee, C.C.			Amount of Contribution (\$)	\$250.00
		Contributor address; City; State; Zip Code				
		TX 77036				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/19/2015	Full name of contributor out-of-state PAC (ID#:_ Lee, C.C. Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		TX 77036				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/17/2015	Full name of contributor out-of-state PAC (ID#:_ Lee, Chaochiung (C.C.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	TX 77036  Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 05/12/2015	Full name of contributor out-of-state PAC (ID#:_ Lewis, Sherman Contributor address; City; State; Zip Code  OK 73034			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/15 Rpt: 10/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	arroll G.				
4	Date 06/22/2015	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Lyn, Kurt</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$250.00
		TX 77027				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 03/30/2015	Full name of contributor out-of-state PAC (ID#:_ Mahomes, Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
		TX 75201				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/18/2015	Full name of contributor out-of-state PAC (ID#:_Maldonado, Juan  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		TX 77023				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/26/2015	Full name of contributor out-of-state PAC (ID#:_ Malveaux, Julia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	TX 75225  spation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 01/16/2015	Full name of contributor out-of-state PAC (ID#:_ Marroquin, Rogelio Contributor address; City; State; Zip Code  TX 77061			Amount of Contribution (\$)	\$50.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.		pages Schedule A1: 8/15 Rpt: 11/51	
2	FILER NAME			3 Filer	ID	
	Robinson, C	Carroll G.				
4	Date 02/18/2015	<ul> <li>Full name of contributor</li></ul>		<b>7</b> Amou	int of Contribution (\$)	\$100.00
		TX 77061				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amou	unt of Contribution (\$)	
	05/29/2015	Massey, W. Edward				\$100.00
		Contributor address; City; State; Zip Code				
		CT 5903				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)	Amou	unt of Contribution (\$)	
	02/16/2015	McBride, Vickie				\$200.00
		Contributor address; City; State; Zip Code				
		TX 77489				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amou	unt of Contribution (\$)	
	04/02/2015	McBride, Vickie				\$50.00
		Contributor address; City; State; Zip Code				
		TX 77489				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amou	unt of Contribution (\$)	
	04/21/2015	McElroy, Arthur				\$500.00
		Contributor address; City; State; Zip Code				
		TX 77578				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	form.	l	Total pages Schedule A1: Sch: 9/15 Rpt: 12/51	
2	FILER NAME			3 F	iler ID	
	Robinson, C	Carroll G.				
4	Date 06/25/2015	Full name of contributor		<b>7</b> A	Amount of Contribution (\$)	\$100.00
		TX 77681				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 02/05/2015	Full name of contributor out-of-state PAC (ID#:_ McGowan, Rose Contributor address; City; State; Zip Code		Δ	Amount of Contribution (\$)	\$100.00
	Dringing Loggy	TX 77029	Employer (See Instructions	.\		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	•)		
	Date 02/25/2015	Full name of contributor out-of-state PAC (ID#:_ McKelvey, Layle Contributor address; City; State; Zip Code	)	Α	amount of Contribution (\$)	\$100.00
		TX 77396				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/11/2015	Full name of contributor out-of-state PAC (ID#:_ Nathan, Rodney Contributor address; City; State; Zip Code		Α	amount of Contribution (\$)	\$50.00
	Deire die alle	TX 77096	T Fundament (One Instruction			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/18/2015	Full name of contributor out-of-state PAC (ID#:_ Nathan, Rodney  Contributor address; City; State; Zip Code  TX 77096		A	Amount of Contribution (\$)	\$100.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 10/15 Rpt: 13/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	arroll G.				
4	Date   5 Full name of contributor   out-of-state PAC (ID#:)   7		7	Amount of Contribution (\$)	\$25.00	
		TX 77083				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/18/2015 Nini, Mark Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00	
		TX 77055				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 04/14/2015	Full name of contributor out-of-state PAC (ID#:_ Prince, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	 npation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 04/21/2015	Full name of contributor out-of-state PAC (ID#:_ Randle, Jonathan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/51		
2	FILER NAME			3 Filer ID		
	Robinson, C	arroll G.				
4	Date 02/18/2015    Tell name of contributor		7 Amount of Contribution (\$)	\$70.00		
		TX 77047				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)		
	06/25/2015	Rice, James			\$500.00	
		Contributor address; City; State; Zip Code				
		TX 77479				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
	06/25/2015	Richards, Laverne		\$100.00		
		Contributor address; City; State; Zip Code				
		TX 77031				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
	04/04/2015	Robinson, Cora			\$200.00	
		Contributor address; City; State; Zip Code				
		TX 77584				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
	06/29/2015	Robinson, Marchris			\$1,000.00	
		Contributor address; City; State; Zip Code				
		TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 12/15 Rpt: 15/51	
2	FILER NAME Robinson, C	arroll G.		3	Filer ID	
4	Date 06/03/2015  5 Full name of contributor out-of-state PAC (ID#:)  Sadeghpour, Alan  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
		TX 77024				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/20/2015 Simmons, Paul  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
	TX 77401  Principal occupation / Job title (See Instructions)  Employer (See Instructions)					
	T Tillopai ooda	pation / ood tale (ood motastions)	Employer (Gee medications	,		
Date 01/29/2015		Full name of contributor	)		Amount of Contribution (\$)	\$50.00
		TX 77028				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 02/25/2015	Full name of contributor out-of-state PAC (ID#:_ Sorto, Juan Contributor address; City; State; Zip Code  TX 77028	)		Amount of Contribution (\$)	\$150.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 03/10/2015	Full name of contributor out-of-state PAC (ID#:_ Stephens, Joseph Contributor address; City; State; Zip Code  TX 77015	)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 13/15 Rpt: 16/51		
2	FILER NAME			3 Filer ID		
	Robinson, C	arroll G.				
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  Sterling, Cheryl  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$)	\$200.00		
		TX 77489				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
	03/03/2015	Stewart, Jarvis			\$500.00	
		Contributor address; City; State; Zip Code				
		20005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor	)	Amount of Contribution (\$)		
	02/23/2015	The Briscoe Group			\$1,000.00	
		Contributor address; City; State; Zip Code				
		TX 77056				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)		
	02/17/2015	The Hughes Law Firm			\$250.00	
		Contributor address; City; State; Zip Code				
		TX 77017				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	; ;)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
	01/15/2015	Unntermeyer, Charles			\$500.00	
		Contributor address; City; State; Zip Code				
		TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 14/15 Rpt: 17/51	
2	FILER NAME			3	Filer ID	
	Robinson, C	nson, Carroll G.				
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  Villarreal, Anthony  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00	
		TX 78269				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor  ut-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/06/2015	Wild, Robert				\$250.00
		Contributor address; City; State; Zip Code				
		TX 77030				
	Principal occupation / Job title (See Instructions)  Employer (See Instruction			5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/25/2015	Wilson, Kirk  Contributor address; City; State; Zip Code		-		\$2,500.00
		TX 75220				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	03/18/2015	Wilson, Welcome				\$500.00
		Contributor address; City; State; Zip Code				
		TX 77057				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	04/02/2015	Zeidman, Fred				\$2,000.00
		Contributor address; City; State; Zip Code				
		TX 77019				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDU	LE <b>A1</b>	
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/51		
2	FILER NAME Robinson, C				3 Filer ID	
4			7 Amount of Contribution (\$)	\$2,500.00		
		TX 77019				
8	Principal occu	pation / Job title (See Instructions)	)	<b>9</b> Employer (See Instructions	s)	
	Date Full name of contributor out-of-state PAC (ID#:)  03/02/2015 mack, jalene  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
	TX 77479  Principal occupation / Job title (See Instructions)  Employer (See Instruction			<u> </u> 		

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/3 Rpt: 19/51 3 Filer ID FILER NAME Robinson, Carroll G. \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 04/17/2015 Cardenas, Jr., Victor L. \$148.84 | Breakfast for Meet and 7 Contributor address; City; State; Zip Code Greet Houston, TX 77027 Check if travel outside of Texas. Complete Schedule T. **10** Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 06/04/2015 Cardenas, Jr., Victor L. \$110.10 | Breakfast for Volunteers Contributor address; City; State; Zip Code Houston, TX 77027 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID# contribution (\$) description 06/26/2015 Denby, Gregory \$500.00 Food & Beverage Contributor address; City; State; Zip Code The Woodlands, TX 77380 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/3 Rpt: 20/51 3 Filer ID FILER NAME Robinson, Carroll G. \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 04/02/2015 Johnson, Courtney \$500.00 i Food 7 Contributor address; City; State; Zip Code Houston, TX 77549 Check if travel outside of Texas. Complete Schedule T. **10** Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Realtor 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor Amount of out-of-state PAC (ID#: contribution (\$) description 02/20/2015 Johnson, Patrick C. \$1,150.00 I Signs Contributor address; City; State; Zip Code Rosharon, TX 77583 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Consultant Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Full name of contributor In-kind contribution Date Amount of out-of-state PAC (ID#: contribution (\$) description 05/25/2015 Keller, Bert (The Honorable) \$500.00 T-Shirts Memorial Forest Contributor address; City; State; Zip Code Houston, TX 77036 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 21/51 2 FILER NAME 3 Filer ID Robinson, Carroll G. \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 8 Amount of 9 In-kind contribution out-of-state PAC (ID#: contribution (\$) description 06/26/2015 Sabouni, Lina \$1,000.00 Food & Beverage 7 Contributor address; City; State; Zip Code Houston, TX 77036 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Architect Self Employed 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 1/28 Rpt: 22/51	Robinson, Carroll G.
4	Date	5 Payee name
	03/23/2015	A.Philip Randolph Institute
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$130.00	4414 Akard St.
		Houston, TX 77047
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Program Ad
		. reg.a
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
Г	Date	Payee name
	06/20/2015	Cooper, Florida
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 88346
		Houston, TX 77288
	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 Professional FEES
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/22/2015	Crisp Wine-Beer Eatery
	Amount (\$)	Payee address; City; State; Zip Code
	\$41.00	2220 Bevis St.
		Houston, TX 77087
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Volunteers Meeting
		Volumes is mostling
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/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 complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID		
l	Sch: 2/28 Rpt: 23/51	Robinson, Carroll G.		
4	Date	5 Payee name		
	02/02/2015	Don Jose Mexican Restaurant		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
l	\$10.00	5305 Antoine Dr.		
l		Houston, TX 77091		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense  Meal at Civic Club Meeting		
		Weal at Civic Club Weeting		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
ľ	expenditure to benefit C/O			
⊨	Date	Dayso nama		
	02/25/2015	Payee name Fedex Office		
⊢	Amount (\$)	Payee address; City; State; Zip Code		
	\$159.13	2455 Rice Blvd.		
	Ψ139.13	2433 Nice Blvd.		
l		Houston TV 77005		
L	DUDD005	Houston, TX 77005		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Printing Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Advertising		
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		
	Date	Payee name		
	03/12/2015	Fedex Office		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$31.83	2200 Southwest Freeway		
l				
		Houston, TX 77098		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		Photocopies		
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/O			
$\vdash$				
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

l	The Instruction Guide explains how to complete this form.			
1	. •	2 FILER NAME 3 Filer ID		
	Sch: 3/28 Rpt: 24/51	Robinson, Carroll G.		
4	Date	5 Payee name		
L	04/15/2015	Fedex Office		
6	Amount (\$) \$38.42	7 Payee address; City; State; Zip Code 2200 Southwest Freeway		
		Houston, TX 77098		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Photocopies of Quiestionaire(AFLCIO)		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		
F	Date	Payee name		
	05/06/2015	Harris County Democratic Party		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$250.00	1445 North Loop West		
		Houston, TX 77008		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Candidate/Officeholder/Political Committee		
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	1		
	Date	Payee name		
	05/29/2015	Herman Park Golf Course		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$37.89	2155 N. Macgregor Way		
		Houston, TX 77030		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Green FEES for Golf w/Donor		
		3.55 225 .5. 55 255.		
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
Г				

### 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 T	otal pages Schedule F1:	2 FILER NAME		3 Filer ID
5	Sch: 4/28 Rpt: 25/51	Robinson, Carroll G.		
<b>4</b> D	ate	5 Payee name		·
0	2/19/2015	Hilton Americas Caf		
<b>6</b> A	mount (\$)	7 Payee address; City; State; Zip Co	de	
	\$98.00	1600 Lamar St.		
		Houston, TX 77010		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
Ι.	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE			Check if Austin, TX, officeholder living expense
				Volunteer & Community Leaders Lunch
9 C	complete ONLV if direct	Condidate/Officeholder name Office sou	aht	Office hold
	complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gni	Office held
_				
	ate	Payee name		
	6/26/2015	Hilton Americas Caf		
A	mount (\$)	Payee address; City; State; Zip Co	de	
	\$29.00	600 Lamar		
		Houston, TX 77010		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
1	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l				Lunch w/Community Leaders
				•
С	complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
e	xpenditure to benefit C/O	<del>1</del>		
D	ate	Payee name		
0	2/20/2015	Holiday Inn South Loop		
A	mount (\$)	Payee address; City; State; Zip Co	de	
	\$200.00	8111 Kirby Dr		
		,		
		Houston, TX 77054		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(h)	Description
	OF	Food/Beverage Expense	(2)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Toda/Bovorage Expense		Check if Austin, TX, officeholder living expense
				Community Meeting
	complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
e:	Apenditure 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 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: 5/28 Rpt: 26/51	Robinson, Carroll G.		
4	Date	5 Payee name		
	01/23/2015	Hotel Zaza		
6	Amount (\$) \$52.00	7 Payee address; City; State; Zip Code 5701 Main St.		
		Houston, TX 77005		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donor Development Meeting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	01/30/2015	Hotel Zaza		
	Amount (\$) \$37.00	Payee address; City; State; Zip Code 5701 Main St.		
		Houston, TX 77005		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donor Development Meeting		
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held		
F	Date	Payee name		
	01/31/2015	Hotel Zaza		
	Amount (\$) \$97.00	Payee address; City; State; Zip Code 5701 Main St.		
		Houston, TX 77005		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Volunteers Meeting		
	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: 6/28 Rpt: 27/51	Robinson, Carroll G.		
4	Date	5 Payee name		
	02/20/2015	Hotel Zaza		
6	Amount (\$) \$112.00	7 Payee address; City; State; Zip Code 5701 Main St.		
L		Houston, TX 77005		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donor Development Meeting		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	02/22/2015	Hotel Zaza		
	Amount (\$) \$98.00	Payee address; City; State; Zip Code 5701 Main St.		
		Houston, TX 77005		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Volunteers Meeting		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
L	03/16/2015	Hotel Zaza		
	Amount (\$) \$38.00	Payee address; City; State; Zip Code 5701 Main St.		
		Houston, TX 77005		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donor Development Meeting		
	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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·				
-	Sch: 7/28 Rpt: 28/51	Robinson, Carroll G.				
4	Date	5 Payee name				
	04/15/2015	Hotel Zaza				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
_	\$45.00	5701 Main St.				
	¥ 10.00					
		Houston TV 77005				
_		Houston, TX 77005				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taylor Complete Schedule T				
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Breakfast w/ Church Liason				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
,	expenditure to benefit C/OI					
	Data					
	Date	Payee name				
	02/17/2015	Houston Black American Democrats				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00	P.O. Box 2893				
		Houston, TX 77252				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Fees Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Membership Dues				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1				
	Date	Payee name				
	02/27/2015	Jordan, Justin				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	11115 Sagevalley Dr.				
		<b>,</b>				
		Houston, TX 77089				
	DUDD005	To a				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Campaign Material Distrsibution				
		Sampaig				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	<b>y</b>				

### 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			
l	Sch: 8/28 Rpt: 29/51	Robinson, Carroll G.			
4	Date	5 Payee name			
	01/16/2015	LaGriglia			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
l	\$98.00	2002 West Gray St.			
l					
		Houston, TX 77019			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
l	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
l		Check if Austin, TX, officeholder living expense  Meeting w//donors			
		Weeting w//donors			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
ľ	expenditure to benefit C/O				
⊨	Date	Dove name			
l	02/22/2015	Payee name  Lone Star Golf			
⊢	Amount (\$)	Payee address; City; State; Zip Code			
	\$100.00	P.O. Box 8351			
	Ψ100.00	1.0. 50% 0001			
		Houston TX 77288			
L	Houston, TX 77288				
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.			
l	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense			
l	Scholarship Donation				
L					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
L	experientare to benefit 6/61	<u></u>			
l	Date	Payee name			
L	02/21/2015	Memorial Herman Heart & Vascular			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$15.00	6411 Fannin			
l					
		Houston, TX 77030			
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
l	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
l		Parking for Visiting Injured Firefighter			
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O	<b>y</b>			

### 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: 9/28 Rpt: 30/51	Robinson, Carroll G.				
4	Date	5 Payee name	•			
	02/25/2015	Micheals				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$26.36	3904 Bissonnet St.				
		Houston, TX 77005				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	· · · · · · · · · · · · · · · · · · ·	outside of Texas. Complete Schedule T.			
	EXPENDITURE		n, TX, officeholder living expense			
		Display Stan	d & Pens			
_	0 1 0 0 1 1 1 1		000			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held			
	Date	Payee name				
	05/06/2015	New Leaders Council				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$175.00	1200 New Hampshire Ave				
		Washington DC, TX 20036				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Contributions/Donations Made by	outside of Texas. Complete Schedule T. n, TX, officeholder living expense			
		DONATIONS DONATIONS				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	ОН				
	Date	Payee name				
	06/05/2015	Pappadeaux				
	Amount (\$) Payee address; City; State; Zip Code					
\$66.00		2410 Richmond				
		Houston, TX 77098				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF		outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense			
		Lunch w/Dor	nors			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held			
	pondition to benefit 0/01	<del>- · ·</del>				

### 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: 10/28 Rpt: 31/51	Robinson, Carroll G.				
4	Date	5 Payee name		•		
l	01/17/2015	Patriot Strategies Group				
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode			
	\$1,000.00	11115 Sagevalley Dr.				
		Houston, TX 77089				
8	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 Professional FEES		
				FIGESSIONAL FLES		
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office held		
ľ	expenditure to benefit C/OI		igiit	Office field		
-	Date	Payee name				
	01/28/2015	Patriot Strategies Group				
_	Amount (\$)	Payee address; City; State; Zip Co	nde			
	\$1,000.00	11115 Sagevalley Dr.	Jue			
	Ψ1,000.00	TITIO Sugevancy Dr.				
		Houston, TX 77089				
	PURPOSE		(b)	Providetion		
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	(1)	Description  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Advertising Expense		Check if Austin, TX, officeholder living expense		
				Internet Ads		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	experience to benefit Gree					
	Date	Payee name				
	02/03/2015	Patriot Strategies Group				
	Amount (\$)	Payee address; City; State; Zip Co	ode			
	\$1,000.00	11115 Sagevalley Dr.				
		Houston, TX 77089				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.		
				Check if Austin, TX, officeholder living expense Auto Calls		
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>L</u> ıght	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

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1: Sch: 11/28 Rpt: 32/51	2 FILER NAME Robinson, Carroll G.  3 Filer ID			
4	Date 02/18/2015	5 Payee name Patriot Strategies Group			
6	Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr.			
8	PURPOSE OF EXPENDITURE	Houston, TX 77089  (a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Video Production & E-Blast			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date 02/23/2015 Amount (\$)	Payee name Patriot Strategies Group  Payee address; City; State; Zip Code			
	\$1,000.00 11115 Sagevalley Dr.  Houston, TX 77089				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Social Media & Video Production			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
	Date 03/25/2015	Payee name Patriot Strategies Group			
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 11115 Sagevalley Dr.			
		Houston, TX 77089			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Social Media			
	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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	·				
Sch: 12/28 Rpt: 33/51					
4 Date	5 Payee name				
04/08/2015	Patriot Strategies Group				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$4,500.00					
Ψ 1,000.00	TITIO Gagovano, Di				
	Houston, TX 77089				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Check if Austin, TX, officeholder living expense				
	Auto Calls & Mail				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	DH .				
Date	Payee name				
04/21/2015	Patriot Strategies Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$5,000.00	11115 Sagevalley Dr.				
	Houston, TX 77089				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Check if Austin, TX, officeholder living expense				
	Auto Calls & Mail				
Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	ρn				
Date	Payee name				
05/09/2015	Patriot Strategies Group				
Amount (\$)	Payee address; City; State; Zip Code				
\$500.00					
φοσο.σσ	TITIO Gagovano, Di				
	H1 TV 77000				
	Houston, TX 77089				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense				
	Mailing				
Occupation Chillians	Our did to 10% or holder name				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held  OH				
	<del></del>				

### 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: 13/28 Rpt: 34/51	Robinson, Carroll G.				
4	Date	5 Payee name				
l	05/19/2015	Patriot Strategies Group				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$6,500.00	11115 Sagevalley Dr.				
		Houston, TX 77089				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense				
	EX. ENDITORE	Check if Austin, TX, officeholder living expense  Auto Calls				
		Auto Calls				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
9	expenditure to benefit C/OI					
-	Date	Davies same				
	06/23/2015	Payee name Patriot Strategies Group				
	Amount (\$)	Payee address; City; State; Zip Code 11115 Sagevalley Dr.				
	\$1,000.00	11115 Sagevalley Dr.				
		Houston, TX 77089				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taylor Complete Schedule T				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Auto Calls				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1				
	Date	Payee name				
	01/23/2015	Patriot Strategies Group				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$4,000.00	11115 Sagevalley Dr.				
		Houston, TX 77089				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
	LXI LINDITORE	Check if Austin, TX, officeholder living expense				
l		Mailer				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	Complete ONLY if direct expenditure to benefit C/OI					
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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:					
_	Sch: 14/28 Rpt: 35/51	Robinson, Carroll G.				
4	Date	5 Payee name				
	02/20/2015	Patriot Strategies Group				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,200.00	11115 Sagevalley Dr.				
		Houston, TX 77089				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Online Ads				
		Offilitie Ads				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
9	expenditure to benefit C/OI					
	Date	Payee name				
	01/16/2015	Piryx Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$2.25	401. N. 15th St.				
		Ste. 502				
	Austin, TX 78701					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
	LAI LINDITORE	Check if Austin, TX, officeholder living expense				
	Online Donor Processing Fee					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH					
	Date	Davisa nama				
	01/22/2015	Payee name Piryx Inc.				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1.13	401. N. 15th St.				
		Ste. 502				
		Austin, TX 78701				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Online Donor Processing Fee				
		Shino Bollot Floodsong Foo				
	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 complete this form.	
_	Total marca Cabadula F1.		_
1	Total pages Schedule F1:		
	Sch: 15/28 Rpt: 36/51	Robinson, Carroll G.	_
4	Date	5 Payee name	
	01/26/2015	Piryx Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1.13	401. N. 15th St.	
		Ste. 502	
		Austin, TX 78701	
8	PURPOSE	To a second seco	_
	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Online Donor Processing Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
_	Date	Payee name	=
	01/29/2015	Piryx Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2.25	401. N. 15th St.	
	ΨΕ.Ε.Ο	Ste. 502	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Online Donor Processing Fee	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
-	Date	Davisa nama	-
	02/02/2015	Payee name Piryx Inc.	
			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1.13	401. N. 15th St.	
		Ste. 502	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Online Donor Processing Fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/Of	•	

#### SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Gitt/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: 16/28 Rpt: 37/51	Robinson, Carroll G.
4	Date	5 Payee name
	02/11/2015	Piryx Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.25	401. N. 15th St.
		Ste. 502
		Austin, TX 78701
8	PURPOSE	<u> </u>
0	OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online Donor Processing Fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/25/2015	Piryx Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.50	401. N. 15th St.
		Ste. 502
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Online Donor Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/25/2015	Piryx Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.75	401. N. 15th St.
	Ψ0.1.0	Ste. 502
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Online Donor Processing Fee
		Offilite Dollor Frocessing Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	<b>y</b>

#### 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

mbursement Solicitation/Fundraising Expense
al Expense Transportation Equipment & Related Expense
Travel in District
ract Labor OTHER (enter a category not listed above)

		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	_
	Sch: 17/28 Rpt: 38/51	Robinson, Carroll G.	
4	Date	5 Payee name	_
	03/02/2015	Piryx Inc.	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$4.50	401. N. 15th St.	
		Ste. 502	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Online Donor Processing Fee	
		Offiline Bottor Processing Fee	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/OI		
-	Date	Para and a second secon	_
	03/03/2015	Payee name	
		Piryx Inc.	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.50	401. N. 15th St.	
		Ste. 502	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Online Donor Processing Fee	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	03/11/2015	Piryx Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$11.25	401. N. 15th St.	
		Ste. 502	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Online Donor Processing Fee	
	Operation Chilly 2.1	Openhaltets (Officer belief) and the contract of the contract	_
	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: 18/28 Rpt: 39/51	Robinson, Carroll G.
4	Date	5 Payee name
	03/17/2015	Piryx Inc.
	Amount (\$) \$4.50	7 Payee address; City; State; Zip Code 401. N. 15th St. Ste. 502 Austin, TX 78701
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/18/2015	Payee name Piryx Inc.
	Amount (\$) \$4.50	Payee address; City; State; Zip Code 401. N. 15th St. Ste. 502 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 03/20/2015	Payee name Piryx Inc.
	Amount (\$) \$11.25	Payee address; City; State; Zip Code 401. N. 15th St. Ste. 502 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
	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:			3 Filer ID
	Sch: 19/28 Rpt: 40/51	Robinson, Carroll G.		
4	Date 03/25/2015	5 Payee name Piryx Inc.		
6	Amount (\$) \$112.50	7 Payee address; City; State; Zip Cod 401. N. 15th St. Ste. 502 Austin, TX 78701	е	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt	Office held
	Date 04/02/2015	Payee name Piryx Inc.		
	Amount (\$) \$90.00	Payee address; City; State; Zip Cod 401. N. 15th St. Ste. 502 Austin, TX 78701	Э	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt	Office held
	Date 04/06/2015	Payee name Piryx Inc.		
	Amount (\$) \$11.25	Payee address; City; State; Zip Cod 401. N. 15th St. Ste. 502 Austin, TX 78701	Э	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt	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: 20/28 Rpt: 41/51	Robinson, Carroll G.		
4	Date	5 Payee name	_	
	04/21/2015	Piryx Inc.		
6	Amount (\$)	7 Payee address; City; State; Zip Code	_	
	\$1.13	401. N. 15th St.		
		Ste. 502		
		Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Online Donor Processing Fee		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_	
	expenditure to benefit C/OI			
	Date	Payee name	_	
	04/21/2015	Piryx Inc.		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$2.25	401. N. 15th St.		
		Ste. 502		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.		
	LAFLINDITORE	Check if Austin, TX, officeholder living expense		
		Online Donor Processing Fee		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_	
	expenditure to benefit C/OI			
-	Date	Payee name	_	
	04/21/2015	Piryx Inc.		
	Amount (\$)	Payee address; City; State; Zip Code	_	
	\$11.25	401. N. 15th St.		
		Ste. 502		
		Austin, TX 78701		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.		
	LAFLINDITORE	Check if Austin, TX, officeholder living expense		
		Online Donor Processing Fee		
_	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

		The Instruction Guide explains how to com	plet	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 21/28 Rpt: 42/51	Robinson, Carroll G.		
4	Date	5 Payee name		<u> </u>
	04/27/2015	Piryx Inc.		
6	Amount (\$) \$112.50	7 Payee address; City; State; Zip Code 401. N. 15th St. Ste. 502 Austin, TX 78701	•	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	ıt	Office held
	Date	Payee name		
	06/18/2015	Piryx Inc.		
	Amount (\$) \$11.25	Payee address; City; State; Zip Code 401. N. 15th St. Ste. 502 Austin, TX 78701	;	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	ıt	Office held
	Date 06/29/2015	Payee name Piryx Inc.		
	Amount (\$) \$112.50	Payee address; City; State; Zip Code 401. N. 15th St. Ste. 502 Austin, TX 78701	<b>,</b>	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	it	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

l		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 22/28 Rpt: 43/51	Robinson, Carroll G.	
4	Date	5 Payee name	
	06/29/2015	Piryx Inc.	
6	Amount (\$) \$2.25	7 Payee address; City; State; Zip Code 401 N. 15th St. Ste.502	
		Austin, TX 78701	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Г	Date	Payee name	
	05/06/2015	Roadwomen	
	Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 22678	
		Houston, TX 77277	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Ad and Tickets	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
F	Date	Payee name	
	03/26/2015	Rudy's Bar-B-Que	
	Amount (\$) \$37.42	Payee address; City; State; Zip Code 20806 IH-45 North	
		Spring, TX 77373	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Staff Lunch	
	Complete ONLY if direct expenditure to benefit C/O	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

l		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 23/28 Rpt: 44/51	Robinson, Carroll G.
4	Date	5 Payee name
	05/06/2015	SEHAH Youth & Fitness
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	5110 Martin Luther King Dr.
		Houston, TX 77021
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		DONATIONS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	David waren
	Date 06/19/2015	Payee name Scrbbes Accents
L		
	Amount (\$) \$30.00	Payee address; City; State; Zip Code
	\$30.00	
		He was TV
L		Houston, TX
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Cift/Awards/Memorials Expanse  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		GIFTS for Volunteers
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	02/14/2015	Star Stop 60
Г	Amount (\$)	Payee address; City; State; Zip Code
l	\$44.48	2111 Southmore
l		
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related
		Expense Check if Austin, TX, officeholder living expense  Gas for Volunteer Driver
		Gas for volunteer driver
$\vdash$	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: 24/28 Rpt: 45/51	Robinson, Carroll G.
4	Date	5 Payee name
	04/14/2015	Star Stop 60
6	Amount (\$) \$39.00	7 Payee address; City; State; Zip Code 2111 Southmore
		Houston, TX 77004
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/25/2015	Star Stop 60
	Amount (\$) \$30.00	Payee address; City; State; Zip Code 2111 Southmore
		Houston, TX 77004
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment & Related Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for Volunteer Driver
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	02/02/2015	Stop & Shop
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 5301 Antoine Dr.
		Houston, TX 77091
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment & Related Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas for Volunteer Driver
	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

l		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	
	Sch: 25/28 Rpt: 46/51	Robinson, Carroll G.	
4	Date	5 Payee name	
	06/28/2015	Stripes	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$32.50	2329 Southmore	
l			
		Houston, TX 77004	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment & Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense	
		Gas for Volunteer Driver	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiorare to benefit C/O	Jn	
	Date	Payee name	
l	02/22/2015	Target	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$41.12	8500 S. Main St.	
		Houston, TX 77025	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF	Advertising Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Printer Cartridge	
L			
l	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  OH	
┕	<u>'</u>		
l	Date	Payee name	
	04/22/2015	Target	
	Amount (\$)	Payee address; City; State; Zip Code	
l	\$91.55	300 Meyerland Plaza Mall	
		Houston, TX 77096	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
l		Check if Austin, TX, officeholder living expense	
		Printer Cartridge	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hald	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held  OH	
$\vdash$			
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

l		The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID		
	Sch: 26/28 Rpt: 47/51	Robinson, Carroll G.		
4	Date	5 Payee name		
	04/21/2015	Tejano Center		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
l	\$100.00	2950 Broadway St.		
		Houston, TX 77017		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Advertising Expense		
		Check if Austin, TX, officeholder living expense  Golf Tournament Ad		
		Goil Tournament Au		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
ľ	expenditure to benefit C/Ol			
⊨	Date	David waren		
	01/18/2015	Payee name Texas Democratic Women		
L				
l	Amount (\$) \$120.00	Payee address; City; State; Zip Code 766 Thornbranch Dr		
	\$120.00	700 Hombianch Di		
		Houston TV 77070		
L		Houston, TX 77079		
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Contributions/Donations Made Ry  Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
		Donation		
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/Ol	1		
Г	Date	Payee name		
	05/20/2015	Tideland APRI		
Г	Amount (\$)	Payee address; City; State; Zip Code		
l	\$50.00	4414 Akard St.		
l				
		Houston, TX 77047		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Contributions/Donations Made By		
l	LAFLINDITORL	Candidate/Officeholder/Political Committee		
		DONATIONS		
$\vdash$	Complete ONI V if direct	Candidate/Officeholder name Office sought Office held		
	Complete ONLY if direct expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·		
$\vdash$				

#### 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

**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.
_	Tatal manage Calculated 51	
1	Total pages Schedule F1:	
	Sch: 27/28 Rpt: 48/51	Robinson, Carroll G.
4	Date	5 Payee name
	02/18/2015	U.S. Postal Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$98.00	4110 Almeda Rd
		Houston, TX 77004
	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if Austin, TX, officeholder living expense
		Stamps for "Thank You"" Mailer"
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-</del>
_	Date	Payee name
	06/12/2015	U.S. Postal Service
	Amount (\$)	
	\$136.00	4110 Almeda Rd
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Postage
_	Operation ONLY if direct	On all data (Office helder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	02/20/2015	Walgreens
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.63	7929 Kirby Dr.
		Houston, TX 77054
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Birthday Cards for Community Leaders
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	4

#### 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:		
L	Sch: 28/28 Rpt: 49/51	Robinson, Carroll G.	
4	Date	5 Payee name	
L	03/23/2015	Worldpay US. Inc	
6	Amount (\$) \$27.52	7 Payee address; City; State; Zip Code 600 Morgan Falls Rd	
Ļ		Atlanta, TX 30350	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
Γ	Date	Payee name	
L	05/05/2015	Worldpay US. Inc	
	Amount (\$) \$34.89	Payee address; City; State; Zip Code 600 Morgan Falls Rd Atlanta, TX 30350	
┞	PURPOSE		
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Online Donor Processing Fee	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(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. Total pages Schedule G: FILER NAME Filer ID Sch: 1/1 Rpt: 50/51 Robinson, Carroll G. Date Payee name 01/24/2015 OFFICE DEPOT 6 Amount (\$) Payee address; City; State; Zip Code 3443 KIRBY DR. \$24.89 Reimbursement from political contributions intended HOUSTON, TX 77098 8 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense **SUPPLIES EXPENDITURE** COPY PAPER Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE I

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Robinson, Carroll G.	
4 Date 03/23/2015	5 Payee name Ark of Safety Ministries	
6 Amount (\$) 100.00	7 Payee Address; City; State; Zip P.O. Box 14193  Houston, TX 77221	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Donation	
Date 02/02/2015	Payee name  Jamaica Foundation of Houston	
Amount (\$) 50.00	Payee Address; City; State; Zip P.O. Box 710824  Houston, TX 77271	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description (See instructions regarding type of information required.)  Donation	
Date 04/21/2015	Payee name Northeast Houston YMCA	
Amount (\$) 50.00	Payee Address; City; State; Zip 9551 Wayside Dr.  Houston, TX 77028	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description Donation  (See instructions regarding type of information required.)	
Date 05/20/2015	Payee name Tideland APRI	
Amount (\$) 100.00	Payee Address; City; State; Zip P.O. Box 841366  Houston, TX 77584	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description (See instructions regarding type of information required.) Scholarship Donation	