CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

97 (1011 7 (1011 1 111)	THE THE THE					VEIX OHIEEH I OH
The C/OH Instruction	Guide explains how to com		1 Filer ID(Et	thics Comn	nission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFF	ICE USE ONLY
OFFICEHOLDER		David	W.		Date Received	t
NAME	NICKNAME	LAST	SUFFIX		10/5/2015	
		Robinson				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY	Y; STATE; ZIP C	CODE		
OFFICEHOLDER	P.O. Box 56386					
MAILING					Date Hand-delive	red or Date Postmarked
ADDRESS	Houston TX 77256					
Change of address			,			
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713) 942-5816					
PHONE						
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount
TREASURER		Jack	S.		Date Processe	∍d
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
		Blanton	Jr.			
7 CAMPAIGN	STREET ADDRESS (No PO Box Pleas	se);	APT/SUITE #;		CITY; STATE;	ZIP CODE
TREASURER	347 Chevy Chase Drive	;				
ADDRESS						
(Residence)	Houston TX 77019					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 224-5959					
	January 15 X 30th day bet	fore election Fin	al repport (Attach C/OF	H - FR)	Exceeded \$500 limit	
9 REPORT TYPE		_		_		
	July 15 8th day befo	ore election Rui	noff		15th day after campaigr	n treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month	Day Year
COVERED	7/1/2015		THROUGH		9/2	4/2015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE	•		
	Month Day Year			_	— .	П
	11/3/2015	Primary	Ru	unoff	χ General	Special
12 OFFICE	OFFICE HELD (if any)		13 °	FFICE SOUG	HT (if known)	
	City Council - At Large	Position 2	c	ity Coun	cil - At Large P	osition 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME David	W. Robinson		15 Filer ID (Ethics Con	nmission Filers)		
	expenditures may have	f political contributions accepted or political expenditures n been made without the candidate's or officeholder's know receive notice of such expenditures.	nade by political committees to support the vieldge or consent. Candidates and office	ne candidate / officeholder. These sholders are required to report this		
16 NOTICE FROM	COMMITTEE TYPE	COMMITTEE NAME				
POLITICAL	GENERAL	GENERAL COMMITTEE ADDRESS				
COMMITTEE(S)	🖰					
. ,	SPECIFIC					
	_					
		COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
17 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 OR LESS (C NS, OR GUARANTEES OF LOANS), UNLE		 \$		
TOTALS	. 222 323, 237	,,,	-00	T _Φ		
	2 TOTAL POLITIC	CAL CONTRIBUTIONS		\$27,596.00		
	(OTHER THAN I	PLEDGES, LOANS, OR GUARANTEES OF	LOANS)	421,000.00		
EXPENDITURE	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, U	JNLESS ITEMIZED			
TOTALS				\$315.32		
	4 TOTAL POLITICAL EXPENDITURES					
				\$40,188.07		
CONTRIBUTION	0	AL CONTRIBUTIONS MAINTAINED AS OF	F THE LAST DAY			
BALANCE	OF REPORTING	3 PERIOD	\$121,348.29			
OUTSTANDING LOAN	0	PAL AMOUNT OF ALL OUTSTANDING LOA	ANS AS OF THE			
TOTALS	LAST DAY OF T	HE REPORTING PERIOD		\$0.00		
18 AFFIDAVIT						
			rm, under penalty of perjury, thand correct and includes all info			
		reported by me	e under Title 15, Election Code	· •		
			David W. Robins	on		
			Signature of Candidate or	Officeholder		
AFFIX NOT STAMP / SE	EAL ABOVE		•			
Sworn to and subscribed	I before me, by the said	d	, this the	day		
		to certify which, witness my h		,		
	,,	, , , ,				
Signature of officer admir	nistering oath	Print name of officer administering o	eath Title of officer	administering oath		
	-			•		

SUBTOTALS - COH FORM C/OH **COVER SHEET PG 3** 19 FILER NAME David W. Robinson 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 26900 1 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2 \$696 SCHEDULE B: PLEDGED CONTRIBUTIONS \$0 3 SCHEDULE E: LOANS 4 \$0 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5 \$ 39873 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6 \$0 SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS \$0 8 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$0 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 9 \$0 SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 10 \$0 SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER \$ 0

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

FORM C/OH ADDENDUM

C/OH NAME David W. Robinson

ACCOUNT # (Ethics Commission filers)

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

The Instruction	n Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAM	E David W. Robinson			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Fabricio Esquivel	Ш		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
7/2/2015		Houston	TX 77018	1500
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Principal				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	James R. Jard			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Houston	TX 77043	1000
8 Principal of	occupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
Attorney				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Political Action Committee of Winstead PC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/6/2015		Dallas	TX 75201	1000
8 Principal c	Loccupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	John Chiang	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
8/13/2015		Houston	TX 77056	1000
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
Real Estat	te Developer			

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	8	SCHEDULE A1
The	Instruction (Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	David W. Robinson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Cigna PAC	X out of state F	PAC(ID#)	7 Amount of contributions (\$)
	8/20/2015	6 Contributor address;	City; Philadelphia	State; Zip Code PA 19192	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Sima of Houston	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	8/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77092	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Garnet Coleman	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77288	1000
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Minnette Boesel	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

M	ONETAR'	Y POLITICAL CONT	RIBUTIONS	5		SCHEDULE A	\1
The	e Instruction C	Guide explains how to complet	te this form.		1 Tota	l Pages Schedule A1:	
2 F	ILER NAME I	David W. Robinson		,	3 Filer ID (I	Ethics Commission filers)	
		Dianne P. Avlon			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/3/2015		Charleston	SC 29401		2000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	L tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			_
		John J. Avlon	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/3/2015		Charleston	SC 29401		3000	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor Waynette Chan	out of state	PAC(ID#)	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/4/2015		Houston	TX 77005		100	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Edwin Friedrichs			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
	9/11/2015		Bellaire	TX 77401		1000	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor Theldon Branch	out of state	PAC(ID#)	7	Amount of contributions (\$)	
		ordon Branon			ľ	, another of contributions (ψ)	

MC	ONETAR	RY POLITICAL CONTR	IBUTION	S	SCHEDULE A1
The	Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME David W. Robinson					3 Filer ID (Ethics Commission filers)
	9/14/2015	6 Contributor address;	City;	State; Zip Code	500
	9/14/2013		Houston	17 11023	300
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	President/F	inancial Analyst			
4	Date	5 Full name of contributor	out of state	PAC(ID#)	T
		Geoffrey Walker	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/15/2015		Houston	TX 77098	250
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Lawyer				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	T
		J. Kent Friedman			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/16/2015		Houston	TX 77010	500
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	Attorney				
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Demetrius Navarro			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/16/2015		Houston	TX 77024	500
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Insurance				

M	ONETARY	POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction G	Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	FILER NAME D	David W. Robinson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Ann Taylor	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/16/2015	6 Contributor address;	City;	State; Zip Code	500
	9/16/2015		Houston	TX 77098	500
8	Principal occu	upation / Job title (See Instructions) ector		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Lance Gilliam	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occu	upation / Job title (See Instructions) nvestments		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Jonathan Smulian	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/20/2015	6 Contributor address;	City; houston	State; Zip Code TX 77008	50
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Robert Schultz	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/21/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
Th	e Instruction	Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	David W. Robinson			3 Filer ID (Ethics Commission filers)
		Gail Adams			7 Amount of contributions (\$)
	9/22/2015	6 Contributor address;	City; HOUSTON	State; Zip Code	250
	3/22/2013		HOOSTON	17 11013	250
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		Daniel Baker	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/22/2015		Houston	TX 77019	250
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	<u>I</u> tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		James Nicklos	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/22/2015		HOUSTON	TX 77019	250
8	Principal oc	Lcupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
		1 "			<u> </u>
4	Date	5 Full name of contributor Barbara Aksamit	out of state I	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/23/2015		Houston	TX 77006	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	
		Ginger Blanton			7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME D	David W. Robinson	3 Filer ID (Ethics Commission filers)		
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	otions)
4	Date	5 Full name of contributor Darryl Carter	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor Tripp Carter	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	100
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruc	otions)
4	Date	5 Full name of contributor Francis Coleman	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	otions)

M	ONETAR	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (Guide explains how to complet	1 Total Pages Schedule A1:		
2 F	ILER NAME	David W. Robinson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Ali Davari	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77257	1000
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Steven Killworth	out of state F	I PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77030	500
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Evelyn Nolen	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	100
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Daniel Piette	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; HOUSTON	State; Zip Code TX 77006	200
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

M	ONETAR	Y POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	David W. Robinson	, ,		3 Filer ID (Ethics Commission filers)
		PPGC Action Fund, INC PAC Nor Federal	n		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/23/2015		Houston	TX 77023	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Jeanette Rash			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/23/2015		Houston	TX 77020	500
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Mark Ryan			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/23/2015		Houston	TX 77005	250
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		John K. Spear			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/23/2015		Houston	TX 77009	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
1	Date	5 Full name of contributor	out of state	PAC(ID# \	Γ
4	Date	o i dii name di continuatoi	Juli of State	· / ((ID#)	1

MONET	ARY POLITICAL CONTR	IBUTION	S	SCHEDULE A1
The Instruc	tion Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER N	AME David W. Robinson			3 Filer ID (Ethics Commission filers)
	Claude Wynn			7 Amount of contributions (\$)
9/23/20	6 Contributor address;	City; Houston	State; Zip Code TX 77265	1000
8 Princi Devel	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor James Blackburn	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/20	6 Contributor address;	City; Houston	State; Zip Code TX 77004	100
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor HAA Better Government Fund	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/20	6 Contributor address;	City; Houston	State; Zip Code TX 77041	500
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4 Date	5 Full name of contributor Houston Westside PAC	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/20	6 Contributor address;	City; Houston	State; Zip Code TX 77242	250
8 Princi	pal occupation / Job title (See Instructions)		9 Employer (See Instruc	L ptions)
4 Date	5 Full name of contributor Nathelyne Kennedy	out of state	PAC(ID#)	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The	e Instruction (Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	David W. Robinson			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	9/24/2015		Houston	TX 77036	100
8	Principal occ	eupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Mark Klein	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/24/2015		Houston	TX 77018	100
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		LAN-PAC	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/24/2015		Houston	TX 77042	500
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Linebarger, Goggan, Blair & Sampson LLP	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/24/2015		Austin	TX 78760	1000
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Michael McEnany			7 Amount of contributions (\$)

MC	ONETARY	POLITICAL CONTR	IBUTION	S	SCHEDULE A1
The	Instruction G	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 FI	LER NAME D	David W. Robinson			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	9/24/2015		Houston	TX 77005	100
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Litions)
4	Date	5 Full name of contributor Perry Seeberger	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77092	250
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Sheetmetal Workers LU #54 PAC Fund	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77018	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Bobby V. Singh	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77041	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Laura Spanjian	out of state	PAC(ID#)	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTI	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 F	FILER NAME	David W. Robinson			3 Filer ID (Ethics Commission filers)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code	100
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor Glenn Woo	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77098	500
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor Ed Wulfe	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	500
8	Principal oc Developer	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
		ATTACH ADDITIO	ONAL COPIES	OF THIS SCHEDU	LE AS NEEDED
		If contributor is out-of-state PA	C. please see ins	struction guide for addit	ional reporting requirements

NON-MONETARY (IN-KIND) POLITICAL						SCHEDULE A2		
CONTRIE	BUTIONS							
The Instruction	on Guide explains how to complete	e this form.			1 T	otal Pages Sch	edule A2:	
2 FILER NAM	ME David W. Robinson				3 Filer	ID (Ethics Commis	sion filers)	
4 TOTAL OF	UNITEMIZED IN-KIND POLITICA	L CONTRIBL	JTIONS		\$696.0	0		
5 Date	6 Full name of contributor Jack Blanton	out of state	e PAC(ID#)		8	Amount of	9 In-Kind contribution	
	Guok Blanton				-	contributions (\$)	description	
	7 Contributor address;	City;	State;	Zip Code		:		
9/22/2015		Houston	TX 77019)		696.00	Event venue and refreshments	
						heck if travel outsion chedule T	de of Texas, complete	
10 Principal	occupation / Job title (See Instructions)		11 Employ	yer (See Instru	ctions)			
Chairmar	n		Nicklos Dr	rilling Co.				
	ATTACH ADDITIO	NAL COPIES	S OF THIS	SCHEDUL	E AS N	IEEDED		
	If contributor is out-of-state PAG	C, please see in	struction gui	de for additio	nal repo	orting requiremen	ts	

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME David W. Robi	nson 3 Filer ID (Ethics Commission filers)					
4 Date	5 Payee name						
7/1/2015	The Black Sheep Agency						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
6,000.00	611 W. 22nd Street, Suite 20	01					
	Houston TX 77008						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Advertising Expense	Social Media					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
4 Date	5 Payee name						
7/2/2015	The Black Sheep Agency						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,500.00	611 W. 22nd Street, Suite 20	01					
	Houston TX 77008						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Advertising Expense	Social Media					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
4 Date	5 Payee name						
7/15/2015	Office Max	State: 7in Code					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
53.02	1576 West Gray Street						
8 PURPOSE OF EXPENDITURE	Houston TX 77019	(h) Description					
A PURPUSE OF EXPENDICIBLE	TIST CSTAGORY	TITLE LIBERTHOURD					

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Parade Supplies Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/15/2015 Party City 7 Payee address; 6 Amount (\$) City; Zip Code State; 516 Gulfgate Center 240.78 Houston TX 77087 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Parade Supplies Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

TROWT OLITICAL CONTRIBOTIONS							
The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME David W. Rob	oinson 3 Filer ID (Ethics Commission filers)					
4 Date	5 Payee name						
7/15/2015	Party City						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
285.39	516 Gulfgate Center						
	Houston TX 77087						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Office Overhead/Rental	Parade Supplies					
	Expense						
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
experience to perionic e, err							
4 Date	5 Payee name						
7/15/2015	Yvette Hernandez						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
2,500.00	407 Ahrens St.						
	Houston TX 77017						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Salaries/Wages/Contract	Campaign payroll					
	Labor						
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held					
experience to benefit 6/6/1							
4 Date	5 Payee name						
7/22/2015	Camp Allen						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
700.00	18800 FM 362						
	Navasota TX 77868						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Sponsorship for Kids4Peace luncheon Contributions/Donations Made By Candidate/Officeholder/Politi cal Committee 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/24/2015 The Black Sheep Agency 6 Amount (\$) 7 Payee address; City; Zip Code State; 1,500.00 611 W. 22nd Street, Suite 201 Houston TX 77008 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Social Media Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form	
1 Total pages Schedule F1:	² FILER NAME David W. Robin	son	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
8/10/2015	Yvette Hernandez		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,500.00	407 Ahrens St.		
	Houston TX 77017		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Salaries/Wages/Contract	Campaign payroll	
	Labor		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
experientales to belieff 6/011			
4 Date	5 Payee name		
8/11/2015	Strong Strategies LLC		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6,795.60	2032 Buffalo Terrace		
	Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te.	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Consulting Expense	Fundraising and co	mpliance services
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
4 Date	5 Payee name		
8/17/2015	City of Houston		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	901 Bagby St.		
	Houston TX 77002		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Filing fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 8/17/2015 The Black Sheep Agency 7 Payee address; 6 Amount (\$) City; State; Zip Code 1,500.00 611 W. 22nd Street, Suite 201 Houston TX 77008 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Social Media Advertising Expense Candidate / Officehoder name 9 Complete ONLY if direct office held office sought expendituree to benefit C/OH

I KOM I OLITICAL CONTRIBUTIONS							
The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME David W. Robin	nson	3 Filer ID (Ethics Commission filers)				
4 Date	5 Payee name						
8/17/2015	The Black Sheep Agency						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,500.00	611 W. 22nd Street, Suite 20	1					
	Houston TX 77008						
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense		e of Texas, complete Schedule T officeholder living expense				
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held				
4 Date	5 Payee name						
8/26/2015	Sprint 2 Print						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
5,941.84	8748 Clay Rd. Ste. 300						
	Houston TX 77080						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
	Printing Expense		e of Texas, complete Schedule T officeholder living expense igns				
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Loffice sought	office held				
4 Date	5 Payee name						
9/9/2015	Treebeards						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
50.55	315 Travis						
	Houston TX 77002	1					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff retirement luncheon Food/Beverage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/9/2015 Walmart **6** Amount (\$) 7 Payee address; Zip Code City; State; 5405 South Rice Ave. 92.75 Houston TX 77081 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Go Phone Office Overhead/Rental Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I Itolii i OLIIIOAL	001111111111111111111111111111111111111		
	The Instruction Guide exp	plains how to complete this form	•
1 Total pages Schedule F1:	² FILER NAME David W. Robins	son	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/9/2015	Verizon Wireless		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
162.36	1440 Gulfgate Center Mall		
	Houston TX 77087		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Office Overhead/Rental	Wifi Hotspot	
	Expense		
9 Complete ONLY if direct	Candidate / Officehoder name o	l ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
9/9/2015	Office Depot Store 482		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
232.12	6888 Gulf Freeway #300		
	acco cam record, were		
	Houston TX 77087		
8 PURPOSE OF EXPENDITURE		(b) Description	
o rom ode or excenditione	(a) oatogory	Check if travel outside of Te.	vas complete Schedule T
		Check if Austin, TX, officeho	
	Office O code to 1/D code		nuel livilig expense
	Office Overhead/Rental Expense	Office Supplies	
	'		
Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	ffice held
expendituree to benefit C/OH	oundate / Omocnoder name	moc sought of	nee note
4 Date	5 Payee name		
9/9/2015 6 Amount (\$)	IKEA 7 Payee address; City;	State; Zip Code	
		State, Zip Code	
10.81	7810 Katy Fwy		
	Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Photo frame for staff gift Gift/Awards/Memorials Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/9/2015 Yvette Hernandez 7 Payee address; 6 Amount (\$) City; Zip Code State; 424.70 407 Ahrens St. Houston TX 77017 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign mileage Travel in District 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

I KOM I OLITICAL CONTRIBOTIONS							
The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	² FILER NAME David W. Robin	son	3 Filer ID (Ethics Commission filers)				
4 Date	5 Payee name						
9/10/2015	Cresmont Park Civic Associa	ation					
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
250.00	P.O. Box 331742						
	Houston TX 77233						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outs	ide of Texas, complete Schedule T				
		Check if Austin, TX	, officeholder living expense				
	Contributions/Donations	Dinner bar	nquet ticket				
	Made By Candidate/Officeholder/Politi						
	cal Committee						
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held				
expendituree to benefit C/OH							
4 Date	5 Payee name						
9/10/2015	David Goldberg						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,654.51	3737 Seminary Rd.						
	Alexandria VA 22304						
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					
		Check if travel outs	ide of Texas, complete Schedule T				
		Check if Austin, TX	, officeholder living expense				
	Salaries/Wages/Contract	Campaign	payroll				
	Labor						
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held				
	I						
4 Date	5 Payee name						
9/16/2015	Verizon Wireless						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
147.54	1440 Gulfgate Center Mall						
	Houston TX 77087	T					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description					

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Overhead/Rental Campaign phone Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/16/2015 Julie Soefer Photography 7 Payee address; 6 Amount (\$) City; Zip Code State; 1717 W. Webster Unit A 920.13 Houston TX 77019 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign photography Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form	•
1 Total pages Schedule F1:	² FILER NAME David W. Robin	son	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/16/2015	The Black Sheep Agency		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,500.00	611 W. 22nd Street, Suite 201	1	
	Houston TX 77008		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	Social Media	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
9/16/2015	Yvette Hernandez		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,500.00	407 Ahrens St.		
	Houston TX 77017		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Salaries/Wages/Contract	Campaign payroll	
	Labor		
9 Complete ONLY if direct	Candidate / Officehoder name	I office sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
7/15/2015	Piryx, Inc.		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
64.50	649 Mission St.		
	#204		
	San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE		(b) Description	
	İ	į.	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online donation fees Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 8/15/2015 Piryx, Inc. 7 Payee address; 6 Amount (\$) City; State; Zip Code 649 Mission St. 43.00 #204 San Francisco CA 94105 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online donation fees Fees 9 Complete ONLY if direct Candidate / Officehoder name

office sought

expendituree to benefit C/OH

office held

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME David W. Robinson 4 Date 5 Payee name 9/15/2015 Piryx, Inc. **6** Amount (\$) 7 Payee address; City; State; Zip Code 649 Mission St. 303.15 #204 San Francisco CA 94105 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Online donation fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

E	EXPENDITURES MADE BY CREDIT CARD S					
			The Instruction Guide explains h	low '	to complete this form.	
1	Total pages Schedule F4:	2	FILER NAME David W. Robins	on	3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED EXPE	NDIT	URES CHARGED TO A CREDIT CARD		\$	
5	Date	6	Payee name			
	9/22/2015		Reef Restaurant			
7	Amount (\$)	8	Payee address; City;	Sta	te; Zip Code	
	104.00		2600 Travis St.			
			Houston TX 77006			
9	TYPE OF EXPENDITURE	X	Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) C sched		(b) D	escription Check if travel outside of Texas, complete Schedu Check if Austin, TX, officeholder living expense Lunch with Mayor and constituent	ule T
11	Complete ONLY if direct expendituree to benefit C/OH	Can	didate / Officehoder name		office sought office	e held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED