CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

CAMPAIGN FINA	ANCE REPORT				COVE	EK SHEET PG T
The C/OH Instruction	n Guide explains how to cor	mplete this form	1 Filer ID(Eth	nics Commission	າ filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFFICE	E USE ONLY
OFFICEHOLDER	Ms.	Laurie		Date	Received	
NAME	NICKNAME	LAST	SUFFIX		10/2/2015	
		Robinson				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CI	TY; STATE; ZIP C	ODE		
OFFICEHOLDER	P.O. Box 132072					
MAILING				Date	Hand-delivered	or Date Postmarked
ADDRESS	Houston TX 77219					
Change of address						
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(832) 439-2354					
PHONE						
6 CAMPAIGN	MS/MRS/MR	FIRST	MI	Rece	eipt #	Amount
TREASURER	Reverand	William	A.	Date	Processed	
NAME	NICKNAME	LAST	SUFFIX	Date	Imaged	
		Lawson				
7 CAMPAIGN	STREET ADDRESS (No PO Box Ple	ease);	APT/SUITE #;	CITY;	STATE;	ZIP CODE
TREASURER	2421 Calumet					
ADDRESS						
(Residence)	Houston TX 77004					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(832) 646-4308					
	January 15 X 30th day b	efore election F	inal repport (Attach C/OH	- FR) Exceed	led \$500 limit	
9 REPORT TYPE		Ш				
	July 15 8th day be	fore election	unoff	15th da	y after campaign trea	asurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month Day	/ Year
COVERED	7/1/2015	5	THROUGH		9/24/2	015
11 ELECTION	ELECTION DATE	ELECTION	ON TYPE			
	Month Day Year					
	11/3/2015	Primary	Ru	noff	X General	Special
12 OFFICE	OFFICE HELD (if any)		13 OF	FICE SOUGHT (if kn	nown)	
				ity Council - A	At Large Pos	ition 4

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Laurie	Robinson	15 Filer ID (Ethics Commission Filers			
	expenditures may have	political contributions accepted or political expend been made without the candidate's or officeholde receive notice of such expenditures.			
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME			
FROM POLITICAL COMMITTEE(S)	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
COMMITTEE CAMPAIGN TREASURER NAME					
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
17 CONTRIBUTION FOTALS		AL CONTRIBUTIONS OF \$50 OR LE NS, OR GUARANTEES OF LOANS),		\$	
	_	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEE	ES OF LOANS)	\$29,050.00	
EXPENDITURE FOTALS	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LE	SS, UNLESS ITEMIZED	\$	
	4 TOTAL POLITIC	AL EXPENDITURES		\$25,923.17	
CONTRIBUTION BALANCE	5 TOTAL POLITIC OF REPORTING	AL CONTRIBUTIONS MAINTAINED A GPERIOD	AS OF THE LAST DAY	\$35,886.42	
OUTSTANDING LOAN FOTALS		AL AMOUNT OF ALL OUTSTANDING HE REPORTING PERIOD	G LOANS AS OF THE	\$15,040.00	
18 AFFIDAVIT					
		report is		perjury, that the accompanying des all information required to be ction Code.	
			Lauri	ie Robinson	
			Signature of Ca	ndidate or Officeholder	
AFFIX NOT STAMP / SE		d	, this th	ne dav	
		, to certify which, witness			
Signature of officer admir	nistering oath	Print name of officer administe	ring oath Titl	e of officer administering oath	

SUBTOTALS - COH FORM C/OH **COVER SHEET PG 3** 19 FILER NAME Laurie Robinson 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 29050 1 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2 \$ 3925 SCHEDULE B: PLEDGED CONTRIBUTIONS \$0 3 SCHEDULE E: LOANS 4 \$ 6040 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5 \$ 25923 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6 \$0 SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS \$0 8 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 6370 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 Laurie 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.

M	ONETAR'	Y POLITICAL CONTI	RIBUTIONS	S	SCHEDULE A1
The	e Instruction C	Guide explains how to complet		1 Total Pages Schedule A1:	
2 F	ILER NAME I	Laurie Robinson	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Andrea Logans	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77006	\$2,500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Eddie Goodlow	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77084	\$100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor S. J. Gilbert	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77007	\$100.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor Jein Gadsen	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77088	\$25.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	l tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	

MON	IETAR'	Y POLITICAL CONT	RIBUTION	S		SCHEDULE A1	l
The Ins	struction (Guide explains how to comple	ete this form.		1 Tota	al Pages Schedule A1:	-
2 FILE	R NAME	Laurie Robinson			3 Filer ID	(Ethics Commission filers)	-
		Preston Middleton			7	Amount of contributions (\$)	-
9/2	24/2015	6 Contributor address;	City;	State; Zip Code		140.00	
8 F	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		-
4 C	Date	5 Full name of contributor Joshua Sanders	out of state	PAC(ID#)	7	Amount of contributions (\$)	-
9/2	24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77027		1,000.00	
	Principal occ	cupation / Job title (See Instructions) v Firm		9 Employer (See Instruc	tions)		_
4 C	Date	5 Full name of contributor Howard Jefferson	out of state	PAC(ID#)	7	Amount of contributions (\$)	-
7/4	4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77035		100.00	
	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4 C	Date	5 Full name of contributor Tangela Jefferson	out of state	PAC(ID#)	7	Amount of contributions (\$)	
7/4	4/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096		100.00	
	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)		-
4 C	Date	5 Full name of contributor Christus Powell	out of state	PAC(ID#)	7	Amount of contributions (\$)	

M	ONETAR	Y POLITICAL CONTR	IBUTION	S	SCHEDULE A1
Th	e Instruction (Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Laurie Robinson	3 Filer ID (Ethics Commission filers)		
		6 Contributor address;	City;	State; Zip Code	
	7/20/2015		Houston	TX 77245	500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
	Archi-Techni	ics			
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		TREPAC/Texas Association of Realtors Political Action Committee			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	8/21/2015		Austin	TX 78768-2246	7,500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Associated Builders & Contractors of Greater Houston PAC	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/11/2015		Houston	TX 77098	1,000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Noemi Margenau	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/13/2015		Houston	TX 77032	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instru	uctions)
4	Date	5 Full name of contributor	X out of state	PAC(ID#)	
		CWA-COPE			7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTR	SCHEDULE A1			
Th	e Instruction (Guide explains how to complete		1 Total Pages Schedule A1:		
2 F	FILER NAME	Laurie Robinson			3 Filer ID (Ethics Commission filers)	
	8/12/2015	6 Contributor address;	City; Washington	State; Zip Code DC 20001	1,000.00	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
4	Date	5 Full name of contributor Bob Jones	out of state	PAC(ID#)	7 Amount of contributions (\$)	
	8/31/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77079	2,500.00	
8		upation / Job title (See Instructions) eering Solutions		9 Employer (See Instruc	L tions)	
4	Date	5 Full name of contributor Nathelyne Kennedy	out of state	PAC(ID#)	7 Amount of contributions (\$)	
	8/18/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77479	250.00	
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	
4	Date	5 Full name of contributor Rodney Ragsdale	out of state	PAC(ID#)	7 Amount of contributions (\$)	
	9/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77091	100.00	
8	Principal occ			9 Employer (See Instruc	I tions)	

M	ONETAR'	Y POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (Guide explains how to complet	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Laurie Robinson	3 Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Andrea Thomas	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/16/2015	6 Contributor address;	City;	State; Zip Code	50.00
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Larry Stewart	out of state P	PAC(ID#)	7 Amount of contributions (\$)
	9/1/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77010	250.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Odysseus Lanier	out of state P	PAC(ID#)	7 Amount of contributions (\$)
	9/1/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77459	500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Linda Brown	out of state P	PAC(ID#)	7 Amount of contributions (\$)
	7/13/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77345	40.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor	out of state P	PAC(ID#)	

MON	NETARY	POLITICAL CONTR	RIBUTION	S		SCHEDULE A	۱1
The In	nstruction G	Guide explains how to complete	e this form.		1 Tota	l Pages Schedule A1:	
2 FILE	ER NAME L	aurie Robinson			3 Filer ID (Ethics Commission filers)	
		Carl Martin			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
7/	/19/2015		Houston	TX 77074		50.00	
8	Principal occu	Ipation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			_
		Edwin A. Davis			7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/	/24/2015		Houston	TX 77091		300.00	
		upation / Job title (See Instructions) onary Baptist Church		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor O'Neal Texada	out of state	PAC(ID#)	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/	/24/2015		Houston	TX 77050		200.00	
	Principal occu	upation / Job title (See Instructions) Realtors		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor C. F. Maxie	out of state	PAC(ID#)	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/	/24/2015		Houston	TX 77088		300.00	
	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4	Date	5 Full name of contributor Dannette McElroy-Davis	out of state	PAC(ID#)	7	Amount of contributions (\$)	

M	ONETAR	RY POLITICAL CONTR	RIBUTIONS	3	SCHEDULE A1
The	e Instruction	Guide explains how to complete		1 Total Pages Schedule A1:	
2 F	ILER NAME	Laurie Robinson			3 Filer ID (Ethics Commission filers)
	9/23/2015	6 Contributor address;	City; Pearland	State; Zip Code TX 77581	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Frederica Watson	out of state F	I PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77082	100.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor Cheryl Sterling	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Missouri City	State; Zip Code TX 77489	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	L tions)
4	Date	5 Full name of contributor Teana Watson	out of state F	I AC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Stafford	State; Zip Code TX 77477	100.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	tions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1
The	e Instruction (Guide explains how to complete		1 Total Pages Schedule A1:	
2 F	ILER NAME	Laurie Robinson			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Summer McElroy	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Chicago	State; Zip Code	50.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Deborah Tyler-Dillard	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77002	50.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor HOME-PAC	out of state I	I PAC(ID#)	7 Amount of contributions (\$)
	9/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77064	2,500.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor HAA Better Government Fund	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	8/26/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77041	2,500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state I	PAC(ID#)	

MONE	ETARY	POLITICAL CONTI	RIBUTIONS	3		SCHEDULE	A1
The Instr	ruction G	uide explains how to complet	e this form.		1 Total	Pages Schedule A1:	
2 FILER	NAME L	aurie Robinson			3 Filer ID (E	Ethics Commission filers)	
		Michelle Bonton	-		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/23/	/2015		Houston	TX 77044		1,000.00	
	ncipal occu e Rhodes S	pation / Job title (See Instructions) School		9 Employer (See Instruc	tions)		
4 Dat	te	5 Full name of contributor	out of state F	PAC(ID#)			
		Aundrea Young	_		7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/23/	/2015		Missouri City	TX 77459		500.00	
	ncipal occu	pation / Job title (See Instructions) Racepark		9 Employer (See Instruc	tions)		
4 Dat	te	5 Full name of contributor S. J. Gilbert	out of state F	PAC(ID#)	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/24/	/2015		Houston	TX 77007		500.00	
	•	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
IVIL.	. Sinai Bapt	ist Church			_		
4 Dat	te	5 Full name of contributor Carolyn Guess	out of state F	PAC(ID#)	7	Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code			
9/24/	/2015		Houston	TX 77096		500.00	
8 Prir Sel		pation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
4 Dat	te	5 Full name of contributor Michael Aldridge	out of state F	PAC(ID#)	7	Amount of contributions (\$)	

MONETAR	RY POLITICAL CONTR	SCHEDULE A1		
The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	E Laurie Robinson			3 Filer ID (Ethics Commission filers)
9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	250.00
8 Principal of Bennu Oil 6	ccupation / Job title (See Instructions) & Gas		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Mohammed Irfan	out of state F	I PAC(ID#)	7 Amount of contributions (\$)
9/18/2015	6 Contributor address;	City; Katy	State; Zip Code TX 77494	250.00
8 Principal of	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor T. Leon Preston	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Jersey Village	State; Zip Code TX 77040	250.00
	ccupation / Job title (See Instructions) aptist Church		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Carol Wright	out of state F	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Katy	State; Zip Code TX 77449	250.00
8 Principal of Self	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M	ONETAR	Y POLITICAL CONT	SCHEDULE A1		
The	e Instruction (Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Laurie Robinson			3 Filer ID (Ethics Commission filers)
4 Date		5 Full name of contributor Suzanne Page-Pryde			7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	250.00
8	Principal occ	upation / Job title (See Instructions) Realty		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Edward Ryland	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	250.00
8	Principal occ	upation / Job title (See Instructions) / Advisors		9 Employer (See Instruct	L tions)
4	Date	5 Full name of contributor JPS Staffing	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77057	200.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Anthony Shepherd	out of state	PAC(ID#)	7 Amount of contributions (\$)
	9/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77051	200.00
8	Principal occ	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	SCHEDULE A1				
Th	e Instruction	Guide explains how to comple	ete this form.		1 Total Pages Schedule A1:		
2 F	ILER NAME	Laurie Robinson			3 Filer ID (Ethics Commission filers)		
		S. J. Gilbert			7 Amount of contributions (\$)		
		6 Contributor address;	City;	State; Zip Code			
	9/24/2015		Houston	TX 77007	200.00		
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)		
	Mt. Sinai Ba	aptist Church					
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Kimberly Willis			7 Amount of contributions (\$)		
		6 Contributor address;	City;	State; Zip Code			
	9/24/2015		Houston	TX 77088	20.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	L tions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		Lynn Munford	_		7 Amount of contributions (\$)		
		6 Contributor address;	City;	State; Zip Code			
	9/24/2015		Houston	TX 77047	50.00		
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)		
					1		
4	Date	5 Full name of contributor Angelique Bartholomew	out of state	PAC(ID#)	7 Amount of contributions (\$)		
		r ingenique Danisemen			(4)		
		6 Contributor address;	City;	State; Zip Code			
	9/22/2015		Missouri City	TX 77459	50.00		
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)		
4	Date	5 Full name of contributor	out of state	PAC(ID#)			
		TaKasha Francis			7 Amount of contributions (\$)		

MONETAR	RY POLITICAL CON	SCHEDULE A		
The Instruction	Guide explains how to comp	1 Total Pages Schedule A1:		
2 FILER NAME	Laurie Robinson			3 Filer ID (Ethics Commission filers)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77054	100.00
8 Principal oc	ccupation / Job title (See Instructions)	9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor Laurette Trotty	out of state	PAC(ID#)	7 Amount of contributions (\$)
9/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77088	25.00
8 Principal oc	Coupation / Job title (See Instructions)	9 Employer (See Instruc	I tions)
	ATTACH ADDIT		S OF THIS SCHEDULI	

		TARY (IN-KIND) PO				SCHEDULE A2		
	ONTRIBU							
Th	e Instruction G	uide explains how to complet	te this form.		1	Total Pages Scl	hedule A2:	
2 F	TILER NAME L	aurie Robinson			3 F	iler ID (Ethics Commi	ssion filers)	
4 T	OTAL OF UNI	TEMIZED IN-KIND POLITICA	AL CONTRIBUT	ΓΙΟΝS	\$3,	925.00		
5	Date	6 Full name of contributor	out of state I	PAC(ID#)				
		Angelina Blalock	Ц		8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code				
	9/12/2015		Pearland	TX 77584		125.00	T-Shirts	
						Check if travel outsi Schedule T	ide of Texas, complete	
10 Principal occupation / Job title (See Instructions)			11 Employer (See Instructions)					
Pharmaceutical Sales			Walgreens					
5 Date 6 Full name of contributor out of state P.		PAC(ID#)						
		Inspire U Music & Records			8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code				
	9/24/2015		Houston	TX 77018		3000.00	Signs	
						Check if travel outsi Schedule T	ide of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)		
5	Date	6 Full name of contributor	out of state I	PAC(ID#)				
		James Dixon			8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Contributor address;	City;	State; Zip Code				
	9/23/2015		Houston	TX 77018		500.00	Food For Event	
						Check if travel outsi Schedule T	ide of Texas, complete	
10	Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	iction	s)		
	Bishop			The Community of Faith Church				

N	NON-MONETARY (IN-KIND) POLITICAL						SCHEDULE A2			
C	ONTRIB	UTIONS								
Th	The Instruction Guide explains how to complete this form.						Total Pages Sch	nedule A2:		
2 F	FILER NAME	Laurie Robinson				3 Fi	iler ID (Ethics Commis	ssion filers)		
4	TOTAL OF U	INITEMIZED IN-KIND POLITICA	L CONTRIBUT	TIONS		\$3,9	925.00			
5	Date	6 Full name of contributor	out of state I	PAC(ID#)						
		Courtney Johnson-Rose				8	Amount of contributions (\$)	9 In-Kind contribution description		
		7 Contributor address;	City;	State;	Zip Code		:			
	9/24/2015		Missouri City	TX 77459	9		300.00	Food For Event		
							Check if travel outside Schedule T	de of Texas, complete		
10	Principal o	ccupation / Job title (See Instructions)		11 Employ	yer (See Instru	ction	s)			
	Realtor			Self						
		ATTACH ADDITIO	NAL COPIES	OF THIS	SCHEDULI	E AS	S NEEDED			
		If contributor is out-of-state PAC	C, please see inst	ruction gui	de for additio	nal r	eporting requiremen	nts		

LC	DANS			SCHEDULE E				
	The	Instruction Guide explains ho	w to complete this	form.		1 To	otal Pages Schedule E:	
2 F	ILER NAME Lau	urie Robinson				3 File	er ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED LOANS: => => => => =>					6,0	040.00	
5	Date of loan	7 Name of lender	out of state PAC(I	D#)				
		Laurie Robinson				9	Loan Amount (\$)	
	7/17/2015						340.00	
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate	
	Financial		Houston	TX	77007			
	Institution?					11	Maturity date	
	No							
12	Principal occu	upation / Job title (See Instruc	ctions)	13 Empl	oyer (See Instr	uctions)		
	Consultant			Self				
14	Description o	f collateral		15	Check if perso (See instruction	ersonal funds were deposited into political account		
	None			X	(Occ mondon	5110)		
10		47 November		^_		Lio	Α	
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)	
	INFORMATION							
		18 Guarantor address;	City;	State;	Zip Code			
	not applicable							
20	Principal Occu	pation		21 Emp	loyer	•		

LO	ANS						SCHEDULE E
	The	Instruction Guide explains how	to complete this	form.		1 -	Total Pages Schedule E:
2 FIL	ER NAME Lau	rie Robinson				3 F	Filer ID (Ethics Commission filers)
4	TOTAL C	OF UNITEMIZED LOANS:	=> => => =	> => =;	>	(6,040.00
5	Date of loan	7 Name of lender	out of state PAC(IE	D#)			
		Laurie Robinson				9	Loan Amount (\$)
	8/1/2015						1,000.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77007		
	Institution?					11	Maturity date
	No						
12	Principal occu	ıpation / Job title (See Instruction	ons)	13 Empl	oyer (See Instr	uctions))
	Consultant			Self			
14	Description of	collateral		15	Check if perso	onal fun	nds were deposited into political account
_	٦				(See instruction	ons)	
10	None	47 November 1		Х		I ₄₀	A
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION	40.00	0'6			-	
_	1	18 Guarantor address;	City;	State;	Zip Code		
L	not applicable						
	D: : 10			lo.			
20	Principal Occup	pation		21 Emp	loyer		
	Date of loan	7 Name of landar	out of state PAC(ID)#\		_	
5	Date of loan	7 Name of lender	Out of State PAC(IL)#)			Lana Amazint (ft)
	0/0/0045	Laurie Robinson				9	Loan Amount (\$)
	8/9/2015						300.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77007		N %
	Institution?					11	Maturity date
	No			l.a = .	(2		
12	·	ipation / Job title (See Instruction	ons)		oyer (See Instr	uctions)
	Consultant			Self	1		
14	Description of	collateral		15	(See instruction		nds were deposited into political account
Г	None			X	1		
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code	1	
	not applicable						
	J						
20	Principal Occup	nation		21 Emp	loyer	1	

LC	DANS			SCHEDULE E				
	The	Instruction Guide explains h	now to complete this	form.	,	1	Total Pages Schedule E:	
2 F	ILER NAME Lau	ırie Robinson				3	Filer ID (Ethics Commission filers)	
4	TOTAL (OF UNITEMIZED LOANS:	=> => =>	> => =	>		6,040.00	
5	Date of loan	7 Name of lender	out of state PAC(IE	O#)				
		Laurie Robinson	_			9	Loan Amount (\$)	
	8/15/2015						3,500.00	
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate	
	Financial		Houston	TX	77007			
	Institution?					11	Maturity date	
	No							
12	Principal occu	upation / Job title (See Instr	ructions)	13 Empl	oyer (See Instr	uction	s)	
	Consultant			Self				
14	Description o	f collateral		15	15 Check if personal funds were deposited into political account (See instructions)			
	None			X	1			
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)	
	INFORMATION							
		18 Guarantor address;	City;	State;	Zip Code	1		
	not applicable							
20	Principal Occu	I pation		21 Emp	loyer			

LO	ANS						SCHEDULE E
	The	Instruction Guide explains how	to complete this	form.		1 7	Total Pages Schedule E:
2 FI	LER NAME Lau	rie Robinson				3 F	Filer ID (Ethics Commission filers)
4	TOTAL (OF UNITEMIZED LOANS:	=> => => =	:> => =;	>	6	5,040.00
5	Date of loan	7 Name of lender	out of state PAC(II	D#)			
		Laurie Robinson				9	Loan Amount (\$)
	9/3/2015						300.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77007		
	Institution?					11	Maturity date
	No						
12	Principal occu	ıpation / Job title (See Instruction	ons)	13 Empl	oyer (See Instr	uctions)	
	Consultant			Self			
14	Description of	f collateral		15	Check if perso	onal fun	ds were deposited into political account
,	¬				(See instruction	ons)	
	None	T		Х		1	
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						
١,	_	18 Guarantor address;	City;	State;	Zip Code		
[not applicable						
20	Principal Occup	oation		21 Emp	loyer		
		Γ	I I				
5	Date of loan	7 Name of lender	out of state PAC(II)#)			
		Laurie Robinson				9	Loan Amount (\$)
	9/4/2015						100.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77007		
	Institution?					11	Maturity date
	No						
12	Principal occu	upation / Job title (See Instruction	ons)	13 Empl	oyer (See Instr	uctions)	
	Consultant			Self			
14	Description of	f collateral		15	Check if perso (See instruction		ds were deposited into political account
ſ	None			X	1`	,	
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						、
		18 Guarantor address;	City;	State;	Zip Code	-	
[not applicable		,,	_ :=:;	, 5555		
L							
20	Principal Occup	l pation		21 Emp	lover	1	
	oipai Coou			Ib	,		

LC	DANS			SCHEDULE E			
	The	Instruction Guide explains	how to complete this	form.		1	Total Pages Schedule E:
2 F	ILER NAME Lau	urie Robinson	3	Filer ID (Ethics Commission filers)			
4	TOTAL (OF UNITEMIZED LOANS:	=> => => =	> => =	>		6,040.00
5	Date of loan	7 Name of lender	out of state PAC(II	D#)			
		Laurie Robinson	_			9	Loan Amount (\$)
	9/15/2015						500.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77007		
	Institution?					11	Maturity date
	No						
12	Principal occi	upation / Job title (See Ins	tructions)	13 Empl	loyer (See Instr	uctions	5)
	Consultant			Self			
14	Description o	f collateral		15 Check if personal funds were deposited into political account (See instructions)			
	None			Х			
16	GUARANTOR	17 Name of guarantor		!		19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code		
	not applicable						
20	Principal Occu	<u> </u>		21 Emp	loyer		
		ATTACH ADDITI	ONAL COPIES OF 7				

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinso						
4 Date	5 Payee name	<u> </u>					
9/7/2015	Office Depot						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
50.31		olate, Zip oode					
50.31	1576 West Gray St.						
a DUDDOGE OF EVERYDITUDE	Houston TX 77019	Taxa					
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 Expense	Office Supplies					
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held					
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	Video By Robot						
6 Amount (\$) 7 Payee address; City; State; Zip Code							
300.00	5200 Mitchelldale						
000.00	#F26						
	Houston TX 77092						
8 PURPOSE OF EXPENDITURE		(b) Description					
	(a) satisfies	Check if travel outside of Texas, complete Schedule T					
		Check if Austin, TX, officeholder living expense					
	Advertising Expense	Video Production					
	Advertising Expense	VIGGO I TOGGORON					
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought office held					
expendituree to benefit C/OH							
4 Date	5 Payee name						
8/25/2015	Amber Burton						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,250.00	19422 Rosebud Ridge						
	Spring TX 77379						
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fundraising Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/11/2015 Kathleen Lykes 7 Payee address; City; 6 Amount (\$) Zip Code State; 2,000.00 3807 Sweetgum Hill Ln. Kingwood TX 77345 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Compliance Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinso		3 Filer ID (Ethics Commission filers)				
4 Date	5 Payee name						
8/16/2015	Kathleen Lykes						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,000.00	3807 Sweetgum Hill Ln.						
,							
	Kingwood TX 77345						
8 PURPOSE OF EXPENDITURE	_	(b) Description					
		Check if travel outside of Tex	as, complete Schedule T				
		Check if Austin, TX, officehold	der living expense				
	Consulting Expense	Compliance					
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought offi	ce held				
onponantion to point circum.							
4 Date	5 Payee name						
9/1/2015	Kathleen Lykes						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
1,000.00	3807 Sweetgum Hill Ln.						
	Kingwood TX 77345	[a.s					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	an annual sta Cabantula T				
		Check if travel outside of Text	•				
	0 111	Check if Austin, TX, officehold	der living expense				
	Consulting Expense	Compliance					
9 Complete ONLY if direct	Candidate / Officehoder name	 office sought offi	ce held				
expendituree to benefit C/OH		-					
4 Date	5 Payee name						
7/3/2015	AB Communications						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
250.00	9600 Glenfield Court						
	Suite 148						
	Houston TX 77096						
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Consulting 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 **AB Communications** 7 Payee address; 6 Amount (\$) Zip Code City; State; 9600 Glenfield Court 250.00 Suite 148 Houston TX 77096 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Consulting Expense Candidate / Officehoder name 9 Complete ONLY if direct office held office sought expendituree to benefit C/OH

I KOWI I OLITICAL	CONTRIBUTIONS			
	The Instruction Guide e	xplains how to complete	this form.	
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinson 3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name			
7/31/2015	AB Communications			
6 Amount (\$)	7 Payee address; City;	State; Zip Code)	
500.00	9600 Glenfield Court			
	Suite 148			
	Houston TX 77096			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel out	side of Texas, complete Schedule T	
		Check if Austin, T	X, officeholder living expense	
	Consulting Expense	Field Wo	k	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held	
onponantinos to zonom e/on				
4 Date	5 Payee name			
8/15/2015	AB Communications			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	9600 Glenfield Court			
	Suite 148			
	Houston TX 77096			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel out	side of Texas, complete Schedule T	
		Check if Austin, T.	X, officeholder living expense	
	Consulting Expense	Field Wo	k	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held	
4 Date	5 Payee name			
8/31/2015 6 Amount (\$)	AB Communications 7 Payee address; City;	State; Zip Code		
		State, Zip Code	•	
500.00	9600 Glenfield Court			
	Suite 148			
8 PURPOSE OF EXPENDITURE	Houston TX 77096	(b) Description		
S . SIN SOL OF ENTERDITORE	I (a) Jaiogory	(1) 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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/3/2015 Richard Johnson 7 Payee address; 6 Amount (\$) City; Zip Code State; 8738 Fannette St. 1,000.00 Houston TX 77029 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinson 3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name			
7/11/2015	Richard Johnson			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	8738 Fannette St.			
	Houston TX 77029			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	xas, complete Schedule T	
		Check if Austin, TX, officeho	lder living expense	
	Salaries/Wages/Contract	Field Work		
	Labor			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	
experioraree to benefit 6/011				
4 Date	5 Payee name			
7/17/2015	Richard Johnson			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
500.00	8738 Fannette St.			
	Houston TX 77029			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	xas, complete Schedule T	
		Check if Austin, TX, officeho	lder living expense	
	Salaries/Wages/Contract	Field Work		
	Labor			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	
experientative to belieff 0/011				
4 Date	5 Payee name			
8/1/2015	Richard Johnson			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
1,500.00	8738 Fannette St.			
	Houston TX 77029			
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 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 Richard Johnson **6** Amount (\$) 7 Payee address; City; Zip Code State; 8738 Fannette St. 800.00 Houston TX 77029 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.		
1 Total pages Schedule F1:	² FILER NAME Laurie Robinso	'n	3 Filer ID (Ethics Commission filers)	
4 Date	5 Payee name			
7/3/2015	Janaeya Carmouche			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
2,500.00	3437 Milbank			
	Houston TX 77026			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	xas, complete Schedule T	
		Check if Austin, TX, officeho	lder living expense	
	Salaries/Wages/Contract	Campaign Manager	ment	
	Labor			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held	
'				
4 Date	5 Payee name			
7/3/2015	Voter History			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
1,750.00	15915 Oak Mountain			
	Houston TX 77095			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if travel outside of Tex	xas, complete Schedule T	
		Check if Austin, TX, officeho	lder living expense	
	OTHER (enter a category not	Database		
	listed above)			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought of	fice held	
A Data	F. D			
4 Date	5 Payee name			
7/3/2015	Sprint 2 Print			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
800.00	8748 Clay Rd.			
	#300			
	Houston TX 77080	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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 4 x 4's Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/29/2015 Sprint 2 Print 7 Payee address; 6 Amount (\$) City; Zip Code State; 491.54 8748 Clay Rd. #300 Houston TX 77080 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Yardsigns Advertising Expense Candidate / Officehoder name 9 Complete ONLY if direct office held office sought expendituree to benefit C/OH

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Laurie Robinso	on	3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name				
7/27/2015	Sprint 2 Print				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
451.95	8748 Clay Rd.				
	#300				
	Houston TX 77080				
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Letterhead/Envelop	older living expense		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	 office sought o	ffice held		
4 Date	5 Payee name				
7/3/2015	Advantage Communications				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
1,200.00	8011 Ashley Cr. Dr. N				
	Houston TX 77071				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Consulting Expense	Check if travel outside of Te Check if Austin, TX, officeho Communications			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
7/30/2015	Advantage Communications				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
1,008.00	8011 Ashley Cr. Dr. N				
	Houston TX 77071	I			
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Expense Communications 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/9/2015 Gloria's Midtown Restaurant **6** Amount (\$) 7 Payee address; City; State; Zip Code 66.25 2616 Louisiana St. Suite 100 Houston TX 77006 (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 Meeting Food/Beverage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinso		Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
7/24/2015	Gloria's Midtown Restaurant		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
80.49	2616 Louisiana St.		
00.43	Suite 100		
	Houston TX 77006		
8 PURPOSE OF EXPENDITURE		(b) Description	
O TONI OSE OF EXPENDITORE	Food/Beverage Expense	Check if travel outside of Texas Check if Austin, TX, officeholder Campaign Meeting	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought office	held
4 Date	5 Payee name		
7/31/2015	Gloria's Midtown Restaurant		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
35.75	2616 Louisiana St.		
	Suite 100		
	Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Food/Beverage Expense	Check if travel outside of Texas Check if Austin, TX, officeholder Campaign Meeting	•
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought office	held
4 Date	5 Payee name		
7/25/2015	Luby's		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
24.91	1414 Waugh Dr.		
	Houston TX 77019		
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Meeting 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 7/1/2015 Facebook **6** Amount (\$) 7 Payee address; Zip Code City; State; 21.83 1 Hacker Way Menlo Park CA 94205 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Ad Placement Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

I KOM I OLIHOAL	CONTINIDONIONO	
	The Instruction Guide 6	explains how to complete this form.
1 Total pages Schedule F1:	² FILER NAME Laurie Robins	SON 3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
7/2/2015	NGP Van	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
250.00	1101 15th St., NW	
	Suite 500	
	Washington DC 20005	
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	Database Software
9 Complete ONLY if direct	Candidate / Officehoder name	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
7/2/2015	Amegy Bank	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
106.19	P.O. Box 27459	
	Houston TX 77227	
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	Service Fee
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
experidituree to benefit 6/011		
4 Date	5 Payee name	
7/3/2015	Amegy Bank	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
19.95	P.O. Box 27459	
	Houston TX 77227	
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Service Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/31/2015 Amegy Bank **6** Amount (\$) 7 Payee address; Zip Code City; State; P.O. Box 27459 25.00 Houston TX 77227 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Service Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

expendituree to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

TROM TOLITIOAL	CONTINIBOTIONS		
	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinson 3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name		
7/7/2015	Carroll Printing & Promotions	\$	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
156.96	2907 Canal St.		
	Houston TX 77003		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Advertising Expense	Pushcards	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
oxportations to borionic 6/ 611			
4 Date	5 Payee name		
7/9/2015	Harris County Democratic Pa	arty	
6 Amount (\$)	7 Payee address; City; State; Zip Code		
120.00	1445 N. Loop West		
	Suite 110		
	Houston TX 77008		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Membership Dues	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	office sought of	ffice held
4 Date	E Davisa name		
	5 Payee name		
8/1/2015	Richard Johnson		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
500.00	8738 Fannette St.		
	Houston TX 77029		
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 7/13/2015 Richard Johnson 7 Payee address; 6 Amount (\$) City; Zip Code State; 8738 Fannette St. 600.00 Houston TX 77029 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinso	·	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
7/17/2015	Richard Johnson		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
160.00	8738 Fannette St.	,	
	Houston TX 77029		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Text Check if Austin, TX, officehold Field Work	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Loffice sought off	iice held
4 Date	5 Payee name		
7/10/2015	Richard Johnson		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
770.00	8738 Fannette St.		
8 PURPOSE OF EXPENDITURE	Houston TX 77029	(h) Description	
8 PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Text Check if Austin, TX, officehor Field Work	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought off	iice held
4 Date	5 Payee name		
9/15/2015	AB Communications		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00	9600 Glenfield Court		
	Suite 148		
	Houston TX 77096		
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/11/2015 Sprint 2 Print 7 Payee address; 6 Amount (\$) City; State; Zip Code 640.00 8748 Clay Rd. #300 Houston TX 77080 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Signs Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Laurie Robinson 3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name		
9/12/2015	Richard Johnson		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
200.00	8738 Fannette St.		
	Houston TX 77029		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Salaries/Wages/Contract	Field Work	
	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		
9/5/2015	Copy.com		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
94.04	1201-F Westheimer Rd.		
	Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense Campaign cards		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
onponantinos to zonom e/on			
4 Date	5 Payee name		
9/15/2015	Florida Cooper		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00			
	Houston TX		
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 Laurie Robinson Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/15/2015 Michael Yarbrough 7 Payee address; 6 Amount (\$) Zip Code City; State; 750.00 5616 Wayne St. Houston TX 77026 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field Work Salaries/Wages/Contract Labor 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

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 Laurie Robinson 4 Date 5 Payee name 9/15/2015 Carla Brailey 7 Payee address; **6** Amount (\$) City; State; Zip Code 3355 Wentworth 200.00 Houston TX 77004 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 Fundraising Labor 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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) 2 FILER NAME Laurie Robinson 5 Payee name 4 Date Harris County Tejano Democrats 7/2/2015 6 Amount (\$) 7 Payee Address; State: Zip Code City; 25.00 3715 N. Main St. Houston TX 77009 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Membership Fee Fees **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 7/14/2015 Weights and Measures 6 Amount (\$) 7 Payee Address; City; State: Zip Code 44.97 2808 Caroline St. Houston TX 77004 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Food/Beverage Expense Campaign event **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 9/1/2015 **Ambur Burton Consulting** 6 Amount (\$) 7 Payee Address; City; State; Zip Code 1,250.00 19422 Rosebud Ridge Way Spring TX 77379 X Reimbursement from political contributions intended 8 (a) Category (b) Description

SCHEDULE G

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) ² FILER NAME Laurie Robinson **PURPOSE OF** Consulting Expense Fundraising **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought expenditure to benefit C/OH 4 Date 5 Payee name 9/1/2015 Florida Cooper 6 Amount (\$) 7 Payee Address; City; State; Zip Code 500.00 6642 Heron Drive TX Houston 77087 X Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Salaries/Wages/Contract Labor Field Work **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office held Office sought expenditure to benefit C/OH 4 Date 5 Payee name 9/1/2015 Michael Yarbrough 6 Amount (\$) 7 Payee Address; City; State; Zip Code 750.00 77026 5616 Wayne St. Houston TX Reimbursement from political contributions intended 8 (b) Description (a) Category **PURPOSE OF** Salaries/Wages/Contract Labor Field Work **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date 5 Payee name 9/1/2015 Jennifer Naedler

POLITICAL EX	PENDITURES	SCHEDULE G
MADE FROM P	ERSONAL FUNDS	
	The Instruction Guide explains h	now to complete this form.
1 Total Pages Schedule G:	² FILER NAME Laurie Robinson	3 FilerID (Ethics Commission filers)
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
1,250.00	P.O. Box 41964	Houston TX 77241
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Consulting Expense	Fundraising
EXPENDITORE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date	5 Payee name	
9/1/2015	Gloria Palmer	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
500.00	7413 Parker Rd.	Houston TX 77016
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Field Work
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 1 Total Pages Schedule G: 3 FilerID (Ethics Commission filers) ² FILER NAME Laurie Robinson 4 Date 5 Payee name 9/1/2015 W. F. Harris 6 Amount (\$) 7 Payee Address; City; State: Zip Code 500.00 5330 Windemere Houston TX 77033 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Salaries/Wages/Contract Labor Field Work **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 9/15/2015 Downtown Pachyderm Club 6 Amount (\$) 7 Payee Address; City; State: Zip Code 50.00 2618 Wichita St. Houston TX 77074 X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Food/Beverage Expense Lunch Meeting **EXPENDITURE** Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 4 Date 5 Payee name 9/15/2015 **Ambur Burton Consulting** 6 Amount (\$) 7 Payee Address; City; State; Zip Code 1,250.00 19422 Rosebud Ridge Way Spring TX 77379 X Reimbursement from political contributions intended 8 (a) Category (b) Description

SCHEDULE G

POLITICAL EXPENDITURES		SCHEDULE G
MADE FROM PE	ERSONAL FUNDS	
	The Instruction Guide explains ho	w to complete this form.
1 Total Pages Schedule G:	² FILER NAME Laurie Robinson	3 FilerID (Ethics Commission filers)
PURPOSE OF EXPENDITURE	Consulting Expense	Fundraising
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date	5 Payee name	
9/7/2015	Meyerland Democrats	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
250.00	9603 Chatfield St.	Houston TX 77025
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Table at Event
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL CODIES OF T	THE COLLEGE E AC MEEDED