	TE / OFFICEHOLI N FINANCE REPO			FORM C/OH COVER SHEET PG :
The C/OH Instruction	Guide explains how to comp	olete this form.		2 Total pages filed: 45
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Laurie	MI	OFFICE USE ONLY Date Received
	NICKNAME	LAST Robinson	SUFFIX	RECEIVED
CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT P.O. Box 132072	-/ SUITE#; CITY;	ZIP CODE	Date Hand-delivered or trade Postmarked Rectal: CITY Amount
X Change of Address	Houston, TX 77219			Date Imaged
5 CAMPAIGN TREASURER NAME	MS/MRS/MR Mr. William	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
	Lawson			
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO	BOX PLEASE); Al	PT / SUITE #; CITY; Texas 77056	STATE; ZIP COI
CAMPAIGN TREASURER PHONE	AREA CODE PHON 832-439-2351	NE NUMBER EXTENSION		
REPORT TYPE	January 15	30th day before election 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
PERIOD COVERED	Month Day Year 01/01/2015	THROUGH	Month Day 06/30/2015	Year
D ELECTION	ELECTION DATE Month Day Year 11/03/2015	Primary X General	ELECTION TYPE Runoff Special	Other
L OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (i	if known) uncil at Large #4

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 45

13 C / OH NAME	Robinson, Laurie 14 Filer ID	
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political co candidate / officeholder. These expenditures may have been made without the candidate's or officeholders. Candidates and officeholders are required to report this information only if they receive not	holder's knowledge or
Additional Pages	COMMITTEE TYPE COMMITTEE NAME	
The state of the s	GENERAL COMMITTEE ADDRESS SPECIFIC	
The state of the s	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	
16 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 43,043.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 16,736.21
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 26,719.59
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
17 AFFADAVIT	I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required t under Title 15, Election Code.	companying report is to be reported by me
A STATE OF	GARY D GRAHAM Notary Public, State of Texas My Commission Expires FEBRUARY 3, 2018 STAINIP! SEAL ABOVE GARY D GRAHAM SIgnature of Candidate or Officehold Signature of Candidate or Officehold	lder
Sworn to and subs	cribed before me, by the said, this the, this the	day
Signature of bff	Dacher CARAD BRAHAM NOTAR	n PUBLIC er administering oath
Olgitatare of off		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 45

18 FIL					
Ro	binson				
20 SC	HEDUL	E SUBTOTALS			
NA	ME OF	SCHEDULE		SU	BTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	28,623.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	14,420.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	***************************************
4.	X	SCHEDULE E: LOANS		\$	12,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	13,903.41
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,832.80
9.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
10.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
11.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/22 Rpt: 4/45 3 Filer ID 2 FILER NAME Robinson, Laurie Amount of Contribution (\$) out-of-state PAC (ID#: Date 5 Full name of contributor \$500.00 06/30/2015 Adams, Beverly (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77016 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Self Consultant Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$50.00 06/27/2015 Adams, Sarah (Ms.) Contributor address; City; State; Zip Code Houston, TX 77014 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: Date \$150.00 06/19/2015 Allen, Beverly (Ms.) Contributor address; City; State; Zip Code Houston, TX 77083 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 06/18/2015 Banks, Laresa (Ms.) Contributor address; City; State; Zip Code Houston, TX 77044 Employer (See Instructions) Principal occupation / Job title (See Instructions) Laresource 2000 Owner Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 06/30/2015 Baptist, Devin Contributor address; City; State; Zip Code Houston, TX 77085 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	TARY POLITICAL CONTRIBUTI	ONS	SCHEDUL	LE A1
****	uction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 2/22 Rpt: 5/45	
2 FILER NAME Robinson, L			3 Filer ID	
4 Date 05/14/2015	5 Full name of contributor out-of-state PAC (ID# Bashen, Blair 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$)	\$250.00
	Houston, TX 77024			
Consultant		9 Employer (See Instructions) Bashen Corporation)	
Date 04/14/2015	Full name of contributor out-of-state PAC (ID# Bassett, Amandalyn (Ms.) Contributor address; City; State; Zip Code	:)	Amount of Contribution (\$)	\$50.00
Princinal occ	Pearland, TX 77584	Fordayar (See Instructions		***************************************
HR Consulta	•	Employer (See Instructions) Dominion		
Date 06/27/2015	Full name of contributor out-of-state PAC (ID#: Bassett, Amandalyn (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$107.00
	Pearland, TX 77584		1	
HR Consulta		Employer (See Instructions) Dominion		
Date 06/18/2015	Full name of contributor out-of-state PAC (ID#: Baxter-Thierry, Nicole (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$250.00
Principal occu Owner	Pearland, TX 77584 upation / Job title (See Instructions)	Employer (See Instructions) The Sleep Plus Group		
Date 05/13/2015	Full name of contributor out-of-state PAC (ID#: Beal Consulting Group Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$250.00
1.7.200	Houston, TX 77054			
Principal occu _l	upation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/22 Rpt: 6/45 3 Filer ID 2 FILER NAME Robinson, Laurie Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 4 Date \$250.00 06/04/2015 Beasley, Joi (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77088 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$250.00 06/18/2015 Beausoleil, Cheryl (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Superior Home Healthcare **Executive Director** out-of-state PAC (ID#:_ Amount of Contribution (\$) Full name of contributor Date \$44.00 06/27/2015 Blueford-Daniels, Kathy (Ms.) Contributor address; City; State; Zip Code Houston, TX 77026 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$200.00 05/14/2015 Boyd, Kimberly (Ms.) Contributor address; City; State; Zip Code Houston, TX 77008 Employer (See Instructions) Principal occupation / Job title (See Instructions) Apex Systems Sr. Consultant Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$250.00 Boyd, Kimberly (Ms.) 06/18/2015 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Apex Systems Sr. Consultant

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/22 Rpt: 7/45 FILER NAME 3 Filer ID Robinson, Laurie Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/14/2015 Brailey, Carla (Ms.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77288 Principal occupation / Job title (See Instructions) Employer (See Instructions) Professor Texas Southern University Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/25/2015 Brooks, Jeri (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77254 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/14/2015 Burroughs, Herman (Mr.) \$250.00 Contributor address; City; State; Zip Code Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Agent Allstate Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/19/2015 Burton, Noel (Mr.) \$100.00 Contributor address; City; State; Zip Code Mitchellville, MD 20721 Principal occupation / Job title (See Instructions) Employer (See Instructions) Program Coordinator Smithsonian Natural History Museum Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/19/2015 Camel-Smith, Yvette (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Port of Houston

WONLIA	ARY POLITICAL CONTRIBUTIO		SCHEDULE A
The Instruc	ction Guide explains how to complete this fo	rm.	1 Total pages Schedule A1: Sch: 5/22 Rpt: 8/45
FILER NAME Robinson, La	uurie		3 Filer ID
Date 05/12/2015	 Full name of contributor		7 Amount of Contribution (\$) \$25
Daine in a l	Houston, TX 77056	9 Employer (See Instruction	ione)
Principal occup Autodealer	pation / Job title (See Instructions)	Self	
Date 03/22/2015	Full name of contributor		Amount of Contribution (\$) \$10
Dringing!	Houston, TX 77058	Employer (See Instruction	ions)
Principal occup	pation / Job title (See Instructions)	⊏mbioλei (266 metrocni	шина)
Date 05/14/2015	Full name of contributor		Amount of Contribution (\$)
	Houston, TX 77019		
Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructi The Clifford Group	tions)
Date 06/27/2015	Contributor address; City; State; Zip Code)) Amount of Contribution (\$) \$
Principal occu	Houston, TX 77091 Ipation / Job title (See Instructions)	Employer (See Instructi	tions)
Date 04/15/2015	Full name of contributor out-of-state PAC (ID#: DeAndrea, Tara (Ms.) Contributor address; City; State; Zip Code) Amount of Contribution (\$) \$
	Frisco, TX 75034		
	1		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/22 Rpt: 9/45 FILER NAME Filer ID Robinson, Laurie Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/07/2015 DeMerchant, Laquitta (Ms.) \$20.00 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/25/2015 Denery, Brenda (Ms.) \$20.00 Contributor address; City; State; Zip Code Houston, TX 77086 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Dixon, James (Rev.) 05/14/2015 \$2,000.00 Contributor address; City; State; Zip Code Houston, TX 77091 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bishop The Community of Faith Church Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/25/2015 Dudley, Calvin (Mr.) \$20.00 Contributor address; City; State; Zip Code Austin, TX 78724 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/18/2015 Dudley, Lura (Ms.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) HR Rep. Fairmont Santrol

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/22 Rpt: 10/45 3 Filer ID 2 FILER NAME Robinson, Laurie 7 Amount of Contribution (\$) out-of-state PAC (ID#: 4 Date 5 Full name of contributor \$50.00 06/18/2015 Everett, Pam 6 Contributor address; City; State; Zip Code Lucas, TX 75002 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 06/27/2015 \$144.00 Fields-Harris, Deborah (Ms.) Contributor address; City; State; Zip Code Houston, TX 77088 Principal occupation / Job title (See Instructions) Employer (See Instructions) HISD Educator Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$20.00 06/18/2015 Fisher, Nicole (Ms.) Contributor address; City; State; Zip Code Mitchellville, MD 20721 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 05/14/2015 Flowers, Reagan Contributor address; City; State; Zip Code Houston, TX 77288 Employer (See Instructions) Principal occupation / Job title (See Instructions) Professor Texas Southern Univ. Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$250.00 05/14/2015 Francis, Ruthine (Ms.) Contributor address; City; State; Zip Code Houston, TX 77016 Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor Self

MONEI	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 8/22 Rpt: 11/45	
2 FILER NAME			3	Filer ID	
Robinson, La	aurie				
4 Date 06/28/2015	 Full name of contributor out-of-state PAC (ID# Francis, Takasha (Ms.) Contributor address; City; State; Zip Code 	<u>; </u>	7	Amount of Contribution (\$)	\$100.00
	Houston, TX 77054				
8 Principal occu Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Self	5)		
Date 06/23/2015	Full name of contributor out-of-state PAC (ID# Gage, Gail (Ms.) Contributor address; City; State; Zip Code Houston, TX 77004			Amount of Contribution (\$)	\$250.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u> ;)		
Date 05/14/2015	Full name of contributor out-of-state PAC (ID#Gite, Lloyd (Mr.) Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$75.00
	Houston, TX 77004	-	<u> </u>		***************************************
Owner	pation / Job title (See Instructions)	Employer (See Instructions Gite Gallery	s) 		
Date 06/30/2015	Gite, Lloyd (Mr.) Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$500.00
Deinsinal	Houston, TX 77004				
Owner Owner	pation / Job title (See Instructions)	Employer (See Instructions Gite Gallery	i) 		
Date 05/15/2015	Full name of contributor out-of-state PAC (ID# Graham, Ellen (Ms.) Contributor address; City; State; Zip Code	:)		Amount of Contribution (\$)	\$100.00
Dringing! goog	Houston, TX 77004	T Foodbase (2)		***************************************	
нпосіра і осси <u>г</u>	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/22 Rpt: 12/45 3 Filer ID 2 FILER NAME Robinson, Laurie 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$1,000.00 04/17/2015 Green, William (Mr.) 6 Contributor address; City; State; Zip Code Humble, TX 77396 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Gary Greene Realtors Realtor Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 05/14/2015 Hall, Brian (Mr.) Contributor address; City; State; Zip Code Houston, TX 77254 Employer (See Instructions) Principal occupation / Job title (See Instructions) Shell Manager Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 06/29/2015 Hariani, Vasant (Mr.) Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Infrastructure Associates Principal Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$1,000.00 06/30/2015 Harris, Michael (Mr.) Contributor address; City; State; Zip Code Houston, TX 77004 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$150.00 06/30/2015 Harrison, Audrey (Ms.) Contributor address; City; State; Zip Code Houston, TX 77053 Principal occupation / Job title (See Instructions) Employer (See Instructions)

,	MONET	TARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1 Total pages Schedule A1: Sch: 10/22 Rpt: 13/45	
2	FILER NAME Robinson, L			***************************************	3 Filer ID	
4	Date 06/30/2015	Full name of contributor Harrison, Audrey (Ms.) Contributor address; City; St.	out-of-state PAC (ID#:_		7 Amount of Contribution (\$)	\$150.00
		Houston, TX 77053				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	Date 05/13/2015	Full name of contributor Hatchett, Dorita (Ms.) Contributor address; City; St	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$100.00
		Houston, TX 77036				
	Principal occu Consultant	upation / Job title (See Instructions)	Employer (See Instructions Self))	
	Date 05/14/2015	Full name of contributor Hollins, Angelina (Ms.) Contributor address; City; St.	out-of-state PAC (ID#:_		Amount of Contribution (\$)	\$100.00
		Pearland, TX 77584				
	•	ipation / Job title (See Instructions iical Sales Rep)	Employer (See Instructions	s)	
	Date 06/18/2015	Full name of contributor Hollins, Angelina (Ms.) Contributor address; City; St.	out-of-state PAC (ID#:_		Amount of Contribution (\$)	\$150.00
	•	Pearland, TX 77584 Ipation / Job title (See Instructions) ical Sales Rep		Employer (See Instructions	<u> </u> 	
	Date 05/14/2015	Full name of contributor Houston 8 Team, LLC Contributor address; City; Sta	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$500.00
		Houston, TX 77019				
	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions	· · · · · · · · · · · · · · · · · · ·	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 11/22 Rpt: 14/45 2 FILER NAME 3 Filer ID Robinson, Laurie Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/30/2015 Hudson, Chris \$100.00 6 Contributor address; City; State; Zip Code Belliare, TX 77401 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/15/2015 \$100.00 Jackson, Charmaine (Ms.) Contributor address; City; State; Zip Code Milpitas, CA 95305 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 04/17/2015 \$1,000.00 Jackson, Patricia (Ms.) Contributor address; City; State; Zip Code Houston, TX 77021 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/14/2015 \$250.00 Jackson, Russell (Mr.) Contributor address; City; State; Zip Code Houston, TX 77021 Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO DIR, Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/03/2015 Jefferson, Howard (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77035 Principal occupation / Job title (See Instructions) Employer (See Instructions) Insurance Self

MONET	TART POLITICAL	CONTRIBUTION	DINO		SCHEDUL	E A1
The Instru	ection Guide explains how	w to complete this f	form.	1	Total pages Schedule A1: Sch: 12/22 Rpt: 15/45	
2 FILER NAME				3	Filer ID	
Robinson, L	<u> </u>	-		L		
4 Date 06/30/2015	5 Full name of contributor Jefferson, Howard (Mr.) 6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00
	Houston, TX 77035					
8 Principal occu	upation / Job title (See Instruction	s)	9 Employer (See Instructions	s)		
Insurance			Self			
Date 06/30/2015	Full name of contributor Jefferson, Jewel Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Houston, TX 77085					
Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
Date	Full name of contributor	out-of-state PAC (ID#:_)	Ī	Amount of Contribution (\$)	
06/30/2015	Jefferson, Tangela (Ms.) Contributor address; City; S Houston, TX 77096	State; Zip Code				\$100.00
Principal occu	pation / Job title (See Instruction:	s)	Employer (See Instructions	<u> </u> s)		
Date 06/30/2015	Full name of contributor Jefferson, Zona Contributor address; City; S)		Amount of Contribution (\$)	\$500.00
	Houston, TX 77035					
Homemaker	pation / Job title (See Instructions	s)	Employer (See Instructions None	s) 		
Date 05/14/2015	Full name of contributor out-of-state PAC (ID#:) Johnson, Irene (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
Deinoirel	Houston, TX 77006					
Homemaker	pation / Job title (See Instructions	a)	Employer (See Instructions None	5)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/22 Rpt: 16/45 3 Filer ID 2 FILER NAME Robinson, Laurie Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 05/14/2015 \$250.00 Ketai, Lisa (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77098 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) City of Houston Attorney Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$10.00 06/30/2015 Ladet, Janae (Ms.) Contributor address; City; State; Zip Code Houston, TX 77044 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$100.00 06/21/2015 Lang, Hope (Ms.) Contributor address; City; State; Zip Code Houston, TX 77022 Principal occupation / Job title (See Instructions) Employer (See Instructions) Dept. of Veteran Affairs Claims Processor Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 05/14/2015 Lanier, Odysseus (Mr.) Contributor address; City; State; Zip Code Missouri City, TX 77459 Employer (See Instructions) Principal occupation / Job title (See Instructions) Management Consultant McConnell, Jones, Lanier & Murphy, LLC Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 05/14/2015 \$50.00 Lawson, Shante (Ms.) Contributor address; City; State; Zip Code Missouri City, TX 77489 Principal occupation / Job title (See Instructions) Employer (See Instructions) Accountant Sysco

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/22 Rpt: 17/45 FILER NAME Filer ID Robinson, Laurie Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$200.00 06/29/2015 Lawson, Shante (Ms.) 6 Contributor address; City; State; Zip Code Missouri City, TX 77489 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Accountant Sysco Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/03/2015 \$1,000.00 Lawson, William (Rev.) Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Pastor Emeritus Wheeler Baptist Church Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 05/14/2015 \$1,000.00 Lawson, William (Rev.) Contributor address; City; State; Zip Code Houston, TX 77021 Principal occupation / Job title (See Instructions) Employer (See Instructions) Pastor Emeritus Wheeler Avenue Baptist Church Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/02/2015 \$250.00 Levi Benton & Associates Contributor address; City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/17/2015 Marshall, Carla (Ms.) \$50.00 Contributor address; City; State; Zip Code Miamisburg, OH 45342 Principal occupation / Job title (See Instructions) Employer (See Instructions) Immigration Lead Teradata Operations, Inc.

	MONET	TARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	LE A1
	The Instru	uction Guide explains how	to complete this fo	orm.		Total pages Schedule A1: Sch: 15/22 Rpt: 18/45	
2	FILER NAME Robinson, L				3	Filer ID	
4		5 Full name of contributor McCleskey, Kendrick (Mr.)			7	Amount of Contribution (\$)	\$250.00
8	Drincipal OCC	Houston, TX 77007 upation / Job title (See Instructions)	<u> </u>	2 See Instruction	<u></u>		
ď	Principal occu Professional	al Services		9 Employer (See Instructions PwC	S)		
	Date 05/14/2015	Contributor address; City; Sta				Amount of Contribution (\$)	\$200.00
	Principal occ	Pearland, TX 77581 upation / Job title (See Instructions)	s)	Employer (See Instructions	ls)		
	Homemaker			None	, 		
	Date 06/30/2015	Full name of contributor Midgette, Roger (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Silver Spring, MD 20903		**************************************			
	Principal occu Retired	upation / Job title (See Instructions))	Employer (See Instructions Retired	s)		
	Date 06/18/2015	Full name of contributor Mumford, Lynn (Ms.) Contributor address: Citv: Sta)		Amount of Contribution (\$)	\$30.00
	Principal occu	upation / Job title (See Instructions))	Employer (See Instructions	L		
	Date 05/14/2015	Full name of contributor Murphy, Sharon (Ms.) Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77063					
	Principal occu Consultant	upation / Job title (See Instructions))	Employer (See Instructions McConnell, Jones, Lani		& Murphy, LLC	
*******							-

MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/22 Rpt: 19/45	
2 FILER NAME Robinson, La		· · · · · · · · · · · · · · · · · · ·	3	Filer ID	
4 Date 05/03/2015	Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
***************************************	Kingwood , TX 77345				
8 Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired)		
Date 06/29/2015	Full name of contributor out-of-state PAC (ID#:_ Osterwisch, Barbara (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$35.00
Principal occu	Kingwood , TX 77345 spation / Job title (See Instructions)	Employer (See Instructions)		
Retired	,	Retired	,		
Date 04/14/2015	Full name of contributor out-of-state PAC (ID#: Penn, Jeanette (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Houston, TX 77051				
Principal occu Admin. Asst.	pation / Job title (See Instructions)	Employer (See Instructions Texas Children's Hospit			***************************************
Date 06/18/2015	Full name of contributor out-of-state PAC (ID#:_Penn, Jeanette (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
Principal occu Admin. Asst.	Houston, TX 77051 upation / Job title (See Instructions)	Employer (See Instructions Texas Childrens Hospita			
Date 06/30/2015	Full name of contributor out-of-state PAC (ID#: Plummer, Letitia (Dr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
***************************************	Pearland, TX 77584				
Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions MaxwellO, Inc.)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/22 Rpt: 20/45	
2	FILER NAME Robinson, L	aurie		3	Filer ID	
4	Date 06/30/2015	 5 Full name of contributor out-of-state PAC (ID#:_Plummer, Matthew (Dr.) 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
	Dia in I	Houston, TX 77002	Io =			
8	Physician	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 06/25/2015	Full name of contributor			Amount of Contribution (\$)	\$500.00
		Houston, TX 77079				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/19/2015	Full name of contributor out-of-state PAC (ID#:_Randon, Marleah (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00
		Houston, TX 77021				
	Principal occu Auditor	pation / Job title (See Instructions)	Employer (See Instructions CBIZ Risk & Advisory)		
	Date 06/25/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, Brian (Mr.) Contributor address; City; State; Zip Code Austin, TX 78724			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/19/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, Carla (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
97999		St. Paul, MN 55116		***********		
	Principal occu Financial An	pation / Job title (See Instructions) alyst	Employer (See Instructions Hewlett-Packard	5)		

,	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	_E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/22 Rpt: 21/45	
2	FILER NAME Robinson, L		The first of the second se	3	Filer ID	
4	Date 06/25/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, Cody (Mr.) Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
		Mitchellville, MD 20721				
8	Principal occu Caterer	pation / Job title (See Instructions)	Employer (See Instructions Robinson Food Services			
	Date 06/25/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, James (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00
	Principal occu	Austin, TX 78724 upation / Job title (See Instructions)	Employer (See Instructions			
	r mcipai occi	pation 7 300 title (See Instituctions)	Employer (See Instructions	•)		
	Date 06/18/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, Juanita (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Houston, TX 77091				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/14/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, Kimberly (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		Pearland, TX 77584				
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 06/18/2015	Full name of contributor out-of-state PAC (ID#:_ Robinson, Lawrence (Mr.) Contributor address; City; State; Zip Code Mitchellville, MD 20721			Amount of Contribution (\$)	\$150.00
	Principal occu Caterer	pation / Job title (See Instructions)	Employer (See Instructions Robinson Food Services			

	MONET	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 19/22 Rpt: 22/45		
2	FILER NAME Robinson, L		3 Filer ID		
4	Date 06/18/2015	5 Full name of contributor	7 Amount of Contribution (\$)	\$250.00	
8	Principal occu	Sugar Land, TX 77479 pation / Job title (See Instructions) 9 Employer (See Instructions))		
	Date Full name of contributor out-of-state PAC (ID#:) Robinson, Pamela (Ms.) Contributor address; City; State; Zip Code Mitchellville, MD 20721		Amount of Contribution (\$)	\$150.00	
	Principal occupation / Job title (See Instructions) Education Specialist Prince George County				
	Date O6/25/2015 Full name of contributor out-of-state PAC (ID#:) Robinson, Trena (Ms.) Contributor address; City; State; Zip Code Austin, TX 78724		Amount of Contribution (\$)	\$20.00	
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions)			
	Date 06/04/2015	Full name of contributor out-of-state PAC (ID#:) Rose, Courtney (Ms.) Contributor address; City; State; Zip Code Missouri City, TX 77489	Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions) Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/14/2015 Santee, Sonya (Ms.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$100.00	
	Dringing I =	Missouri City, TX 77459			
	- ппсіраї осси	pation / Job title (See Instructions) Employer (See Instructions)			

	MONET	ARY POLITICAL (CONTRIBUTION	DN2		SCHEDULE	■ A1
	The Instru	ction Guide explains hov	to complete this t	form.	1	Total pages Schedule A1: Sch: 20/22 Rpt: 23/45	
2	FILER NAME				3	Filer ID	
	Robinson, La	aurie			L		
4	Date 06/30/2015	5 Full name of contributor Smith, Brian (Mr.) 6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
	Daine in all annual	Houston, TX 77021		In Facilities (Oct. Lateral)	Ļ		
ð		pation / Job title (See Instructions	5)	9 Employer (See Instructions Brian Smith Constructio			
	Construction	i Manayer		Brian Smith Constructio	11		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2015	Starr, LaQuinta (Ms.)					\$50.00
		Contributor address; City; S	tate; Zip Code				
		Richmond, TX 77469					
-	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)	
	06/04/2015 Tanner, Germaine					• •	\$50.00
		Contributor address; City; State; Zip Code					
		•					
		Houston, TX 77001					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Ī	Amount of Contribution (\$)	
	06/18/2015	Taylor, Luanna (Ms.)					\$24.00
		Contributor address, City, C	tate, zip code				
		Houston, TX 77070					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	04/18/2015	Texada, O'Neal (Mr.)				•	\$100.00
		Contributor address; City; S	tate: Zip Code		1		
		, , , , , ,	, .,				
					l		
		Houston, TX 77050					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	 S)	u u	
	Realtor			Gary Greene Realtors	•		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/22 Rpt: 24/45 3 Filer ID 2 FILER NAME Robinson, Laurie 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$144.00 06/24/2015 Texada, O'Neal (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77050 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Realtor Gary Greene Realtors Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/24/2015 Thomas, Wretha (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77047 Principal occupation / Job title (See Instructions) Employer (See Instructions) Union President HESP Union 6315 Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/19/2015 Vance, Everett (Mr.) \$35.00 Contributor address; City; State; Zip Code Vienna, VA 22182 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/18/2015 \$50.00 Verela, Claudinette (Ms.) Contributor address; City; State; Zip Code Missouri City, TX 77459 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/04/2015 Vetters, Lori (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Sr. VP **HSBC**

	MONEI	ARY POLITICAL CONT	RIBUTIONS	SCHEDULE A1		
	The Instru	ction Guide explains how to con	nplete this form.	1	Total pages Schedule A1: Sch: 22/22 Rpt: 25/45	
2	FILER NAME Robinson, La			3	Filer ID	
4	Date 05/14/2015 5 Full name of contributor out-of-state PAC (ID#:) Washington & Associates 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$250.00
		Houston, TX 77002				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	3)		***************************************
	Date Full name of contributor out-of-state PAC (ID#:) 05/22/2015 Williams, Mark (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Houston, TX 77084 upation / Job title (See Instructions)	Employer (See Instructions)	<u>_'</u>		
	CEO	,	Protectors Insurance	''		
	Date 06/18/2015	Wynn, Yvette (Ms.) Contributor address; City; State; Zip C	of-state PAC (ID#:) Code		Amount of Contribution (\$)	\$35.00
	Principal occu	Houston, TX 77028 pation / Job title (See Instructions)	Employer (See Instructions)	 ;)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 26/45 2 FILER NAME Filer ID Robinson, Laurie TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ Amount of 9 In-kind contribution Full name of contributor out-of-state PAC (ID#: contribution (\$) description 06/30/2015 Brailey, Carla (Ms.) \$2,500.00 Fundraising Services 7 Contributor address; City; State; Zip Code Houston, TX 77288 Check if travel outside of Texas. Complete Schedule T. (See instructions) 11 Employer (FOR NON-JUDICIAL) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) **Texas Southern University** Professor 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Date Full name of contributor out-of-state PAC (ID#: contribution (\$) description 06/30/2015 Brown, Linda (Ms.) \$5,000.00 | Event Consulting Contributor address; City; State; Zip Code Houston, TX 77219 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Self-employed Self-employed Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Full name of contributor Amount of Date out-of-state PAC (ID#: contribution (\$) description 06/30/2015 Carmouche, Janaeya (Ms.) \$5,000.00 | Consulting Services Contributor address; City; State; Zip Code Houston, TX 77026 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to cor	mplete this form.	1 Total pages Schedule A2: Sch: 2/2 Rpt: 27/45					
2 FILER NAME	A CONTRACTOR OF THE CONTRACTOR	3 Filer ID					
Robinson, Laurie							
4 TOTAL OF UNITEMIZED IN-KIND POLITICA	AL CONTRIBUTIONS	\$					
05/13/2015 Logans, Renee (Ms.)	05/13/2015 Logans, Renee (Ms.) 7 Contributor address; City; State; Zip Code						
10 Principal occupation / Job title (FOR NON-JUDICIAL) ((See instructions) 11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. N-JUDICIAL) (See instructions)					
IT Consultant	Self	VOUDIGIALY (1998 MARIE)					
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	e (FOR JUDICIAL) (See instructions)					
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	tor's spouse (if any) (FOR JUDICIAL)					
16 If contributor is a child, law firm of parent(s) (if any) (FOF	R JUDICIAL)						
Date Full name of contributor out-of-s 05/14/2015 Reza, Ernesto (Mr.) Contributor address; City; State; Zip C	state PAC (ID#:) Code	Amount of contribution (\$) In-kind contribution description ### ### Standard Contribution ### Check if travel outside of Taxas, Complete School to I					
Principal occupation / Job title (FOR NON-JUDICIAL) ((See instructions) Employer (EOR NO)	Check if travel outside of Texas. Complete Schedule T. N-JUDICIAL) (See instructions)					
Consultant		Employer (FOR NON-JUDICIAL) (See instructions) ERGO Consulting Group					
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title						
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contribut	Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor is a child, law firm of parent(s) (if any) (FOF	R JUDICIAL)						

	LOANS					SCHEDULE E	
	The Instruction	n Guide explains how to complete	this f	orm.	-	ges Schedule E: 1 Rpt: 28/45	
2	FILER NAME Robinson, Laurie	9			3 Filer ID		
4	TOTAL OF UN	ITEMIZED LOANS				\$	
5	Date of loan 06/30/2015	7 Name of lender out-of-s Robinson, Laurie (Ms.)	tate PA	C (ID#:)	9 Loan Amount (\$) \$8,500.00	
6	Is lender a financial institution?	8 Lender address; City; S 3003 N. Heights Hollow Ln.	tate;	Zip Code		10 Interest Rate 1.50 11 Maturity Date	
		Houston, TX 77007				12/31/2015	
12	Principal occupation	n / Job title (See Instructions)		13 Employer (See Instructions Self)		
14	Description of Coll X None	ateral		15 Check if personal funds we	re deposited	d into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address; City; S	tate;	Zip Code			
20	Principal occupation	on		21 Employer (See Instructions)		
	Date of loan 06/30/2015	Name of lender out-of-s Robinson, Laurie (Ms.)	tate PA	C (ID#:)	Loan Amount (\$) \$3,500.00	
	Is lender a financial institution?	Lender address; City; Si 3003 N. Heights Hollow Ln.	tate;	Zip Code		Interest Rate	
	No	Houston, TX 77007				Maturity Date 08/01/2015	
	Principal occupation	n / Job title (See Instructions)		Employer (See Instructions)	•	
	Description of Coll X None	ateral		Check if personal funds we	re deposited	l into political account (See Instructions)	
	GUARANTOR INFORMATION	Name of guarantor				Amount Guaranteed (\$)	
	X not applicable	Guarantor address; City; Si	tate;	Zip Code			
Principal occupation				Employer (See Instructions)			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 1/9 Rpt: 29/45	Robinson, Laurie
4	Date ,	5 Payee name
	05/17/2015	APRI
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$120.00	2506 Sutherland
		Houston, TX 77023
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Luncheon
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/03/2015	Amegy Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.95	P.O. Box 27459
		Houston, TX 77227
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Service Fee
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/03/2015	Amegy Bank
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	P.O. Box 27459
	420.00	1 10 1 Box 21 400
		Houston, TX 77227
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Service Fee
	Consolate ONE V Welling (Condition (Official allege and Automatical
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

		The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 2/9 Rpt: 30/45	2 FILER NAME Robinson, Laurie	3 Filer ID
4	Date 03/03/2015	5 Payee name	
_		Amegy Bank	
6	Amount (\$) \$21.20	7 Payee address; City; State; Zip Code P.O. Box 27459	
	Φ21.20	P.O. BOX 27439	
		Houston, TX 77227	
8	PURPOSE OF	- (,	Description
	EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Order Checks
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	03/31/2015	Amegy Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$8.00	P.O. Box 27459	
		Houston, TX 77227	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Monthly Fee
			•
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/10/2015	Brown, Linda (Ms.)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	P.O. Box 27459	
			:
		Houston, TX 77219	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
P34* 94* 9***			Check if Austin, TX, officeholder living expense Communications
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donation

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica		Legal Services The Instruction Guide	Salaries/	Nages	/Contract Labor		OTHER (enter a category not listed abo	ove)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	
L	Sch: 3/9 Rpt: 31/45	Robinson,	Laurie						
4	Date	5 Payee name	9						
	05/20/2015	Carmouch	e, Janaeya (Ms.)						
6	Amount (\$) \$8,008.00	7 Payee addro 3437 Milba Houston, T	ank	State; Zip Co	ode				
8	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Consulting	Expense			<u></u>	, тх,	de of Texas. Complete Schedule T. officeholder living expense gement	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ıght			Office held	
	Date	Payee name	9						
	05/12/2015	Costco							
	Amount (\$) \$83.30	Payee addro 3836 Richi Houston, T	mond	State; Zip Co	ode				
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Beve	erage Expense			<u></u>	, TX,	de of Texas. Complete Schedule T. officeholder living expense nt	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sou	ıght			Office held	
	Date 03/23/2015	Payee name Facebook	2						
	Amount (\$) \$25.01	Payee addro 1 Hacker V Menlo Parl		State; Zip Co	ode				
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising		,		Check if travel of	, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ficeholder name	Office sou	ıght			Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Food/Beverage Expense Gift/Awards/Memorials E Legal Services	Expense Printi Salar	_	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
		T	The Instruction Gui	de explains how to	o comple	te this form.		
1	Total pages Schedule F1: Sch: 4/9 Rpt: 32/45	2 FILER NAME Robinson					3	Filer ID
4	Date	5 Payee nan	ne					
ĺ	04/19/2015	Forty Plus						
6	Amount (\$)	7 Payee add	lress; City;	State; Zip	Code			
	\$100.00	2909 Hillo	croft Ave.					
	!	Suite 400	J					
	!	Houston,	TX 77057					
8	PURPOSE	(a) Category	(See Categories listed at the	e ton of this schedule)	(b)	Description		
	OF EXPENDITURE	I	ng Expense	tup or this someone,	1, .		outsia	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
	!					Program Adv	/erti:	sement
<u> </u>		L						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Officeholder name	Office	sought			Office held
	Date	Payee nam	ne					
	05/13/2015	Gloria's M	1idtown					
	Amount (\$)	Payee add	lress; City;	State; Zip	Code			
	\$80.32	2616 Loui	isiana St.					
	!	Suite 100	ı					
	!	Houston,	TX 77006					
	PURPOSE	(a) Category	(See Categories listed at the	e top of this schedule)	(b)	Description		
	OF EXPENDITURE		erage Expense			<u></u>		de of Texas. Complete Schedule T.
	!					Campaign Mo		officeholder living expense
	!					Campaign m	CCu	ny
	Complete ONLY if direct	Candidate/C	Officeholder name	Office	sought			Office held
	expenditure to benefit C/Oh		THIOCHUIG THE THE		3049			Office ricia
	Date	Payee nam						
	04/27/2015	Hanging 7	Tough Foundation					
	Amount (\$)	Payee add	=	State; Zip	Code			
	\$96.00	2019 Cra	wford					
ı		Houston,	TX 77002					
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description		
	OF EXPENDITURE	Event Exp				L		de of Texas. Complete Schedule T.
						Luncheon	, TX,	officeholder living expense
			44.44.000.000.000.000.000.000.000.000.0	enderstanderstanderstanderstanderstanderstanderstanderstanderstanderstanderstanderstanderstanderstanderstanders	***************************************	LUHGHEGH	***************************************	
	Complete ONLY if direct	Candidate/C	Officeholder name	Office	sought			Office held
	expenditure to benefit C/OF		Allicentituer name	Office	Sougrit			Office field

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 5/9 Rpt: 33/45	Robinson, Laurie
4	Date	5 Payee name
	04/27/2015	Hanging Tough Foundation
6	Amount (\$) \$96.00	7 Payee address; City; State; Zip Code 2019 Crawford Houston, TX 77002
<u>_</u>		
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Luncheon
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	03/07/2015	Harry's Restaurant
	Amount (\$) \$32.00	Payee address; City; State; Zip Code 318 Taum
	PURPOCE	Houston, TX 77006
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/16/2015	Harry's Restaurant
	Amount (\$) \$44.43	Payee address; City; State; Zip Code 318 Taum
		Houston, TX 77006
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Meeting
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

		The Instruction Guide explains how to com	plete this form.		
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID	
	Sch: 6/9 Rpt: 34/45	Robinson, Laurie			
4	Date	5 Payee name			
	03/14/2015	Harry's Restaurant			
6	Amount (\$)	7 Payee address; City; State; Zip Code	9		
	\$44.63	318 Taum			
		Houston, TX 77006			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description		
	OF EXPENDITURE	Food/Beverage Expense	المسبا	outside of Texas. Complete Schedule T. TX, officeholder living expense	
			Campaign Me		
				-	
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held	
	expenditure to benefit C/OI	1			
	Date	Payee name			
	06/15/2015	Hilton Post Oak			
_	Amount (\$)	Payee address; City; State; Zip Code	9		
	\$26.00	2001 Post Oak Blvd.			
		Houston, TX 77056			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description		
	OF EXPENDITURE	Food/Beverage Expense	l	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
			Campaign Me		
				-	
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held	
	expenditure to benefit C/OI	1			
	Date	Payee name			
	03/30/2015	La Madelines			
	Amount (\$)	Payee address; City; State; Zip Code	9		
	\$6.48	2047-A West Gray			
		Houston, TX 77019			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description		
	OF EXPENDITURE	Food/Beverage Expense		outside of Texas. Complete Schedule T. , TX, officeholder living expense	
			Campaign Mo		*************
			. 5	-	
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held	
	expenditure to benefit C/OI	1			

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candida/Officebolder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Legal Services The Instruction Guide explain		ages/Contract Lab		OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2 FILER NAME		***************************************		3	Filer ID		
	Sch: 7/9 Rpt: 35/45	Robinson, L							
Ļ						L			
4	Date	5 Payee name							
	03/06/2015	Le Peep Re	estaurant						
6	Amount (\$)	7 Payee addre	ss; City; Stat	te; Zip Cod	le				
	\$31.09	5750 Wood		•					
			····ay						
	!								
		Houston, T	X 77057						
8	PURPOSE	(a) Category (Si	ee Categories listed at the top of this s	schedule)	(b) Description	on			
	OF EXPENDITURE	i e	rage Expense				ide of Texas. Complete Schedule T.		
	EXPENDITURE		wat	1	-		, officeholder living expense		
	!			1	Campaig	gn Meet	ing		
	!			[
9	Complete ONLY if direct	Candidate/Offi	iceholder name	Office soug	ht		Office held		
ľ	expenditure to benefit C/Ol		CCHOICE LIQUE	- Unioc Jour	111		Office field		
	Date	Payee name							
	03/03/2015	Lykes, Kathleen (Ms.)							
\vdash	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,000.00	3807 Sweet Gum Hill							
	ΦΤ,000.00	SOU! SWEE	t Guin miii						
	ļ								
	!	Kingwood,	TX 77345						
\vdash	PURPOSE	(a) Category (c	ee Categories listed at the top of this s		(b) Description	nn .			
	OF	i		chedule)			ide of Texas. Complete Schedule T.		
	EXPENDITURE	Consulting	Expense		<u></u>	Check if Austin, TX, officeholder living expense			
				1	Complia		, officeroads, noing disperses		
	!				~~	1100			
<u> </u>	= 1 · 0.000 V is all as at	2 11 1 to 10#	4.4		* :				
	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office soug	ht		Office held		
	Experience to benefit e. c.								
	Date	Payee name					The second secon		
	04/20/2015	Lykes, Kath							
<u> </u>									
	Amount (\$)	Payee addre	•	te; Zip Coc	ie				
	\$1,000.00	3807 Sweet	t Gum Hill						
	!								
	!	Kingwood, ⁻	TX 77345						
<u> </u>									
	PURPOSE OF		ee Categories listed at the top of this s	chedule)	(b) Description				
	EXPENDITURE	Consulting	Expense		Li		ide of Texas. Complete Schedule T.		
				1	Id		, officeholder living expense		
	!				Complia	nce			
	!			Ī					
Г	Complete ONLY if direct		iceholder name	Office soug	ht		Office held		
	expenditure to benefit C/OF	4							
<u> </u>									

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 8/9 Rpt: 36/45 Robinson, Laurie 4 Date 5 Payee name 05/16/2015 Lykes, Kathleen (Ms.) Payee address; Amount (\$) State; Zip Code 3807 Sweet Gum Hill \$1,000.00 Kingwood, TX 77345 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Compliance Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 03/30/2015 NAACP Amount (\$) Payee address; City; State; Zip Code \$30.00 401 Present Missouri City, TX 77489 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership Fee Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 03/01/2015 NGP Softward Amount (\$) Payee address; City; State; Zip Code \$300.00 1101 15st., NW Washington, DC 20005 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Database Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Legal Services

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

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

Travel Out of District

OTHER (enter a category not listed above)

L	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:			3 Filer ID				
_	Sch: 9/9 Rpt: 37/45	Robinson, Laurie						
4	Date 02/18/2015	5 Payee name USPS						
6	Amount (\$)	7 Payee address; City; State; Zip Co	nde					
	\$56.00	1900 West Gray						
		Houston, TX 77291						
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	EXPENDITURE	PO Box Rental		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
			'	PO Box Rental				
9	Complete ONLY if direct	Candidate/Officeholder-name Office sou	ght	Office held				
	expenditure to benefit C/OF	1						
	Date	Payee name						
	02/25/2015	West, Andrew (Mr.)						
	Amount (\$)	Payee address; City; State; Zip Co	de					
	\$50.00	1023 Pinemont						
	Houston, TX 77091							
								
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T				
	1	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	OF			Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Consulting Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct	Consulting Expense Candidate/Officeholder name Office sou		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Consulting Expense Candidate/Officeholder name Office sou		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate	Consulting Expense Candidate/Officeholder name Office sou Payee name		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/01/2015	Consulting Expense Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.)	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/01/2015 Amount (\$)	Consulting Expense Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/01/2015	Consulting Expense Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.)	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/01/2015 Amount (\$)	Consulting Expense Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/01/2015 Amount (\$) \$100.00	Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091	ight ode	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00 PURPOSE OF	Candidate/Officeholder name Candidate/Officeholder name Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091 (a) Category (see Categories listed at the top of this schedule)	ight ode	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00	Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00 PURPOSE OF	Candidate/Officeholder name Candidate/Officeholder name Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091 (a) Category (see Categories listed at the top of this schedule)	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held Description Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Candidate/Officeholder name Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091 (a) Category (See Categories listed at the top of this schedule) Consulting Expense	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00 PURPOSE OF	Candidate/Officeholder name Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sou	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sou	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 03/01/2015 Amount (\$) \$100.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Candidate/Officeholder name Office sou Payee name West, Andrew (Mr.) Payee address; City; State; Zip Co 1023 Pinemont Houston, TX 77091 (a) Category (See Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sou	ght (b)	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Logo Design				

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

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

Candidate/Officeholder/Politica	al Committee Legal Services Salarie The Instruction Guide explains how to	S/Wages/Contract Labor OTHER (enter a category not listed above) complete this form.					
1 Total pages Schedule G:	2 FILER NAME	3 Filer ID					
Sch: 1/8 Rpt: 38/45	Robinson, Laurie						
4 Date	5 Payee name						
03/11/2015	Amegy Bank						
6 Amount (\$)	7 Payee address; City; State; Zip	Code					
\$100.00	P.O. Box 27459						
Reimbursement from							
political contributions intended	Houston, TX 77227						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.					
OF EXPENDITURE	Accounting/Banking	Check if Austin, TX, officeholder living expense					
		Fee					
Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office held					
С/ОН							
Date	Payee name						
02/03/2015	Amegy Bank						
Amount (\$)	Payee address; City; State; Zip	Code					
\$19.95	P.O. Box 27459						
Reimbursement from							
political contributions intended	Houston, TX 77227						
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.					
OF EXPENDITURE	Accounting/Banking	Check if Austin, TX, officeholder living expense					
		Fee					
Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office held					
C/OH							
Date	T Payes name						
02/03/2015	Payee name Amegy Bank						
Amount (\$) \$25.00	Payee address; City; State; Zip Code P.O. Box 27459						
•	P.O. Box 27459						
Reimbursement from political contributions intended	Houston, TX 77227						
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.					
OF	Accounting/Banking	Check if Austin, TX, officeholder living expense					
EXPENDITURE	,	Fee					
Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held					
expenditure to benefit C/OH							
C/Un							

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

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

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

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule G:	2 FILER NAME			3 Filer ID		
	Sch: 2/8 Rpt: 39/45		Robinson, Laurie				
4	Date	5 Payee name					
	02/03/2015		Amegy Bank				
6	Amount (\$)	7	Payee address; City; State; Zip C	ode			
	\$8.00		P.O. Box 27459				
	Reimbursement from political contributions intended		Houston, TX 77227				
8	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE		Accounting/Banking		Check if Austin, TX, officeholder living expense		
				Monthly Mainten	ance Fee		
L							
9	Complete ONLY if direct expenditure to benefit	Ca	ndidate/Officeholder name	Office sought	Office held		
	C/OH						
F	Date	T	D				
	06/27/2015		Payee name Aunt Bea's				
<u> </u>		L					
	Amount (\$)		Payee address; City; State; Zip C	ode			
	\$130.00		5422 North Frwy.				
	Reimbursement from political contributions intended	Houston, TX 77076					
PURPOSE Category (See Categories listed at the top of this schedule) OF EXPENDITURE FOOd/Beverage Expense			Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.		
			Food/Beverage Expense	Check if Austin, TX, officeholder living expense			
				Catering for Ever	nt		
		L_					
Complete <u>ONLY</u> if direct Candidate/Officeholder name expenditure to benefit			ndidate/Officeholder name	Office sought	Office held		
	C/OH						
=	Data	<u> </u>					
	Date 03/23/2015		Payee name Carroll Printing & Promotions				
L			-				
	Amount (\$)		Payee address; City; State; Zip C	ode			
	\$481.71		2907 Canal St.				
	Reimbursement from political contributions intended		Houston, TX 77003				
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description [Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE		Advertising Expense	L	Check if Austin, TX, officeholder living expense		
				Campaign Letter	head and Envelopes		
	Complete ONLY if direct	<u></u>	ndidate/Officeholder name	Office annuals	O#: b-1J		
	expenditure to benefit	uai	idioate/Onicenduel Hame	Office sought	Office held		
	C/OH						

SCHEDULE G

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense
Contributions/ Donations Made By -Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 3/8 Rpt: 40/45 Robinson, Laurie Date 4 Payee name 03/19/2015 Center for Houston's Future Payee address; City; State; Zip Code 6 Amount (\$) \$150.00 1200 Smith St. Suite 1150 Reimbursement from political contributions Houston, TX 77002 intended **PURPOSE** Check if travel outside of Texas. Complete Schedule T. (b) Description 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Table for Event Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Pavee name 06/27/2015 Communication Workers of America Payee address; State; Zip Code Amount (\$) City; 1730 Jefferson \$150.00 Reimbursement from political contributions Houston, TX 77002 intended **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Description Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Room Rental Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/09/2015 Costco Payee address; Amount (\$) State; Zip Code City; \$55.00 3836 Richmond Reimbursement from political contributions intended Houston, TX 77027 **PURPOSE** Description Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Food for fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Travel Out of District Printing Expense Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 4/8 Rpt: 41/45 Robinson, Laurie Date Payee name 03/28/2015 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$150.00 P.O. Box 785 Reimbursement from political contributions intended Richmond, TX 77406 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Seats for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/10/2015 Fort Bend County Ministers Coalition Amount (\$) Payee address; City; State; Zip Code \$50.00 401 Present St. Reimbursement from political contributions intended Missouri City, TX 77489 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Table for Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/24/2015 Gloria's Midtown Amount (\$) Payee address; City; State; Zip Code \$59.43 2616 Louisiana St. Suite 100 Reimbursement from political contributions intended Houston, TX 77006 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Campaign Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID Total pages Schedule G: Sch: 5/8 Rpt: 42/45 Robinson, Laurie Date 5 Payee name 04/16/2015 Hilton 6 Amount (\$) Payee address; State; Zip Code City; \$12.99 1600 Lamar St. Reimbursement from political contributions Houston, TX 77010 intended **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Travel In District **EXPENDITURE** Parking Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/27/2015 La Madelines Payee address; Amount (\$) City; State: Zip Code \$17.93 2047-A West Gray Reimbursement from political contributions intended Houston, TX 77019 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Campaign Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/14/2015 Luby's Amount (\$) Payee address; City; State; Zip Code \$77.79 7933 Veterans Memorial Dr. Reimbursement from political contributions intended Houston, TX 77088 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Volunteer Campaign Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 6/8 Rpt: 43/45 Robinson, Laurie Date Payee name 06/04/2015 Lucille's Amount (\$) Payee address; City; State; Zip Code \$195.00 5512 La Branch Reimbursement from political contributions Houston, TX 77004 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Event Expense **EXPENDITURE** Women's event-Table Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2015 NGP Software Amount (\$) Payee address; City; State; Zip Code \$750.00 1101 15st., NW Reimbursement from political contributions Washington, DC 20005 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Consulting Expense **EXPENDITURE** Website Design Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/25/2015 **ROAD Women** Amount (\$) Payee address; City; State; Zip Code \$150.00 P.O. Box 22678 Reimbursement from political contributions intended Houston, TX 77227 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** 2 seats for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office C Food/Beverage Expense Polling I Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Overhead/Rental Expense Expense Expense s/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 7/8 Rpt: 44/45	2 FILER NAME Robinson, Laurie		3 Filer ID
4	Date 04/25/2015	5 Payee name ROAD Women		
6	Amount (\$) \$40.00 Reimbursement from political contributions intended	7 Payee address; City; State; Zip C P.O. Box 22678 Houston, TX 77227	Code	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 06/27/2015	Payee name Starbucks		
	Amount (\$) \$135.00 Reimbursement from political contributions intended	Payee address; City; State; Zip C 2050 W. Gray Houston, TX 77019	Code	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Catering for even	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 03/28/2015	Payee name Texas Democratic Women of Harris County		
	Amount (\$) \$50.00 Reimbursement from political contributions	Payee address; City; State; Zip (766 Thornbush	Code	
	PURPOSE	Houston, TX 77079 Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
-21-1	OF EXPENDITURE	Event Expense	Table Event	Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit	 Candidate/Officeholder name	Office sought	Office held

SCHEDULE G

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expense Printing Expense Salaries/Wages/Contract La	ibor (Travel in District Travel Out of District DTHER (enter a category not listed above)	
			The Instruction Guide expla	ains how to complete this for	m.		
1		2 FILER NAM	ΛE		3 F	iler ID	
	Sch: 8/8 Rpt: 45/45	Robinson,	, Laurie				
4	Date	5 Payee nam	ie		L		
	03/28/2015	1	mocratic Women of Harris	s County			
6	Amount (\$)	7 Payee addr	ress; City; Si	tate; Zip Code			
	\$25.00	766 Thorn		,			
	Reimbursement from political contributions intended	Houston, ⁻					
8	PURPOSE	(a) Category	(See Categories listed at the top of this	s schedule) (b) Descripti	on Che	ck if travel outside of Texas. Complete Sche	dule T.
	OF EXPENDITURE	Advertisin	g Expense			ck if Austin, TX, officeholder living expense	
	_			Ad in Progra	am		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Offic	eholder name	Office sou	ıght	Office held	

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