CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

CAMI AIGHT IN	ANOL ILLI OILI				OO	VER OHEEL 1 O 1
The C/OH Instruction	n Guide explains how to com	plete this form	1 Filer ID(Et	thics Comm	nission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFF	ICE USE ONLY
OFFICEHOLDER	Mr.	Greg			Date Received	t
NAME	NICKNAME	LAST	SUFFIX		10/26/2015	
		Travis				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY	; STATE; ZIP C	CODE		
OFFICEHOLDER	800 Wilcrest, Suite 350					
MAILING					Date Hand-deliver	red or Date Postmarked
ADDRESS	Houston TX 77042					
Change of address	ADEA CODE	DUONE NUMBER	EVERNOION			
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713) 626-0001					
PHONE	MS/MRS/MR	FIRST	MI		.	1.
6 CAMPAIGN	INIS/INIKS/INIK	FIRST	IVII		Receipt #	Amount
TREASURER	Mr.	Chase			Date Processe	ed
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
		Zalman				
7 CAMPAIGN	STREET ADDRESS (No PO Box Pleas	se);	APT/SUITE #;	<u> </u>	CITY; STATE;	ZIP CODE
TREASURER	7950 Westheimer					
ADDRESS						
(Business)	Houston TX 77063					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION	-		
TREASURER PHONE	(713) 781-7171					
9 REPORT TYPE	January 15 30th day before	ore election Fina	al repport (Attach C/OH	H - FR)	Exceeded \$500 limit	
9 REPORT TIPE	July 15 X 8th day befor	re election Run	noff		15th day after campaign	n treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month	Day Year
COVERED	9/25/2015		THROUGH		10/2	24/2015
11 ELECTION	ELECTION DATE	ELECTION	N TYPE			
	Month Day Year			_		П
	11/3/2015	Primary	Ru	unoff	X General	Special
12 OFFICE	OFFICE HELD (if any)		13 ^{OI}	FFICE SOUGH	HT (if known)	
			С	ity Coun	cil - District G	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Greg	Travis		15 Filer ID (Ethics Co	ommission Filers)
	expenditures may have	political contributions accepted or political expenditure been made without the candidate's or officeholder's k receive notice of such expenditures.		
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME		
FROM				
POLITICAL	GENERAL	COMMITTEE ADDRESS		
COMMITTEE(S)				
	SPECIFIC			
	_			
		COMMITTEE CAMPAIGN TREASURER NAME		
additional pages	pages COMMITTEE CAMPAIGN TREASURER ADDRESS			
			(07) 50 7) 100	
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS NS, OR GUARANTEES OF LOANS), UN		\$0.00
1017(20				4 0.00
	2 TOTAL POLITIC	AL CONTRIBUTIONS		\$7,201.01
	(OTHER THAN F	PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	,
EXPENDITURE	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS	S, UNLESS ITEMIZED	
TOTALS				\$0.00
	4 TOTAL POLITIC	AL EXPENDITURES		
		, <u> </u>		\$105,504.88
	5 TOTAL BOLITIC	AL CONTRIBUTIONS MAINTAINED AS	OF THE LAST DAY	
CONTRIBUTION BALANCE	5 TOTAL POLITIC OF REPORTING		OF THE LAST DAY	\$12,350.33
OUTSTANDING LOAN TOTALS	0	AL AMOUNT OF ALL OUTSTANDING L HE REPORTING PERIOD	OANS AS OF THE	\$76,000.00
TOTALS				Ψ7 0,000.00
18 AFFIDAVIT				
10 AFFIDAVII		Lauren	- (Construction of the contraction of	that the accessor and a
		report is tru	affirm, under penalty of perjury e and correct and includes all i	nformation required to be
		reported by	me under Title 15, Election Co	de.
			O T	_
			Greg Travi	
			Signature of Candidate	or Officeholder
AFFIX NOT STAMP / SE	EAL ABOVE			
Sworn to and subscribed	before me, by the said	·	, this the	day
of	, 20	, to certify which, witness my	y hand and seal of office.	
Signature of officer admi	nistering oath	Print name of officer administering	g oath Title of office	cer administering oath

SUBTOTALS - COH FORM C/OH **COVER SHEET PG 3** 19 FILER NAME Greg Travis 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. 7201.01 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 0 2. SCHEDULE B: PLEDGED CONTRIBUTIONS 3. SCHEDULE E: LOANS 10000 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. 55673.68 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. 0 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS 0 SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD 8. 0 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. 49831.2 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. 0 SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS 0 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER 0 12.

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

FORM C/OH ADDENDUM

C/OH NAME Greg Travis

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	3	SCHEDULE A1
The	ne Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:
2 F	ILER NAME (Greg Travis	3 Filer ID (Ethics Commission filers)		
4 Date 5 Full name of contributor		5 Full name of contributor	out of state F	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Bennett Williams	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/5/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77077	101.01
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Steve Finkelman	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	9/27/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	250
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Scope Imports	Litions)
4	Date	5 Full name of contributor Dan Silvestri	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/6/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77055	1000
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruction Silvestri Investments	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction G	uide explains how to comple	1 Total Pages Schedule A1:		
2 F	FILER NAME G	Greg Travis			3 Filer ID (Ethics Commission filers)
	,	Jim Ainsworth			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/13/2015		Houston	TX 77025	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Bruce Nichols	Ш		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/14/2015		Houston	TX 77024	100
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Suzanne Page-Pryde	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/25/2015		Houston	TX 77056	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
•		Al Davis	Ш	,	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/23/2015		Houston	TX 77079	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	retired			n/a	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	7 Amount of contributions (\$\dag{\theta}\)
		John Jackson			7 Amount of contributions (\$)

M	ONETARY	POLITICAL CONTR	SCHEDULE A1		
Th	e Instruction G	uide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME O	Greg Travis			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	10/23/2015		Houston	TX 77024	150
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Houston Westside PAC			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/23/2015		Houston	TX 77242	250
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		IEC Texas Gulf Coast PAC	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/14/2015		Houston	TX 77007	500
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Bob Jones	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/14/2015		Houston	TX 77079	1000
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	engineer			Jones Engineering Solu	tions

M	ONETAR	Y POLITICAL CONT	TRIBUTION	IS	SCHEDULE A1
Th	e Instruction	Guide explains how to compl	1 Total Pages Schedule A1:		
2 I	FILER NAME	Greg Travis			3 Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor Brad Fish	out of state	PAC(ID#)	7 Amount of contributions (\$)
	10/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77061	2500
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruction Sullair	etions)
4	Date	5 Full name of contributor Steve Finkelman	out of state	PAC(ID#)	7 Amount of contributions (\$)
	10/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77096	500
8	Principal oc		1	9 Employer (See Instruc	I tions)
	CFO			Scope Imports	
4	Date	5 Full name of contributor HOME-PAC	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/24/2015		Houston	TX 77064	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	L ptions)
\vdash		ATTACH ADDIT	IONAL COPIES	OF THIS SCHEDUL	E AS NEEDED
		If contributor is out-of-state F	PAC, please see in	struction guide for addition	onal reporting requirements

LC	ANS						SCHEDULE E
	The Instruction Guide explains how to complete this form.					1	Total Pages Schedule E:
2 FI	FILER NAME Greg Travis					3	Filer ID (Ethics Commission filers)
4	TOTAL (OF UNITEMIZED LOANS:	=> => => =	=> => =	>		
5	Date of loan	7 Name of lender	out of state PAC(II	D#)			
		Greg Travis				9	Loan Amount (\$)
	10/23/2015						10,000.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77042		0.00%
	Institution?					11	Maturity date
	No						10/23/2099
12	Principal occu	upation / Job title (See Instru	ctions)	13 Empl	oyer (See Instr	uction	ns)
	attorney			Travis La	aw Firm		
14	Description o	f collateral		15	Check if perso (See instruction		funds were deposited into political account
	none			X	- (Occ mondon	5110)	
16	GUARANTOR	17 Name of guarantor		-		19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code	1	
	not applicable						
20	Principal Occu	pation		21 Emp	loyer		
		ATTACH ADDITION	NAL COPIES OF	THIS SC	HEDULE A	S NE	EDED
		If lender is out-of-state PAC, p	lease see instruction	guide for	additional rep	ortin	g requirements

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

I IXOM I OLITIOAL	oom nom		
	The Instruction Guide ex	xplains how to complete this form	l.
1 Total pages Schedule F1:	² FILER NAME Greg Travis		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/27/2015	Democracy Engine		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
9.57	2125 14th St NW		
	Washington DC 20009		
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
	Accounting/Banking	Online contribution	fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
experience to benefit 6/011			
4 Date	5 Payee name		
9/25/2015	Kim Jessup		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	5221A Inker St		
	Houston TX 77007		
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
	Consulting Expense	Grassroots work	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	ffice held
4 Date	5 Payee name		
9/25/2015	Jennifer Naedler		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3000	PO Box 41964		
	Houston TX 77241		
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 Greg Travis Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fundraising, compliance, strategy Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 9/25/2015 Neumann & Assoc 7 Payee address; 6 Amount (\$) Zip Code City; State; 1002 Pauline 5906.51 Bellaire TX 77401 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense printing **Printing 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 exp	plains how to complete this form.	
1 Total pages Schedule F1:	² FILER NAME Greg Travis	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/25/2015	Kathleen Osbourne		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500	201 Vanderpool, #25		
	Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Salaries/Wages/Contract	Campaign work	
	Labor		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought offi	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
9/25/2015	Phil Owens		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2000	10231 Glenfield Park Ln		
	Houston TX 77070		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Consulting Expense	Grassroots work	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought offi	ce held
oxportations to portain 6, 611			
4 Date	5 Payee name		
9/25/2015	Barrage		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
10350	823 Congress Avenue, #1300		
	Austin TX 78701		
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 Greg Travis Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Grassroots 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 9/30/2015 Prosperity Bank 7 Payee address; 6 Amount (\$) City; Zip Code State; 5.95 12602 Memorial Dr Houston TX 77024 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense fee Accounting/Banking 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 Greg Travis	3	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
9/25/2015	Prosperity Bank		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
20	12602 Memorial Dr		
	Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Accounting/Banking	fee	
	January G. 11		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought offi	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/1/2015	Prosperity Bank		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
10	12602 Memorial Dr		
	Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Texa	as, complete Schedule T
		Check if Austin, TX, officehold	der living expense
	Accounting/Banking	fee	
	January G. Tarabara		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought offi	ce held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/1/2015	Griffin & Associates		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1000	815-A Brazos Street #691		
	Austin TX 78701		
8 PURPOSE OF EXPENDITURE		(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 Greg Travis Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Expense internet services 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/9/2015 Neumann & Assoc 7 Payee address; 6 Amount (\$) Zip Code City; State; 1002 Pauline 17199.18 Bellaire TX 77401 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense printing **Printing 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 exp	plains how to complete this form.
1 Total pages Schedule F1:	² FILER NAME Greg Travis	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name	
10/14/2015	Spring Branch Republicans	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
3000	2315 Rosefield Dr	
	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
	Contributions/Donations	contribution
	Made By	
	Candidate/Officeholder/Political Committee	
9 Complete ONLY if direct	Candidate / Officehoder name o	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
10/22/2015	Prosperity Bank	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
20	12602 Memorial Dr	
	Houston TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
	Accounting/Banking	fee
	3 3	
9 Complete ONLY if direct	Candidate / Officehoder name o	office sought office held
expendituree to benefit C/OH		
4 Date	5 Payee name	
10/22/2015	Barrage	
6 Amount (\$)	7 Payee address; City;	State; Zip Code
6000	823 Congress Avenue, #1300	
	Austin TX 78701	
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 Greg Travis Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Grassroots 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 10/14/2015 **Democracy Engine** 7 Payee address; 6 Amount (\$) Zip Code City; State; 2125 14th St NW 41.68 Washington DC 20009 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online contribution fees Accounting/Banking 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 Greg Travis		3 Filer ID (Ethics Commission filers)		
4 Date	5 Payee name				
10/22/2015	Democracy Engine				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
13.52	2125 14th St NW				
	Washington DC 20009				
8 PURPOSE OF EXPENDITURE	(a) Category Accounting/Banking	(b) Description Check if travel outside of Text Check if Austin, TX, officeho Online contribution	lder living expense		
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Deffice sought of	fice held		
4 Date	5 Payee name				
10/23/2015	Alexander's Fine Portraits				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
703.63	312 Birdsall St				
	Houston TX 77007	1			
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Te: Check if Austin, TX, officeho photography			
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held		
4 Date	5 Payee name				
10/23/2015	Neumann & Assoc				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
4529.69	1002 Pauline				
	Bellaire TX 77401	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 Greg Travis Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** printing 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/23/2015 **ROI** Marketing 7 Payee address; 6 Amount (\$) City; Zip Code State; 717 Dartmouth Lane 845 Deer Park TX 77536 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense printing **Printing Expense** 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 Greg Travis 4 Date 5 Payee name 10/24/2015 **Democracy Engine 6** Amount (\$) 7 Payee address; State; Zip Code City; 2125 14th St NW 18.95 Washington DC 20009 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Accounting/Banking Online contribution fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES SCHEDULE G MADE FROM PERSONAL FUNDS The Instruction Guide explains how to complete this form. 3 FilerID (Ethics Commission filers) 1 Total Pages Schedule G: 2 FILER NAME Greg Travis 4 Date 5 Payee name 10/11/2015 Spectrum 6 Amount (\$) 7 Payee Address; City; State: Zip Code 18560 95 Eddy Road, #101 Manchest NΗ *03102 er X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Printing Expense printing **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 10/23/2015 Barrage 7 Payee Address; 6 Amount (\$) City; State; Zip Code 823 Congress, #1300 TX 78701 9448.5 Austin X Reimbursement from political contributions intended 8 (a) Category (b) Description **PURPOSE OF** Consulting Expense grassroots work **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 Office held expenditure to benefit C/OH 4 Date 5 Payee name 10/1/2015 Spectrum 6 Amount (\$) 7 Payee Address; City; State: Zip Code 95 Eddy Road, #101 8553.32 Manchest NH *03102 er X Reimbursement from political contributions intended

	POLITICAL EXP	ENDITURES	SCHEDULE G				
	MADE FROM PE	ERSONAL FUNDS					
	The Instruction Guide explains how to complete this form.						
1	Total Pages Schedule G:	² FILER NAME Greg Travis	3 FilerID (Ethics Commission filers)				
8		(a) Category	(b) Description				
	PURPOSE OF EXPENDITURE	Printing Expense	printing				
	EXPENDITORE		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 Office held				
	expenditure to benefit C/OH						
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8		(a) Category	(b) Description				
	PURPOSE OF EXPENDITURE	Printing Expense	printing				
	EXPENDITORE		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 Office held				
	expenditure to benefit C/OH						
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4	Date	5 Payee name					
•	10/3/2015	NationBuilder	01				
ь	Amount (\$)	7 Payee Address;	City; State; Zip Code				
	213	520 S. Grand Ave., 2nd Floor	Los CA 90071 Angeles				
Χ	Reimbursement from		ŭ				
	political contributions						
	intended						
8		(a) Category	(b) Description				
	PURPOSE OF	Advertising Expense	website service				
	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 Office held				
	expenditure to benefit C/OH						

POLITICAL EXE	SCHEDULE G				
The Instruction Guide explains how to complete this form.					
1 Total Pages Schedule G:	² FILER NAME Greg Travis	3 FilerID (Ethics Commission filers)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					