

**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form	1 Filer ID (Ethics Commission filers)	2 Total pages filed:
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3 COMMITTEE NAME	Campaign for Houston	<b>OFFICE USE ONLY</b> Date Received 10/26/2015
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of address	ADDRESS / PO BOX      APT/SUITE #      CITY      STATE      ZIP CODE 10500 Northwest Freeway Suite 212  Houston TX 77092	

5 CAMPAIGN TREASURER NAME	MS/MRS/MR      FIRST      MI Larry      M ----- NICKNAME      LAST      SUFFIX Hicks	Receipt #	Amount
		Date Processed	
		Date Imaged	

6 CAMPAIGN TREASURER'S STREET ADDRESS Business	STREET ADDRESS (NO PO BOX PLEASE);      APT/SUITE #;      CITY;      STATE;      ZIP CODE 10500 Northwest Freeway Suite 212  Houston TX 77092
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7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX;      APT/SUITE #;      CITY;      STATE;      ZIP CODE 10500 Northwest Freeway Suite 212      Houston      TX      77092
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8 CAMPAIGN TREASURER PHONE	AREA CODE      PHONE #      EXTENSION (713)      785-5515
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9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination
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10 PERIOD COVERED	Month    Day    Year      Month    Day    Year 9/25/2015      THROUGH      10/24/2015
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11 ELECTION	ELECTION DATE Month    Day    Year 11/3/2015	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
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**GO TO PAGE 2**

**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**

**FORM SPAC  
COVER SHEET PG 2**

12 COMMITTEE NAME Campaign for Houston	13 Filer ID (Ethics Commission filers)
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<b>14 COMMITTEE PURPOSE</b> (Attached lists on plain paper to complete this report if necessary)  <input type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)  <input checked="" type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)  <input type="checkbox"/> <b>ASSIST</b> (Officeholder)	<input type="checkbox"/> CANDIDATE  <input type="checkbox"/> OFFICEHOLDER  <input checked="" type="checkbox"/> MEASURE	<b>CANDIDATE / OFFICEHOLDER NAME</b>  OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) /  <table style="width:100%;"> <tr> <td style="width:60%;"><b>BALLOT IDENTIFICATION / #</b></td> <td style="width:40%;"><b>ELECTION DATE</b></td> </tr> <tr> <td>Houston Prop 1</td> <td>11/3/2015</td> </tr> </table> <b>DESCRIPTION</b> Houston "Equal Rights" Ordinance	<b>BALLOT IDENTIFICATION / #</b>	<b>ELECTION DATE</b>	Houston Prop 1	11/3/2015
<b>BALLOT IDENTIFICATION / #</b>	<b>ELECTION DATE</b>					
Houston Prop 1	11/3/2015					

<b>15 CONTRIBUTION TOTALS</b>	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2	<b>TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$62,495.00
<b>EXPENDITURE TOTALS</b>	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	<b>TOTAL POLITICAL EXPENDITURES</b>	\$88,195.57
<b>CONTRIBUTION BALANCE</b>	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$2,713.37
<b>OUTSTANDING LOAN TOTALS</b>	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$50,000.00

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Larry M. Hicks

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - SPAC****FORM SPAC  
COVER SHEET PG 3**

17 COMMITTEE NAME Campaign for Houston		18 Filer ID (Ethics Commission filers)
19 SCHEDULE SUBTOTALS		SUBTOTAL
NAME OF SCHEDULE		AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ \$7,245.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ \$55,250.00
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATIONS OR LABOR ORGANIZATION	\$
7.	SCHEDULE E: LOANS	\$
8.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ \$88,195.57
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	David Sheridan					
	6 Contributor address;			City;	State;	Zip Code
09/28/2015			Katy	TX	77494	
						7 Amount of contributions (\$)
						100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Betty Foshee					
	6 Contributor address;			City;	State;	Zip Code
09/28/2015			Houston	TX	77043	
						7 Amount of contributions (\$)
						100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Michael Taggart					
	6 Contributor address;			City;	State;	Zip Code
09/28/2015			HOUSTON	TX	77070	
						7 Amount of contributions (\$)
						200.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Susan Cunningham					
	6 Contributor address;			City;	State;	Zip Code
09/29/2015			Kemah	TX	77565	
						7 Amount of contributions (\$)
						100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME 3 Filer ID (Ethics Commission filers)

	Jason Williams	7 Amount of contributions (\$)
09/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77079	25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	William Walker	
10/01/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	50.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Matthew G Wylie	
10/01/2015	6 Contributor address; City; State; Zip Code Houston TX 77009	50.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Daniel Land	
10/02/2015	6 Contributor address; City; State; Zip Code Houston TX 77062	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Patricia Jasper	

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/02/2015	6 Contributor address; City; State; Zip Code Houston TX 77062-2827		50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ray Taft	7 Amount of contributions (\$)	
10/14/2015	6 Contributor address; City; State; Zip Code Bacliff TX 77518		25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David P Vrshek	7 Amount of contributions (\$)	
10/03/2015	6 Contributor address; City; State; Zip Code Richmond TX 77469		25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) collin carpenter	7 Amount of contributions (\$)	
10/03/2015	6 Contributor address; City; State; Zip Code texascity TX 77590		25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Donald Kehoe	7 Amount of contributions (\$)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/05/2015	6 Contributor address; City; State; Zip Code Westhampton NY 11978 Beach	7 Amount of contributions (\$) 20.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Peggy Tinsley	7 Amount of contributions (\$)	
10/05/2015	6 Contributor address; City; State; Zip Code Houston TX 77077	25.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Patrick Howard	7 Amount of contributions (\$)	
10/05/2015	6 Contributor address; City; State; Zip Code Houston TX 77079	25.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) W. Weaver	7 Amount of contributions (\$)	
10/05/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Vim Head	7 Amount of contributions (\$)
10/05/2015	6 Contributor address; City; State; Zip Code Katy TX 77493	1,000.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joe Hootman	7 Amount of contributions (\$)
10/06/2015	6 Contributor address; City; State; Zip Code Austin TX 78758	25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mindy Bressert	7 Amount of contributions (\$)
10/06/2015	6 Contributor address; City; State; Zip Code Wylie TX 75098	10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) TriStar Freight	7 Amount of contributions (\$)
10/07/2015	6 Contributor address; City; State; Zip Code Houston TX 77028	2,500.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME 3 Filer ID (Ethics Commission filers)

	Jennifer Haar	7 Amount of contributions (\$)
10/07/2015	6 Contributor address; City; State; Zip Code Katy TX 77494	20.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Dawn Jones	
10/07/2015	6 Contributor address; City; State; Zip Code Sugar Land TX 77498	25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Ilra Jones	
10/07/2015	6 Contributor address; City; State; Zip Code Houston TX 77009	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Eric Crank	
10/07/2015	6 Contributor address; City; State; Zip Code Humble TX 77396	50.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Beverly Roberts	

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/07/2015	6 Contributor address; City; State; Zip Code Houston TX 77079		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor Loyd Wright	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/08/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor Danielle Jacks	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/08/2015	6 Contributor address; City; State; Zip Code Richmond TX 77407		250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor Eric Crank	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/09/2015	6 Contributor address; City; State; Zip Code Humble TX 77396		50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Andrew L Schlafly		
	6 Contributor address; City; State; Zip Code		
10/09/2015	Far Hills	NJ 7931	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Camilia Frisch		
	6 Contributor address; City; State; Zip Code		
10/09/2015	Dayton	TX 77535-0047	10.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	louis Williams		
	6 Contributor address; City; State; Zip Code		
10/10/2015	Houston	TX 77077	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	John Innes		
	6 Contributor address; City; State; Zip Code		
10/11/2015	Houston	TX 77057	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/11/2015	Dayton M. Simpson ----- 6 Contributor address;                      City;                      State;                      Zip Code Missouri City TX 77459	7	Amount of contributions (\$)                      100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/12/2015	David Swienton ----- 6 Contributor address;                      City;                      State;                      Zip Code Spring TX 77379	7	Amount of contributions (\$)                      250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/12/2015	Ralph G Matley ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77043	7	Amount of contributions (\$)                      100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/13/2015	Steve Poling ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77059	7	Amount of contributions (\$)                      25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/11/2015	George Grady ----- 6 Contributor address;                      City;                      State;                      Zip Code Missouri City TX 77459	7	Amount of contributions (\$)                      100.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission filers)	
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77070		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark Staggs	7 Amount of contributions (\$)	
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 7079		50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Yolanda Flores	7 Amount of contributions (\$)	
10/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77009		200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas Valentine	7 Amount of contributions (\$)	
10/14/2015	6 Contributor address; City; State; Zip Code Alexandria VA 22315		10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Alan Smith					
	6 Contributor address; City; State; Zip Code					
10/14/2015			Houston	TX	77010	7 Amount of contributions (\$) 500.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Sandy Forsythe					
	6 Contributor address; City; State; Zip Code					
10/14/2015			The Woodlands	TX	77393	7 Amount of contributions (\$) 100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

**MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION**

**SCHEDULE C1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule C1:
2 FILER NAME		3	Filer ID (Ethics Commission filers)
4	Date	5 Corporation/Labor Organization name	7
		Trinity Equity Partners I, LP	Amount of contribution (\$)
	10/16/2015	6 Corporation/Labor Organization address; City; State Zip Code	50000.00
		Houston TX 77010	
4	Date	5 Corporation/Labor Organization name	7
		Texas Outhouse, Inc.	Amount of contribution (\$)
	10/19/2015	6 Corporation/Labor Organization address; City; State Zip Code	5000.00
		Houston TX 77007	
4	Date	5 Corporation/Labor Organization name	7
		The Education Valet, Inc.	Amount of contribution (\$)
	10/3/2015	6 Corporation/Labor Organization address; City; State Zip Code	250.00
		Houston TX 77044-4920	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/25/2015	<b>5</b> Payee name Cowart & Associates	
<b>6</b> Amount (\$) 6,536.15	<b>7</b> Payee address; City; State; Zip Code 11102 Hidden Bend Dr  Houston TX 77064	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign manager
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/25/2015	<b>5</b> Payee name The Yates Company	
<b>6</b> Amount (\$) 3,676.62	<b>7</b> Payee address; City; State; Zip Code PO Box 75190  Houston TX 77234	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Automated calls
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/29/2015	<b>5</b> Payee name Edward M. Shack, Attorney	
<b>6</b> Amount (\$) 2,000.00	<b>7</b> Payee address; City; State; Zip Code 814 San Jacinto Blvd, Suite 202  Austin TX 78701	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Legal Services	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/29/2015	5 Payee name Sarah Gregg		
6 Amount (\$) 3,500.00	7 Payee address; City; State; Zip Code 5318 Walnut Vista Dr  San Antonio TX 78247		

8 PURPOSE OF EXPENDITURE	(a) Category  Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consultant
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/29/2015	<b>5</b> Payee name Bobby Salazar	
<b>6</b> Amount (\$) 100.00	<b>7</b> Payee address; City; State; Zip Code 13915 Stableridge Ct  Houston TX 77014	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Solicitation/Fundraising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/29/2015	<b>5</b> Payee name Michael Lombardo	
<b>6</b> Amount (\$) 100.00	<b>7</b> Payee address; City; State; Zip Code 6310 Crystal Forest Trl  Katy TX 77493	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Solicitation/Fundraising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/29/2015	<b>5</b> Payee name BlueBonnett Valet Parking	
<b>6</b> Amount (\$) 300.00	<b>7</b> Payee address; City; State; Zip Code 20319 Nellie Gail Trail Lane  Katy TX 77450	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Solicitation/Fundraising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Valet parking
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/30/2015	5 Payee name Culinaire		
6 Amount (\$) 2,062.16	7 Payee address; City; State; Zip Code 3900 Milam  Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category  Solicitation/Fundraising Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Catering
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission filers)
4 Date 10/07/2015	5 Payee name Amy Amy McCance	
6 Amount (\$) 60.50	7 Payee address; City; State; Zip Code 323 29th Place  Manhattan Beach CA 90266	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media ads
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/07/2015	5 Payee name Sams Club	
6 Amount (\$) 817.96	7 Payee address; City; State; Zip Code 12205 West Rd  Houston TX 77065	
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tables/chairs/supplies for HQ grand opening
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/07/2015	5 Payee name Starbucks	
6 Amount (\$) 88.06	7 Payee address; City; State; Zip Code 11200 Northwest Freeway  Houston TX 77092	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Coffee for grand opening
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  10/07/2015	5 Payee name  John Doner & Associates, Inc.		
6 Amount (\$)  2,539.96	7 Payee address; City; State; Zip Code  823 Congress Ave, Suite 1030  Austin TX 78701		

8 PURPOSE OF EXPENDITURE	(a) Category  Solicitation/Fundraising Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor list
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/07/2015	<b>5</b> Payee name Larry M. Hicks, CPA	
<b>6</b> Amount (\$) 1,092.50	<b>7</b> Payee address; City; State; Zip Code 10500 Northwest Freeway, Suite 212  Houston TX 77092	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Accounting/Banking	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and compliance services
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/11/2015	<b>5</b> Payee name Gulf Direct, Inc.	
<b>6</b> Amount (\$) 5,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 142646  Austin TX 78714	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications consultant
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/11/2015	<b>5</b> Payee name Larry M. Hicks, CPA	
<b>6</b> Amount (\$) 835.00	<b>7</b> Payee address; City; State; Zip Code 10500 Northwest Freeway, Suite 212  Houston TX 77092	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Accounting/Banking	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and compliance services
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/11/2015	5 Payee name Sprint 2 Print		
6 Amount (\$) 3,031.00	7 Payee address; City; State; Zip Code 8748 Clay Road, Suite 300  Houston TX 77080		

8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/12/2015	<b>5</b> Payee name Marjorie Marjorie	
<b>6</b> Amount (\$) 2,500.00	<b>7</b> Payee address; City; State; Zip Code 9626 Springview Lane  Houston TX 77080	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer coordinator
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/20/2015	<b>5</b> Payee name 512 New Media Group	
<b>6</b> Amount (\$) 12,700.00	<b>7</b> Payee address; City; State; Zip Code 800 Town & County Blvd, Suite 410  Houston TX 77024	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Video production and social media
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/20/2015	<b>5</b> Payee name Anthem Media Inc.	
<b>6</b> Amount (\$) 32,141.47	<b>7</b> Payee address; City; State; Zip Code 5524 Bee Caves Road, Suite B-5  Austin TX 78746	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense TV ad production and placement
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/20/2015	5 Payee name Larry M. Hicks, CPA		
6 Amount (\$) 271.36	7 Payee address; City; State; Zip Code 10500 Northwest Freeway, Suite 212  Houston TX 77092		

8 PURPOSE OF EXPENDITURE	(a) Category  Accounting/Banking	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting and compliance services
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/20/2015	<b>5</b> Payee name Sprint 2 Print	
<b>6</b> Amount (\$) 922.83	<b>7</b> Payee address; City; State; Zip Code 8748 Clay Road, Suite 300  Houston TX 77080	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Signs
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/20/2015	<b>5</b> Payee name Cowart & Associates	
<b>6</b> Amount (\$) 6,000.00	<b>7</b> Payee address; City; State; Zip Code 11102 Hidden Bend Dr  Houston TX 77064	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Campaign manager
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/23/2015	<b>5</b> Payee name Edward M. Shack, Attorney	
<b>6</b> Amount (\$) 1,920.00	<b>7</b> Payee address; City; State; Zip Code 814 San Jacinto Blvd, Suite 202  Austin TX 78701	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission filers)
	Legal Services	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Legal fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**