

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form		1 Filer ID(Ethics Commission filers)	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST MI Ms. Karla	OFFICE USE ONLY Date Received 10/26/2015	
	NICKNAME LAST SUFFIX Cisneros		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE P.O. Box 8830 Houston TX 77249	Date Hand-delivered or Date Postmarked	
	AREA CODE PHONE NUMBER EXTENSION (713) 861-2244		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 861-2244	Receipt # Amount	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI Ms. Ann	Date Processed	
	NICKNAME LAST SUFFIX Grandich	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Resident or business)	STREET ADDRESS (No PO Box Please); APT/SUITE #; CITY; STATE; ZIP CODE 714 Pecore Houston TX 77009		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 817-7014		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)		
10 PERIOD COVERED	Month Day Year 9/25/2015	THROUGH	Month Day Year 10/24/2015
11 ELECTION	ELECTION DATE Month Day Year 11/3/2015	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) N/A	13 OFFICE SOUGHT (if known) City Council - District H	

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 FILER NAME **Karla Cisneros** 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

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.

COMMITTEE TYPE	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

GENERAL
 SPECIFIC

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$6,110.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$11,789.57
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$5,152.60
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$5,000.00

18 AFFIDAVIT

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.

Karla Cisneros

Signature of Candidate or Officeholder

AFFIX NOT 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

Print name of officer administering oath

Title of officer administering oath

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Karla Cisneros		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	6110
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	
4.	SCHEDULE E: LOANS	5000
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	11789.57
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

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

**FORM C/OH
ADDENDUM**

C/OH NAME Karla Cisneros

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Karla Cisneros			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Valentin Vial	7	Amount of contributions (\$)
	10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		\$1,000.00
8	Principal occupation / Job title (See Instructions) Student		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) David R. Modlin	7	Amount of contributions (\$)
	10/16/2015	6 Contributor address; City; State; Zip Code Spring TX 77386-2075		\$1,500.00
8	Principal occupation / Job title (See Instructions) Vice President		9	Employer (See Instructions) Surge Homes
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Betty Grandich	7	Amount of contributions (\$)
	10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77009		\$1,500.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ann Grandich	7	Amount of contributions (\$)
	10/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77009		\$510.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Law Offices of Jay H. Dushkin
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

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 Karla Cisneros	3 Filer ID (Ethics Commission filers)
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10/7/2015	Margaret Dower ----- 6 Contributor address; City; State; Zip Code Houston TX 77009	7 Amount of contributions (\$) 100.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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9/29/2015	Nancy R. Lomax <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77025-3535	7 Amount of contributions (\$) 200.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10/24/2015	Jeffrey Tapick <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77030	7 Amount of contributions (\$) 1,000.00
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8 Principal occupation / Job title (See Instructions) President and COO	9 Employer (See Instructions) Martin Preferred Foods
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10/12/2015	David Cisneros <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Los Angeles CA 90026	7 Amount of contributions (\$) 300.00
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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

LOANS		SCHEDULE E	
The Instruction Guide explains how to complete this form.		1	Total Pages Schedule E:
2 FILER NAME Karla Cisneros		3	Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: => => => => => =>		5,000.00	
5 Date of loan 10/13/2015	7 Name of lender Karla Cisneros out of state PAC(ID#)	9	Loan Amount (\$) 5,000.00
6 Is Lender a Financial Institution?	8 Lender Address; Houston TX 77009 City; State; Zip Code	10	Interest rate
		11	Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of collateral <input type="checkbox"/> none		15	Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal Occupation		21 Employer	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Karla Cisneros	3 Filer ID (Ethics Commission filers)
4 Date 9/25/2015	5 Payee name Johnston Campaigns	
6 Amount (\$) 1,212.52	7 Payee address; City; State; Zip Code 2978 Rising Tide Lane League City TX 77573	
8 PURPOSE OF EXPENDITURE	(a) Category Printing 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 Mail
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/25/2015	5 Payee name Johnston Campaigns	
6 Amount (\$) 4,650.00	7 Payee address; City; State; Zip Code 2978 Rising Tide Lane League City TX 77573	
8 PURPOSE OF EXPENDITURE	(a) Category Printing 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 Mail
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/14/2015	5 Payee name Johnston Campaigns	
6 Amount (\$) 5,862.52	7 Payee address; City; State; Zip Code 2978 Rising Tide Lane League City TX 77573	
8 PURPOSE OF EXPENDITURE	(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 Karla Cisneros		3 Filer ID (Ethics Commission filers)
	Printing Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/24/2015	5 Payee name Paypal		
6 Amount (\$) 29.30	7 Payee address; City; State; Zip Code 2211 North First St. San Jose CA 95131		

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 Fee
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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.

1 Total pages Schedule F1:	2 FILER NAME Karla Cisneros	3 Filer ID (Ethics Commission filers)
4 Date 10/12/2015	5 Payee name Paypal	
6 Amount (\$) 9.00	7 Payee address; City; State; Zip Code 2211 North First St. San Jose CA 95131	
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 Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/9/2015	5 Payee name Amegy Bank	
6 Amount (\$) 10.00	7 Payee address; City; State; Zip Code 2105 Taylor St. Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/1/2015	5 Payee name Facebook	
6 Amount (\$) 16.23	7 Payee address; City; State; Zip Code 1601 Willow Rd. Menlo Park CA 94025-1452	
8 PURPOSE OF EXPENDITURE	(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 Karla Cisneros		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Advertising
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