

# 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 /<br>OFFICEHOLDER<br>NAME   | MS/MRS/MR   | FIRST                                | MI                                 |
|   | NICKNAME  | LAST                                 | SUFFIX                             |
| Jason   |   | J.                                   |                                    |
| Cisneroz  |   |                                      |                                    |
| <b>OFFICE USE ONLY</b>  |   |                                      |                                    |
| Date Received   |   | 12/4/2015                            |                                    |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS<br><input type="checkbox"/> Change of address | ADDRESS / PO BOX;   | APT/SUITE #;                         | CITY; STATE; ZIP CODE              |
|   | 226 Cavalcade St<br>Houston Texas 77009   |                                      |                                    |
| Date Hand-delivered or Date Postmarked  |   |                                      |                                    |
| 5 CANDIDATE /<br>OFFICEHOLDER<br>PHONE  | AREA CODE   | PHONE NUMBER                         | EXTENSION                          |
| 6 CAMPAIGN<br>TREASURER<br>NAME   | MS/MRS/MR   | FIRST                                | MI                                 |
| Janie   |   |                                      |                                    |
| Reyes   |   |                                      |                                    |
| Receipt #   |   | Amount                               |                                    |
| Date Processed  |   |                                      |                                    |
| Date Imaged   |   |                                      |                                    |
| 7 CAMPAIGN<br>TREASURER<br>ADDRESS<br>(Resident or business)                                      | STREET ADDRESS (No PO Box Please);  |                                      | APT/SUITE #; CITY; STATE; ZIP CODE |
| 512 Highland<br>Houston Texas 77009   |   |                                      |                                    |
| 8 CAMPAIGN<br>TREASURER PHONE   | AREA CODE   | PHONE NUMBER                         | EXTENSION                          |
| 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<br><input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only) |                                      |                                    |
| 10 PERIOD<br>COVERED  | Month    Day    Year  | THROUGH                              | Month    Day    Year               |
| 10/25/2015  |   |                                      | 12/2/2015                          |
| 11 ELECTION   | ELECTION DATE<br>Month    Day    Year   | ELECTION TYPE                        |                                    |
| 12/12/2015  | <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special   |                                      |                                    |
| 12 OFFICE   | OFFICE HELD (if any)  | 13 OFFICE SOUGHT (if known)          |                                    |
| N/A   |   | City Council - District H            |                                    |

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

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

14 FILER NAME Jason J. Cisneroz 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<br><br><input type="checkbox"/> GENERAL<br><br><input type="checkbox"/> SPECIFIC | COMMITTEE NAME                       |
|   | COMMITTEE ADDRESS                    |
|   | COMMITTEE CAMPAIGN TREASURER NAME    |
|   | COMMITTEE CAMPAIGN TREASURER ADDRESS |

|                         |   |  |             |
|-------------------------|---|--|-------------|
| 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)                                  | \$72,140.00 |
| EXPENDITURE TOTALS      | 3 | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED   | \$          |
|                         | 4 | TOTAL POLITICAL EXPENDITURES   | \$67,275.27 |
| CONTRIBUTION BALANCE    | 5 | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD                                    | \$13,686.16 |
| OUTSTANDING LOAN TOTALS | 6 | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                         | \$0.00      |

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.

Jason Cisneroz

\_\_\_\_\_  
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 Jason J. Cisneroz |  | 20 Filer ID (Ethics Commission Filers) |
| 21                              | SCHEDULE SUBTOTALS   | SUBTOTAL                               |
|                                 | NAME OF SCHEDULE   | AMOUNT                                 |
| 1.                              | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      | \$72,140                               |
| 2.                              | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        | \$2,557                                |
| 3.                              | SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$0                                    |
| 4.                              | SCHEDULE E: LOANS  | \$0                                    |
| 5.                              | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                   | \$67,275.27                            |
| 6.                              | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$0                                    |
| 7.                              | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$0                                    |
| 8.                              | SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD                                    | \$0                                    |
| 9.                              | SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$0                                    |
| 10.                             | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$0                                    |
| 11.                             | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS           | \$0                                    |
| 12.                             | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$0                                    |

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

**FORM C/OH  
ADDENDUM**

C/OH NAME Jason J. Cisneroz

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 Jason J. Cisneroz                            |  |  | 3 | Filer ID (Ethics Commission filers)                           |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Zeph Capo        | 7 | Amount of contributions (\$)                                  |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77018-7515                          |   | \$100   |
| 8   | Principal occupation / Job title (See Instructions)<br>Education     |  | 9 | Employer (See Instructions)<br>Houston Federation of Teachers |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Martha Rodriguez | 7 | Amount of contributions (\$)                                  |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77089-2824                          |   | \$25  |
| 8   | Principal occupation / Job title (See Instructions)<br>Administrator |  | 9 | Employer (See Instructions)<br>Houston Fire Department        |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Francisco Fassio | 7 | Amount of contributions (\$)                                  |
|   | 11/16/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77029-2733                          |   | \$100   |
| 8   | Principal occupation / Job title (See Instructions)<br>Retired       |  | 9 | Employer (See Instructions)<br>None                           |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Mary Shultz      | 7 | Amount of contributions (\$)                                  |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77009-4438                          |   | \$35  |
| 8   | Principal occupation / Job title (See Instructions)<br>Retired       |  | 9 | Employer (See Instructions)<br>None                           |
| 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:             |
| 2 FILER NAME Jason J. Cisneroz   |   | 3 Filer ID (Ethics Commission filers)     |                                      |
| 11/18/2015   | Jim Gonzales<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77042-4824          | 7   | Amount of contributions (\$) \$2,500 |
| 8 Principal occupation / Job title (See Instructions)<br>President & CEO |   | 9 Employer (See Instructions)<br>IDC Inc. |                                      |
| 12/2/2015  | Stephanie Caballero<br>-----<br>6 Contributor address; City; State; Zip Code<br>Baltimore MD 21202-4155 | 7   | Amount of contributions (\$) \$50    |
| 8 Principal occupation / Job title (See Instructions)<br>N/A             |   | 9 Employer (See Instructions)<br>N/A      |                                      |
| 12/2/2015  | Georgia Lewis<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77091-5513         | 7   | Amount of contributions (\$) \$100   |
| 8 Principal occupation / Job title (See Instructions)<br>Retired         |   | 9 Employer (See Instructions)<br>None     |                                      |
| 11/17/2015   | Brice Cannaliato<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77037-3435      | 7   | Amount of contributions (\$) \$25    |
| 8 Principal occupation / Job title (See Instructions)<br>Retired         |   | 9 Employer (See Instructions)<br>None     |                                      |
|  | Sylvia Mintz<br>-----<br>6 Contributor address; City; State; Zip Code                                   | 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 Jason J. Cisneroz                                     |   | 3 Filer ID (Ethics Commission filers)              |   |
| 11/18/2015   | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77003-1802  |  | \$100                                   |
| 8 Principal occupation / Job title (See Instructions)<br>Attorney  |   | 9 Employer (See Instructions)<br>Self              |   |
| 4 Date<br>11/30/2015   | 5 Full name of contributor<br>Bobby Singh<br>out of state PAC(ID# )<br>6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77041-6634   | 7  | Amount of contributions (\$)<br>\$1,000 |
| 8 Principal occupation / Job title (See Instructions)<br>Principal |   | 9 Employer (See Instructions)<br>Isani Consultants |   |
| 4 Date<br>11/17/2015   | 5 Full name of contributor<br>Robert Steele<br>out of state PAC(ID# )<br>6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77065-2220 | 7  | Amount of contributions (\$)<br>\$1,000 |
| 8 Principal occupation / Job title (See Instructions)<br>Retired   |   | 9 Employer (See Instructions)<br>None              |   |
| 4 Date<br>11/18/2015   | 5 Full name of contributor<br>Roy Zermano<br>out of state PAC(ID# )<br>6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77013-4220   | 7  | Amount of contributions (\$)<br>\$50    |
| 8 Principal occupation / Job title (See Instructions)<br>Retired   |   | 9 Employer (See Instructions)<br>None              |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |            |   |                                       |                              |
|---|------------|---|---------------------------------------|------------------------------|
| The Instruction Guide explains how to complete this form. |            |   | 1                                     | Total Pages Schedule A1:     |
| 2 FILER NAME Jason J. Cisneroz                            |            |   | 3 Filer ID (Ethics Commission filers) |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>ALSM Consulting LLC | 7                                     | Amount of contributions (\$) |
|   | 11/24/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77013-4220                             |                                       | \$100                        |
| 8 Principal occupation / Job title (See Instructions)     |            |   | 9 Employer (See Instructions)         |                              |
| Business Manager  |            |   | Davis HS                              |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Abel Maldonado      | 7                                     | Amount of contributions (\$) |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77015-1332                             |                                       | \$25                         |
| 8 Principal occupation / Job title (See Instructions)     |            |   | 9 Employer (See Instructions)         |                              |
| Business Manager  |            |   | Davis HS                              |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Rosbel Ramos        | 7                                     | Amount of contributions (\$) |
|   | 12/1/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77059-2842                             |                                       | \$1,000                      |
| 8 Principal occupation / Job title (See Instructions)     |            |   | 9 Employer (See Instructions)         |                              |
| Owner   |            |   | SER Construction Partners LLC         |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Donna Cole          | 7                                     | Amount of contributions (\$) |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77077-1510                             |                                       | \$500                        |
| 8 Principal occupation / Job title (See Instructions)     |            |   | 9 Employer (See Instructions)         |                              |
| Self Employed   |            |   | Cole Chemical & Distributing, Inc.    |                              |
| 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: |
| 2 FILER NAME Jason J. Cisneroz                            |                        |  | 3 Filer ID (Ethics Commission filers)     |                          |
|   | Latino Texas PAC       |  | 7   |                          |
| 11/29/2015  | 6 Contributor address; | City; State; Zip Code  | Amount of contributions (\$)              |                          |
|   |                        | Houston TX 77076-2951  | \$1,000                                   |                          |
| 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# ) | 7   |                          |
|   |                        | Elizabeth Ferrer   | Amount of contributions (\$)              |                          |
| 12/2/2015   | 6 Contributor address; | City; State; Zip Code  |   |                          |
|   |                        | Katy TX 77449-3009   | \$50                                      |                          |
| 8 Principal occupation / Job title (See Instructions)     |                        |  | 9 Employer (See Instructions)             |                          |
| Public Relations  |                        |  | Shriners Hospitals for Children - Houston |                          |
| 4   | Date                   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) | 7   |                          |
|   |                        | Allison Jones  | Amount of contributions (\$)              |                          |
| 11/9/2015   | 6 Contributor address; | City; State; Zip Code  |   |                          |
|   |                        | Houston TX 77008-4219  | \$250                                     |                          |
| 8 Principal occupation / Job title (See Instructions)     |                        |  | 9 Employer (See Instructions)             |                          |
| Attorney  |                        |  | Allison Jones & Associates, P.C.          |                          |
| 4   | Date                   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) | 7   |                          |
|   |                        | Karla Alba   | Amount of contributions (\$)              |                          |
| 11/16/2015  | 6 Contributor address; | City; State; Zip Code  |   |                          |
|   |                        | Channelview TX 77530-2877  | \$100                                     |                          |
| 8 Principal occupation / Job title (See Instructions)     |                        |  | 9 Employer (See Instructions)             |                          |
| None  |                        |  | Student                                   |                          |
| 4   | Date                   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) | 7   |                          |
|   |                        | Raul Dominguez   | 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 Jason J. Cisneroz                                    |   | 3 Filer ID (Ethics Commission filers)                |  |
| 11/23/2015  | 6 Contributor address; City; State; Zip Code<br>Spring TX 77379-6819  |  | \$200                                  |
| 8 Principal occupation / Job title (See Instructions)<br>Director |   | 9 Employer (See Instructions)<br>Concur Technologies |  |
| 11/5/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>HPOU<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77007-7730           |  | 7 Amount of contributions (\$) \$5,000 |
| 8 Principal occupation / Job title (See Instructions)             |   | 9 Employer (See Instructions)                        |  |
| 11/17/2015  | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Benjamin Allen<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77019-5311 |  | 7 Amount of contributions (\$) \$1,000 |
| 8 Principal occupation / Job title (See Instructions)             |   | 9 Employer (See Instructions)                        |  |
| 11/16/2015  | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Gerardo De Leon<br>6 Contributor address; City; State; Zip Code<br>Humble TX 77346-4103 |  | 7 Amount of contributions (\$) \$100   |
| 8 Principal occupation / Job title (See Instructions)<br>Teacher  |   | 9 Employer (See Instructions)<br>Humble isd          |  |
| 11/16/2015  | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Raul Giorgi   |  | 7 Amount of contributions (\$) \$100   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |  |                          |
|--|---|---|--|--------------------------|
| The Instruction Guide explains how to complete this form.                  |   |   | 1  | Total Pages Schedule A1: |
| 2 FILER NAME Jason J. Cisneroz   |   |   | 3 Filer ID (Ethics Commission filers)          |                          |
| 11/23/2015   | 6 Contributor address;<br>The Woodlands         | City;<br>TX                                     | State;<br>77375-4766                           | Zip Code<br>\$25         |
| 8 Principal occupation / Job title (See Instructions)<br>Broker            |   |   | 9 Employer (See Instructions)<br>Self Employed |                          |
| 4 Date<br>11/25/2015   | 5 Full name of contributor<br>Jay Hamburger     | <input type="checkbox"/> out of state PAC(ID# ) | 7 Amount of contributions (\$)<br>\$36         |                          |
|  | 6 Contributor address;<br>Houston               | City;<br>TX                                     | State;<br>77007                                | Zip Code                 |
| 8 Principal occupation / Job title (See Instructions)<br>photog            |   |   | 9 Employer (See Instructions)<br>self          |                          |
| 4 Date<br>11/24/2015   | 5 Full name of contributor<br>Ray Rodriguez     | <input type="checkbox"/> out of state PAC(ID# ) | 7 Amount of contributions (\$)<br>\$500        |                          |
|  | 6 Contributor address;<br>Houston               | City;<br>TX                                     | State;<br>77009-2551                           | Zip Code                 |
| 8 Principal occupation / Job title (See Instructions)<br>Internet Services |   |   | 9 Employer (See Instructions)<br>U-Verse       |                          |
| 4 Date<br>11/30/2015   | 5 Full name of contributor<br>Dan & Jeanine Cox | <input type="checkbox"/> out of state PAC(ID# ) | 7 Amount of contributions (\$)<br>\$25         |                          |
|  | 6 Contributor address;<br>Houston               | City;<br>TX                                     | State;<br>77007-7611                           | Zip Code                 |
| 8 Principal occupation / Job title (See Instructions)<br>Bayshore          |   |   | 9 Employer (See Instructions)<br>Engineer      |                          |

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

|   |            |  |                                       |                              |
|---|------------|--|---------------------------------------|------------------------------|
| The Instruction Guide explains how to complete this form.                         |            |  | 1                                     | Total Pages Schedule A1:     |
| 2 FILER NAME Jason J. Cisneroz  |            |  | 3 Filer ID (Ethics Commission filers) |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Perla Garza      | 7                                     | Amount of contributions (\$) |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77084-6844                          |                                       | \$25                         |
| 8 Principal occupation / Job title (See Instructions)<br>Sales associate          |            | 9 Employer (See Instructions)<br>Kenneth Cole  |                                       |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Patricia Hopkins | 7                                     | Amount of contributions (\$) |
|   | 11/30/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77007-8335                          |                                       | \$200                        |
| 8 Principal occupation / Job title (See Instructions)<br>Barber                   |            | 9 Employer (See Instructions)<br>Self/Retired  |                                       |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Larry Janak      | 7                                     | Amount of contributions (\$) |
|   | 12/1/2015  | 6 Contributor address; City; State; Zip Code<br>Katy TX 77450-3033                             |                                       | \$1,000                      |
| 8 Principal occupation / Job title (See Instructions)<br>Executive Vice President |            | 9 Employer (See Instructions)<br>IDC, Inc  |                                       |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Richard Cortez   | 7                                     | Amount of contributions (\$) |
|   | 11/19/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77007-5044                          |                                       | \$3,000                      |
| 8 Principal occupation / Job title (See Instructions)<br>Owner                    |            | 9 Employer (See Instructions)<br>MCA Communication   |                                       |                              |
| 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:                  |
| 2 FILER NAME Jason J. Cisneroz                                     |   | 3 Filer ID (Ethics Commission filers)                      |   |
| 12/2/2015  | Veronica Avila<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77003-1574   | 7  | Amount of contributions (\$)<br><br>\$25  |
| 8 Principal occupation / Job title (See Instructions)<br>architect |   | 9 Employer (See Instructions)<br>Gensler                   |   |
| 12/2/2015  | Carmen Duron<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77003-2703     | 7  | Amount of contributions (\$)<br><br>\$50  |
| 8 Principal occupation / Job title (See Instructions)<br>Nurse     |   | 9 Employer (See Instructions)<br>Memorial Hermann Hospital |   |
| 11/6/2015  | Jeanette Rash<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77020-2030    | 7  | Amount of contributions (\$)<br><br>\$300 |
| 8 Principal occupation / Job title (See Instructions)<br>President |   | 9 Employer (See Instructions)<br>Zone One Auto             |   |
| 12/2/2015  | Karen Hofmeister<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77019-6069 | 7  | Amount of contributions (\$)<br><br>\$500 |
| 8 Principal occupation / Job title (See Instructions)<br>Writer    |   | 9 Employer (See Instructions)<br>Self-Employed             |   |
|  | Douglas Harrington<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code                        | 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 Jason J. Cisneroz  |   | 3 Filer ID (Ethics Commission filers)                                |                              |
| 11/4/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77014-2867                               |  | \$20                         |
| 8 Principal occupation / Job title (See Instructions)<br>Communication Director |   | 9 Employer (See Instructions)<br>St. Dunstan's Church                |                              |
| 4 Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Lenora Sorola-Pohlman | 7  | Amount of contributions (\$) |
| 11/18/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008                                    |  | \$100                        |
| 8 Principal occupation / Job title (See Instructions)<br>Insurance Broker       |   | 9 Employer (See Instructions)<br>Self Employed                       |                              |
| 4 Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Gustav Kopriva        | 7  | Amount of contributions (\$) |
| 11/18/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008-7033                               |  | \$500                        |
| 8 Principal occupation / Job title (See Instructions)<br>Art Dealer             |   | 9 Employer (See Instructions)<br>Redbud Gallery                      |                              |
| 4 Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Darryl Carter         | 7  | Amount of contributions (\$) |
| 11/19/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77019-4449                               |  | \$500                        |
| 8 Principal occupation / Job title (See Instructions)<br>Attorney               |   | 9 Employer (See Instructions)<br>Linebarger, Goggan, Blair & Sampson |                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |   |  |
|---|---|--|---|--|
| The Instruction Guide explains how to complete this form. |   |  | 1 | Total Pages Schedule A1:                           |
| 2 FILER NAME Jason J. Cisneroz                            |   |  | 3 | Filer ID (Ethics Commission filers)                |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Enrique Loya     | 7 | Amount of contributions (\$)                       |
|   | 12/1/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77024-7023                          |   | \$1,000  |
| 8   | Principal occupation / Job title (See Instructions)<br>Owner          |  | 9 | Employer (See Instructions)<br>OTC Global Holdings |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Roland Zermano   | 7 | Amount of contributions (\$)                       |
|   | 12/1/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77022-5408                          |   | \$100  |
| 8   | Principal occupation / Job title (See Instructions)<br>Letter carrier |  | 9 | Employer (See Instructions)<br>U.S Postal Service  |
| 4   | Date  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>SIMA of Houston  | 7 | Amount of contributions (\$)                       |
|   | 10/25/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77092-7058                          |   | \$250  |
| 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# )<br>Gloria Almogabar | 7 | Amount of contributions (\$)                       |
|   | 11/5/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77009-4901                          |   | \$50   |
| 8   | Principal occupation / Job title (See Instructions)<br>None           |  | 9 | Employer (See Instructions)<br>Retired             |
| 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:                    |
| 2 FILER NAME Jason J. Cisneroz                            |  | 3 Filer ID (Ethics Commission filers) |   |
| 11/18/2015  | Reyes Law Office<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77009-5427   | 7                                     | Amount of contributions (\$)<br><br>\$300   |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |   |
| 11/5/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Marc Holmes<br>-----<br>6 Contributor address; City; State; Zip Code<br>Pearland TX 77581-5255     | 7                                     | Amount of contributions (\$)<br><br>\$50    |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |   |
| 12/2/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Jennifer Ingold<br>-----<br>6 Contributor address; City; State; Zip Code<br>Pearland TX 77581-5255 | 7                                     | Amount of contributions (\$)<br><br>\$25    |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |   |
| 11/17/2015  | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Casey Wallace<br>-----<br>6 Contributor address; City; State; Zip Code<br>Spring TX 77386-2083     | 7                                     | Amount of contributions (\$)<br><br>\$1,000 |
| 8 Principal occupation / Job title (See Instructions)     |  | 9 Employer (See Instructions)         |   |
| 11/17/2015  | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Sylvia Smith   | 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 Jason J. Cisneroz  |   | 3 Filer ID (Ethics Commission filers)                                   |   |
| 10/30/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008-2618 |   | \$2,000                                   |
| 8 Principal occupation / Job title (See Instructions)<br>Registered Nurse |   | 9 Employer (See Instructions)<br>Huntsville Memorial Hospital           |   |
| 4 Date<br>11/16/2015  | 5 Full name of contributor<br>Bob Smith                               | <input type="checkbox"/> out of state PAC(ID# )                         | 7 Amount of contributions (\$)<br>\$2,000 |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008-2618 |   |   |
| 8 Principal occupation / Job title (See Instructions)<br>President        |   | 9 Employer (See Instructions)<br>Geoscience Engineering                 |   |
| 4 Date<br>11/20/2015  | 5 Full name of contributor<br>Jim Palavan                             | <input type="checkbox"/> out of state PAC(ID# )                         | 7 Amount of contributions (\$)<br>\$2,000 |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008-2618 |   |   |
| 8 Principal occupation / Job title (See Instructions)<br>Chair            |   | 9 Employer (See Instructions)<br>Geoscience Engineering & Testing, Inc. |   |
| 4 Date<br>11/24/2015  | 5 Full name of contributor<br>Gwyn Guidy                              | <input type="checkbox"/> out of state PAC(ID# )                         | 7 Amount of contributions (\$)<br>\$250   |
|   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77009-1811 |   |   |
| 8 Principal occupation / Job title (See Instructions)<br>Retired          |   | 9 Employer (See Instructions)<br>Retired                                |   |

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

|   |            |   |                                       |                              |
|---|------------|---|---------------------------------------|------------------------------|
| The Instruction Guide explains how to complete this form.                     |            |   | 1                                     | Total Pages Schedule A1:     |
| 2 FILER NAME Jason J. Cisneroz  |            |   | 3 Filer ID (Ethics Commission filers) |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>David Veiseh  | 7                                     | Amount of contributions (\$) |
|   | 11/17/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77024-6902                       |                                       | \$1,500                      |
| 8 Principal occupation / Job title (See Instructions)<br>Management           |            | 9 Employer (See Instructions)<br>TexpoEnergy  |                                       |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Penny Hankins | 7                                     | Amount of contributions (\$) |
|   | 11/17/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77024-6902                       |                                       | \$1,500                      |
| 8 Principal occupation / Job title (See Instructions)<br>CEO                  |            | 9 Employer (See Instructions)<br>YEP Energy   |                                       |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Joel Rose     | 7                                     | Amount of contributions (\$) |
|   | 11/24/2015 | 6 Contributor address; City; State; Zip Code<br>New York NY 10025-4819                      |                                       | \$100                        |
| 8 Principal occupation / Job title (See Instructions)<br>Education Non-Profit |            | 9 Employer (See Instructions)<br>New Classrooms Innovation Partners                         |                                       |                              |
| 4   | Date       | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Annie Garcia  | 7                                     | Amount of contributions (\$) |
|   | 11/16/2015 | 6 Contributor address; City; State; Zip Code<br>Houston TX 77009                            |                                       | \$14                         |
| 8 Principal occupation / Job title (See Instructions)<br>Cord Blood Collector |            | 9 Employer (See Instructions)<br>MD Anderson  |                                       |                              |
| 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:                    |
| 2 FILER NAME Jason J. Cisneroz                                      |   | 3 Filer ID (Ethics Commission filers)                                 |   |
| 11/7/2015   | Alex Cisneros<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77026-4915   | 7   | Amount of contributions (\$)<br><br>\$1,000 |
| 8 Principal occupation / Job title (See Instructions)<br>Retired    |   | 9 Employer (See Instructions)<br>Retired                              |   |
| 11/17/2015  | Joshua Sanders<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77027-2998  | 7   | Amount of contributions (\$)<br><br>\$1,000 |
| 8 Principal occupation / Job title (See Instructions)<br>Lobbyist   |   | 9 Employer (See Instructions)<br>Hall Attorneys, P.C.                 |   |
| 11/30/2015  | Nancy Furst<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77048-4607     | 7   | Amount of contributions (\$)<br><br>\$100   |
| 8 Principal occupation / Job title (See Instructions)<br>Realtor    |   | 9 Employer (See Instructions)<br>The Furst Group-Real Estate Services |   |
| 11/24/2015  | Chris Canonico<br>-----<br>6 Contributor address; City; State; Zip Code<br>Bellaire TX 77401-4609 | 7   | Amount of contributions (\$)<br><br>\$250   |
| 8 Principal occupation / Job title (See Instructions)<br>Consultant |   | 9 Employer (See Instructions)<br>CDM                                  |   |
|   | Massey Villarreal<br>-----<br>6 Contributor address; City; State; Zip Code                        | 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 Jason J. Cisneroz   |  | 3 Filer ID (Ethics Commission filers)          |   |
| 11/24/2015   | 6 Contributor address; City; State; Zip Code<br>Sugar Land TX 77479-6716   |  | \$1,000                                   |
| 8 Principal occupation / Job title (See Instructions)<br>Self Employed |  | 9 Employer (See Instructions)<br>Self Employed |   |
| 4 Date<br>11/19/2015   | 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# )<br>Texas Working Families PAC<br>6 Contributor address; City; State; Zip Code<br>Baton Rouge LA 70809-5604 |  | 7 Amount of contributions (\$)<br>\$600   |
| 8 Principal occupation / Job title (See Instructions)                  |  | 9 Employer (See Instructions)                  |   |
| 4 Date<br>11/18/2015   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Jessica Hulsey<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77011                                 |  | 7 Amount of contributions (\$)<br>\$100   |
| 8 Principal occupation / Job title (See Instructions)<br>Homemaker     |  | 9 Employer (See Instructions)<br>Self-Employed |   |
| 4 Date<br>11/16/2015   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>HAA Better Government Fund<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77041-2002                |  | 7 Amount of contributions (\$)<br>\$2,500 |
| 8 Principal occupation / Job title (See Instructions)                  |  | 9 Employer (See Instructions)                  |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |                            |
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| The Instruction Guide explains how to complete this form. | 1 Total Pages Schedule A1: |
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|                                |                                       |
|--------------------------------|---------------------------------------|
| 2 FILER NAME Jason J. Cisneroz | 3 Filer ID (Ethics Commission filers) |
|--------------------------------|---------------------------------------|

|           |  |                          |                        |  |  |                                |
|-----------|--|--------------------------|------------------------|--|--|--------------------------------|
| 4 Date    | 5 Full name of contributor                   | <input type="checkbox"/> | out of state PAC(ID# ) |  |  |                                |
|           | David Wells                                  |                          |                        |  |  |                                |
|           | 6 Contributor address; City; State; Zip Code |                          |                        |  |  | 7 Amount of contributions (\$) |
| 11/6/2015 | Houston TX 77022-5558                        |                          |                        |  |  | \$100                          |

|   |   |
|---|---|
| 8 Principal occupation / Job title (See Instructions)<br>Operations Manager | 9 Employer (See Instructions)<br>Houston Transportation Services, LLC |
|---|---|

|            |  |                          |                        |  |  |                                |
|------------|--|--------------------------|------------------------|--|--|--------------------------------|
| 4 Date     | 5 Full name of contributor                   | <input type="checkbox"/> | out of state PAC(ID# ) |  |  |                                |
|            | Waynette Chan                                |                          |                        |  |  |                                |
|            | 6 Contributor address; City; State; Zip Code |                          |                        |  |  | 7 Amount of contributions (\$) |
| 11/16/2015 | Houston TX 77005                             |                          |                        |  |  | \$250                          |

|  |                                       |
|--|---------------------------------------|
| 8 Principal occupation / Job title (See Instructions)<br>Retired | 9 Employer (See Instructions)<br>None |
|--|---------------------------------------|

|            |  |                          |                        |  |  |                                |
|------------|--|--------------------------|------------------------|--|--|--------------------------------|
| 4 Date     | 5 Full name of contributor                   | <input type="checkbox"/> | out of state PAC(ID# ) |  |  |                                |
|            | Jamil Durrani                                |                          |                        |  |  |                                |
|            | 6 Contributor address; City; State; Zip Code |                          |                        |  |  | 7 Amount of contributions (\$) |
| 11/23/2015 | Houston TX 77071-3109                        |                          |                        |  |  | \$1,000                        |

|  |  |
|--|--|
| 8 Principal occupation / Job title (See Instructions)<br>Owner | 9 Employer (See Instructions)<br>JDM Industrial Inc. |
|--|--|

|            |  |                          |                        |  |  |                                |
|------------|--|--------------------------|------------------------|--|--|--------------------------------|
| 4 Date     | 5 Full name of contributor                   | <input type="checkbox"/> | out of state PAC(ID# ) |  |  |                                |
|            | Ali Davali                                   |                          |                        |  |  |                                |
|            | 6 Contributor address; City; State; Zip Code |                          |                        |  |  | 7 Amount of contributions (\$) |
| 11/19/2015 | Houston TX 77257-0427                        |                          |                        |  |  | \$1,000                        |

|  |   |
|--|---|
| 8 Principal occupation / Job title (See Instructions)<br>Owner | 9 Employer (See Instructions)<br>D 6200 LLC |
|--|---|

|        |                            |                          |                        |  |  |  |
|--------|----------------------------|--------------------------|------------------------|--|--|--|
| 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:                    |
| 2 FILER NAME Jason J. Cisneroz                                   |   |   | 3 | Filer ID (Ethics Commission filers)         |
| 12/1/2015  | Phung Quach<br>6 Contributor address;<br>City; State; Zip Code<br>Meadows Place TX 77477-2257                           |   | 7 | Amount of contributions (\$)<br><br>\$2,500 |
| 8 Principal occupation / Job title (See Instructions)<br>Owner   |   | 9 Employer (See Instructions)<br>Mama Supermarket                             |   |   |
| 11/18/2015   | Carla Hulse<br>5 Full name of contributor<br>6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77011-1028   | <input type="checkbox"/> out of state PAC(ID# )                               | 7 | Amount of contributions (\$)<br><br>\$50    |
| 8 Principal occupation / Job title (See Instructions)<br>Staff   |   | 9 Employer (See Instructions)<br>City of Houston                              |   |   |
| 12/2/2015  | Marcia Perry<br>5 Full name of contributor<br>6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77037-4507  | <input type="checkbox"/> out of state PAC(ID# )                               | 7 | Amount of contributions (\$)<br><br>\$25    |
| 8 Principal occupation / Job title (See Instructions)<br>Retired |   | 9 Employer (See Instructions)<br>Conrad's Pest Control                        |   |   |
| 11/16/2015   | Bill Calderon<br>5 Full name of contributor<br>6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77096-6155 | <input type="checkbox"/> out of state PAC(ID# )                               | 7 | Amount of contributions (\$)<br><br>\$250   |
| 8 Principal occupation / Job title (See Instructions)<br>Partner |   | 9 Employer (See Instructions)<br>Hawes Hill Calderon                          |   |   |
| 4  | Date  | 5 Full name of contributor<br><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:             |
| 2 FILER NAME Jason J. Cisneroz                                     |  | 3 Filer ID (Ethics Commission filers)                     |                                      |
| 12/1/2015  | Mako LLC<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77056-2749  | 7   | Amount of contributions (\$) \$1,000 |
| 8 Principal occupation / Job title (See Instructions)              |  | 9 Employer (See Instructions)                             |                                      |
| 12/1/2015  | 4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Padua Law Firm LLC<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77056-2749  | 7   | Amount of contributions (\$) \$1,000 |
| 8 Principal occupation / Job title (See Instructions)              |  | 9 Employer (See Instructions)                             |                                      |
| 11/30/2015   | 4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Shou Ting Hu<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77041-6210        | 7   | Amount of contributions (\$) \$250   |
| 8 Principal occupation / Job title (See Instructions)<br>President |  | 9 Employer (See Instructions)<br>Aviles Engineering Corp. |                                      |
| 11/30/2015   | 4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Leach & Minnick, PC<br>-----<br>6 Contributor address;                      City;                      State;                      Zip Code<br>Houston TX 77009-1336 | 7   | Amount of contributions (\$) \$250   |
| 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# )<br>Shah Haleem  | 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 Jason J. Cisneroz                            |  |  | 3 | Filer ID (Ethics Commission filers)                                   |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>David Sadeghpour | 7 | Amount of contributions (\$)  |
|   | 11/16/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77005-3416                          |   | \$500   |
| 8   | Principal occupation / Job title (See Instructions)<br>President |  | 9 | Employer (See Instructions)<br>Scientech Engineers                    |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Epifanio Salazar | 7 | Amount of contributions (\$)  |
|   | 11/18/2015   | 6 Contributor address; City; State; Zip Code<br>Sugar Land TX 77479-5553                       |   | \$500   |
| 8   | Principal occupation / Job title (See Instructions)<br>Principal |  | 9 | Employer (See Instructions)<br>SES Horizon Consulting Engineers, Inc. |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Alfredo Flores   | 7 | Amount of contributions (\$)  |
|   | 11/18/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77023-4814                          |   | \$250   |
| 8   | Principal occupation / Job title (See Instructions)<br>Attorney  |  | 9 | Employer (See Instructions)<br>Gringo's Tex Mex                       |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Thelma Brown     | 7 | Amount of contributions (\$)  |
|   | 12/2/2015  | 6 Contributor address; City; State; Zip Code<br>Humble TX 77346-3363                           |   | \$50  |
| 8   | Principal occupation / Job title (See Instructions)<br>Retired   |  | 9 | Employer (See Instructions)<br>None                                   |
| 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:           |
| 2 FILER NAME Jason J. Cisneroz  |  | 3 Filer ID (Ethics Commission filers)                           |                                    |
| 11/18/2015  | Monica Garcia<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77009-2757        | 7   | Amount of contributions (\$) \$100 |
| 8 Principal occupation / Job title (See Instructions)<br>Ind. Executive Senior Sales Director |  | 9 Employer (See Instructions)<br>Mary Kay                       |                                    |
| 11/30/2015  | Sylvia Garcia<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77009-1913        | 7   | Amount of contributions (\$) \$250 |
| 8 Principal occupation / Job title (See Instructions)<br>Senator                              |  | 9 Employer (See Instructions)<br>State of Texas                 |                                    |
| 11/16/2015  | Esmeralda Rodriguez<br>-----<br>6 Contributor address; City; State; Zip Code<br>Pearland TX 77581-7529 | 7   | Amount of contributions (\$) \$25  |
| 8 Principal occupation / Job title (See Instructions)<br>Legal Assistant                      |  | 9 Employer (See Instructions)<br>FizerBeck                      |                                    |
| 11/4/2015   | Alma Lara<br>-----<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77022                 | 7   | Amount of contributions (\$) \$50  |
| 8 Principal occupation / Job title (See Instructions)<br>Professor                            |  | 9 Employer (See Instructions)<br>University of Houston Downtown |                                    |
| Alma Lara   | -----<br>6 Contributor address; City; State; Zip Code  | 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 Jason J. Cisneroz  |  | 3 Filer ID (Ethics Commission filers)                                   |   |
| 11/18/2015  | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77022      |   | \$20                                      |
| 8 Principal occupation / Job title (See Instructions)<br>Professor              |  | 9 Employer (See Instructions)<br>University of Houston Downtown         |   |
| 4 Date<br>11/18/2015  | 5 Full name of contributor<br>Sharon Stephens                            | <input type="checkbox"/> out of state PAC(ID# )                         | 7 Amount of contributions (\$)<br>\$50    |
|   | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77009      |   |   |
| 8 Principal occupation / Job title (See Instructions)<br>Executive              |  | 9 Employer (See Instructions)<br>King & Spalding LLP                    |   |
| 4 Date<br>11/16/2015  | 5 Full name of contributor<br>Beatrice Rosales                           | <input type="checkbox"/> out of state PAC(ID# )                         | 7 Amount of contributions (\$)<br>\$100   |
|   | 6 Contributor address;<br>City; State; Zip Code<br>Houston TX 77009-2025 |   |   |
| 8 Principal occupation / Job title (See Instructions)<br>Division Order Analyst |  | 9 Employer (See Instructions)<br>Black Stone Minerals Company, L.P.     |   |
| 4 Date<br>11/16/2015  | 5 Full name of contributor<br>Gene Green                                 | <input type="checkbox"/> out of state PAC(ID# )                         | 7 Amount of contributions (\$)<br>\$2,000 |
|   | 6 Contributor address;<br>City; State; Zip Code<br>Humble TX 77396-3456  |   |   |
| 8 Principal occupation / Job title (See Instructions)<br>Congressman            |  | 9 Employer (See Instructions)<br>United States House of Representatives |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |   |  |
|---|--|---|---|--|
| The Instruction Guide explains how to complete this form. |  |   | 1 | Total Pages Schedule A1:                               |
| 2 FILER NAME Jason J. Cisneroz                            |  |   | 3 | Filer ID (Ethics Commission filers)                    |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Matthew Shailer   | 7 | Amount of contributions (\$)                           |
|   | 11/5/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77008-1744                           |   | \$500  |
| 8   | Principal occupation / Job title (See Instructions)<br>Assistant Director                  |   | 9 | Employer (See Instructions)<br>City of Houston         |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Virginia Parks    | 7 | Amount of contributions (\$)                           |
|   | 12/1/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77076-1616                           |   | \$25   |
| 8   | Principal occupation / Job title (See Instructions)<br>Counselor                           |   | 9 | Employer (See Instructions)<br>Houston Women's Clinic  |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Matthew Zeis      | 7 | Amount of contributions (\$)                           |
|   | 11/16/2015   | 6 Contributor address; City; State; Zip Code<br>Houston TX 77009-1435                           |   | \$250  |
| 8   | Principal occupation / Job title (See Instructions)<br>Manager of Marketing Administration |   | 9 | Employer (See Instructions)<br>GulfMark Energy, Inc.   |
| 4   | Date   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Demetrius Navarro | 7 | Amount of contributions (\$)                           |
|   | 12/1/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77024-1519                           |   | \$100  |
| 8   | Principal occupation / Job title (See Instructions)<br>Insurance                           |   | 9 | Employer (See Instructions)<br>Navarro insurance Group |
| 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:           |
| 2 FILER NAME Jason J. Cisneroz                                      |  | 3 Filer ID (Ethics Commission filers)                       |                                    |
| 11/18/2015  | 6 Contributor address; City; State; Zip Code<br>Sylvia Cabrera<br>Houston TX 77009-5258  | 7   | Amount of contributions (\$) \$40  |
| 8 Principal occupation / Job title (See Instructions)<br>Accountant |  | 9 Employer (See Instructions)<br>Retired                    |                                    |
| 11/24/2015  | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Sylvia Cabrera<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77009-5258                              | 7   | Amount of contributions (\$) \$25  |
| 8 Principal occupation / Job title (See Instructions)<br>Accountant |  | 9 Employer (See Instructions)<br>Retired                    |                                    |
| 11/30/2015  | 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# )<br>Asbestos Workers Political Action<br>6 Contributor address; City; State; Zip Code<br>Lanham MD 20706-1839 | 7   | Amount of contributions (\$) \$300 |
| 8 Principal occupation / Job title (See Instructions)               |  | 9 Employer (See Instructions)                               |                                    |
| 11/5/2015   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Mary Lou Perry<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77080-5237                              | 7   | Amount of contributions (\$) \$200 |
| 8 Principal occupation / Job title (See Instructions)<br>Paralegal  |  | 9 Employer (See Instructions)<br>Allison Jones & Associates |                                    |
| 4   | 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Wendy Heger  | 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 Jason J. Cisneroz   |   | 3 Filer ID (Ethics Commission filers)            |   |
| 11/9/2015  | 6 Contributor address; City; State; Zip Code<br>Houston TX 77096-4408   |  | \$250                                   |
| 8 Principal occupation / Job title (See Instructions)<br>Architect       |   | 9 Employer (See Instructions)<br>Page            |   |
| 11/20/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Lillian Ortiz<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77025-4705          |  | 7 Amount of contributions (\$)<br>\$50  |
| 8 Principal occupation / Job title (See Instructions)<br>Social Worker   |   | 9 Employer (See Instructions)<br>One Voice Texas |   |
| 11/19/2015   | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Ana Hernandez Campaign<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77220-5538 |  | 7 Amount of contributions (\$)<br>\$500 |
| 8 Principal occupation / Job title (See Instructions)                    |   | 9 Employer (See Instructions)                    |   |
| 12/1/2015  | 4 Date<br>5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Cindy Vara-Leija<br>6 Contributor address; City; State; Zip Code<br>Houston TX 77220-5790       |  | 7 Amount of contributions (\$)<br>\$100 |
| 8 Principal occupation / Job title (See Instructions)<br>Law Enforcement |   | 9 Employer (See Instructions)<br>Harris County   |   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

|                                |                                       |
|--------------------------------|---------------------------------------|
| 2 FILER NAME Jason J. Cisneroz | 3 Filer ID (Ethics Commission filers) |
|--------------------------------|---------------------------------------|

|            |                            |                          |                        |       |            |                                |
|------------|----------------------------|--------------------------|------------------------|-------|------------|--------------------------------|
| 4 Date     | 5 Full name of contributor | <input type="checkbox"/> | out of state PAC(ID# ) |       |            |                                |
|            | David DeLeon               |                          |                        |       |            |                                |
|            | 6 Contributor address;     |                          |                        | City; | State;     | Zip Code                       |
| 11/19/2015 |                            |                          | Porter                 | TX    | 77365-1785 |                                |
|            |                            |                          |                        |       |            | 7 Amount of contributions (\$) |
|            |                            |                          |                        |       |            | \$2,000                        |

|   |                                    |
|---|------------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions)      |
| Owner   | Electronic Technical Services Corp |

|            |                                 |                          |                        |       |            |                                |
|------------|---------------------------------|--------------------------|------------------------|-------|------------|--------------------------------|
| 4 Date     | 5 Full name of contributor      | <input type="checkbox"/> | out of state PAC(ID# ) |       |            |                                |
|            | Houston Police Retired Officers |                          |                        |       |            |                                |
|            | 6 Contributor address;          |                          |                        | City; | State;     | Zip Code                       |
| 11/16/2015 |                                 |                          | Houston                | TX    | 77252-2288 |                                |
|            |                                 |                          |                        |       |            | 7 Amount of contributions (\$) |
|            |                                 |                          |                        |       |            | \$500                          |

|   |                               |
|---|-------------------------------|
| 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# ) |       |            |                                |
|           | Adrian Almaguer            |                          |                        |       |            |                                |
|           | 6 Contributor address;     |                          |                        | City; | State;     | Zip Code                       |
| 12/2/2015 |                            |                          | Houston                | TX    | 77207-2406 |                                |
|           |                            |                          |                        |       |            | 7 Amount of contributions (\$) |
|           |                            |                          |                        |       |            | \$100                          |

|   |                                 |
|---|---------------------------------|
| 8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions)   |
| Attorney  | Self Employed - Adrian Almaguer |

|            |                            |                          |                        |       |            |                                |
|------------|----------------------------|--------------------------|------------------------|-------|------------|--------------------------------|
| 4 Date     | 5 Full name of contributor | <input type="checkbox"/> | out of state PAC(ID# ) |       |            |                                |
|            | Brenda Roberts             |                          |                        |       |            |                                |
|            | 6 Contributor address;     |                          |                        | City; | State;     | Zip Code                       |
| 11/17/2015 |                            |                          | Houston                | TX    | 77257-1315 |                                |
|            |                            |                          |                        |       |            | 7 Amount of contributions (\$) |
|            |                            |                          |                        |       |            | \$1,000                        |

|   |                               |
|---|-------------------------------|
| 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# ) |  |  |  |
|--------|----------------------------|--------------------------|------------------------|--|--|--|





# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A2:

2 FILER NAME Jason J. Cisneroz 3 Filer ID (Ethics Commission filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$2,557.00

|   |            |   |                          |   |                                    |
|---|------------|---|--------------------------|---|------------------------------------|
| 5 | Date       | 6 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Linda Morales | 8                        | Amount of contributions (\$)                          | 9 In-Kind contribution description |
|   | 11/18/2015 | 7 Contributor address; City; State; Zip Code<br>Houston TX 77009-1928                       |                          | 322.00  | Food/drinks for event              |
|   |            |   | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T |                                    |

|   |   |
|---|---|
| 10 Principal occupation / Job title (See Instructions)<br>Labor Union Organizer | 11 Employer (See Instructions)<br>AFL-CIO |
|---|---|

|   |            |  |                          |   |                                    |
|---|------------|--|--------------------------|---|------------------------------------|
| 5 | Date       | 6 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Janice Jamail-Garvis | 8                        | Amount of contributions (\$)                          | 9 In-Kind contribution description |
|   | 11/22/2015 | 7 Contributor address; City; State; Zip Code<br>Houston TX 77007                                   |                          | 985.00  | Food/drinks for event              |
|   |            |  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T |                                    |

|   |   |
|---|---|
| 10 Principal occupation / Job title (See Instructions)<br>Real Estate | 11 Employer (See Instructions)<br>Jamail Real Estate, Inc |
|---|---|

|   |           |  |                          |   |                                    |
|---|-----------|--|--------------------------|---|------------------------------------|
| 5 | Date      | 6 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )<br>Armando Walle Campaign | 8                        | Amount of contributions (\$)                          | 9 In-Kind contribution description |
|   | 11/1/2015 | 7 Contributor address; City; State; Zip Code<br>Houston TX 77039                                     |                          | 1250.00   | Field staff salary                 |
|   |           |  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T |                                    |

|  |                                |
|--|--------------------------------|
| 10 Principal occupation / Job title (See Instructions) | 11 Employer (See Instructions) |
|--|--------------------------------|

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

If contributor 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 Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)  |
| 4 Date<br>11/28/2015                                   | 5 Payee name<br>Adrian Sylvester Garcia   |  |
| 6 Amount (\$)<br>198                                   | 7 Payee address; City; State; Zip Code<br>14011 Burtdiff St<br><br>Houston TX 77060 |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Salaries/Wages/Contract Labor                                   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Canvassing |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held  |

|  |   |   |
|--|---|---|
| 4 Date<br>11/12/2015                                   | 5 Payee name<br>Amazon.com  |   |
| 6 Amount (\$)<br>21.94                                 | 7 Payee address; City; State; Zip Code<br>440 Terry Ave N<br><br>Seattle WA 98109 |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Office Overhead/Rental Expense                                | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Office supplies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>11/13/2015     | 5 Payee name<br>Amazon.com  |                 |
| 6 Amount (\$)<br>14.93   | 7 Payee address; City; State; Zip Code<br>440 Terry Ave N<br><br>Seattle WA 98109 |                 |
| 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 Jason J. Cisneroz                          |                          | 3 Filer ID (Ethics Commission filers)  |
|  | Office Overhead/Rental Expense                          | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Supplies |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name office sought office held |                          |  |

|  |   |                          |  |
|--|---|--------------------------|--|
| 4 Date<br>11/2/2015                                    | 5 Payee name<br>Amegy Bank  |                          |  |
| 6 Amount (\$)<br>20.63                                 | 7 Payee address; City; State; Zip Code<br>PO Box 27459<br>Houston TX 77227-7459 |                          |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Accounting/Banking  | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank fees |
| 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 Jason J. Cisneroz  |  | 3 Filer ID (Ethics Commission filers)  |  |
| 4 Date<br>11/16/2015                                   |  | 5 Payee name<br>Amegy Bank  |  |  |  |
| 6 Amount (\$)<br>25                                    |  | 7 Payee address; City; State; Zip Code<br>PO Box 27459<br>Houston TX 77227-7459 |  |  |  |
| 8 PURPOSE OF EXPENDITURE                               |  | (a) Category<br>Accounting/Banking  |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire fee |  |
| 9 Complete ONLY if direct expendituree to benefit C/OH |  | Candidate / Officeholder name   |  | office sought office held  |  |

|  |  |   |  |  |  |
|--|--|---|--|--|--|
| 4 Date<br>12/1/2015                                    |  | 5 Payee name<br>Amegy Bank  |  |  |  |
| 6 Amount (\$)<br>25                                    |  | 7 Payee address; City; State; Zip Code<br>PO Box 27459<br>Houston TX 77227-7459 |  |  |  |
| 8 PURPOSE OF EXPENDITURE                               |  | (a) Category<br>Accounting/Banking  |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire fee |  |
| 9 Complete ONLY if direct expendituree to benefit C/OH |  | Candidate / Officeholder name   |  | office sought office held  |  |

|                          |  |   |  |                 |  |
|--------------------------|--|---|--|-----------------|--|
| 4 Date<br>11/2/2015      |  | 5 Payee name<br>Amegy Bank  |  |                 |  |
| 6 Amount (\$)<br>25      |  | 7 Payee address; City; State; Zip Code<br>PO Box 27459<br>Houston TX 77227-7459 |  |                 |  |
| 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 Jason J. Cisneroz |                          | 3 Filer ID (Ethics Commission filers)  |
|  | Accounting/Banking             | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Wire fee |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held  |

|  |   |                          |  |
|--|---|--------------------------|--|
| 4 Date<br>12/2/2015                                    | 5 Payee name<br>Amegy Bank  |                          |  |
| 6 Amount (\$)<br>543.36                                | 7 Payee address; City; State; Zip Code<br>PO Box 27459<br>Houston TX 77227-7459 |                          |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Accounting/Banking  | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Bank fees |
| 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.

|                                   |  |  |
|-----------------------------------|--|--|
| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Jason J. Cisneroz  | <b>3</b> Filer ID (Ethics Commission filers)   |
| <b>4</b> Date<br>11/1/2015        | <b>5</b> Payee name<br>Charisma Designs  |  |
| <b>6</b> Amount (\$)<br>520       | <b>7</b> Payee address; City; State; Zip Code<br>226 Cavalcade<br><br>Houston TX 77009                                   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Office Overhead/Rental Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Rent |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                                 |  |  |
|---------------------------------|--|--|
| <b>4</b> Date<br>12/1/2015      | <b>5</b> Payee name<br>Charisma Designs  |  |
| <b>6</b> Amount (\$)<br>600     | <b>7</b> Payee address; City; State; Zip Code<br>226 Cavalcade<br><br>Houston TX 77009                                   |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Office Overhead/Rental Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Rent |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                                 |  |                 |
|---------------------------------|--|-----------------|
| <b>4</b> Date<br>10/26/2015     | <b>5</b> Payee name<br>Chicago Italian Beef Houston  |                 |
| <b>6</b> Amount (\$)<br>40.85   | <b>7</b> Payee address; City; State; Zip Code<br>1777 Airline Dr<br><br>Houston TX 77009                                 |                 |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category   | (b) Description |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>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 Jason J. Cisneroz |                          | 3 Filer ID (Ethics Commission filers)  |
|  | Food/Beverage Expense          | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Volunteer food |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held  |

|                       |  |  |  |
|-----------------------|--|--|--|
| 4 Date<br>11/2/2015   | 5 Payee name<br>Joe Cullar   |  |  |
| 6 Amount (\$)<br>1350 | 7 Payee address; City; State; Zip Code<br>516 1/2 N Eastwood<br><br>Houston TX 77011 |  |  |

|                          |   |                          |   |
|--------------------------|---|--------------------------|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Salaries/Wages/Contract Labor | <input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Salary |
|--------------------------|---|--------------------------|---|

|  |                               |               |             |
|--|-------------------------------|---------------|-------------|
| 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.

|   |   |   |
|---|---|---|
| <b>1</b> Total pages Schedule F1:                             | <b>2</b> FILER NAME Jason J. Cisneroz   | <b>3</b> Filer ID (Ethics Commission filers)  |
| <b>4</b> Date<br>11/18/2015                                   | <b>5</b> Payee name<br>Joe Cullar   |   |
| <b>6</b> Amount (\$)<br>1250                                  | <b>7</b> Payee address; City; State; Zip Code<br>516 1/2 N Eastwood<br><br>Houston TX 77011 |   |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category  | (b) Description   |
|   |   | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|   |   |   |
|---|---|---|
| <b>4</b> Date<br>11/10/2015                                   | <b>5</b> Payee name<br>Go Union Printing  |   |
| <b>6</b> Amount (\$)<br>90.5                                  | <b>7</b> Payee address; City; State; Zip Code<br>5018 Tampa West Blvd<br><br>Tampa FL 33634 |   |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category  | (b) Description   |
|   | Printing Expense  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Business cards |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|                                 |  |                 |
|---------------------------------|--|-----------------|
| <b>4</b> Date<br>11/18/2015     | <b>5</b> Payee name<br>David Gonzalez  |                 |
| <b>6</b> Amount (\$)<br>300     | <b>7</b> Payee address; City; State; Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039 |                 |
| <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 Jason J. Cisneroz |                          | 3 Filer ID (Ethics Commission filers)  |
|  | Salaries/Wages/Contract Labor  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Salary |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held  |

|  |   |                          |   |
|--|---|--------------------------|---|
| 4 Date<br>12/2/2015                                    | 5 Payee name<br>David Gonzalez  |                          |   |
| 6 Amount (\$)<br>300                                   | 7 Payee address; City; State; Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039 |                          |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Salaries/Wages/Contract Labor                                   | <input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Salary |
| 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 Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)   |
| 4 Date<br>11/27/2015       | 5 Payee name<br>David Gonzalez  |   |
| 6 Amount (\$)<br>121       | 7 Payee address; City; State; Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039                               |   |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Office Overhead/Rental Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Reimbursement |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |

|                          |   |   |
|--------------------------|---|---|
| 4 Date<br>12/2/2015      | 5 Payee name<br>David Gonzalez  |   |
| 6 Amount (\$)<br>100     | 7 Payee address; City; State; Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039                               |   |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Office Overhead/Rental Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Reimbursement |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>12/2/2015      | 5 Payee name<br>David Gonzalez  |                 |
| 6 Amount (\$)<br>40      | 7 Payee address; City; State; Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039 |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |

# 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 Jason J. Cisneroz | <b>3</b> Filer ID (Ethics Commission filers)   |
|   | Office Overhead/Rental Expense        | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Reimbursement |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name         | office sought                      office held   |

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>11/4/2015  | <b>5</b> Payee name<br>David Gonzalez   |
| <b>6</b> Amount (\$)<br>300 | <b>7</b> Payee address;            City;            State;            Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039 |

|                                 |   |  |
|---------------------------------|---|--|
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Salaries/Wages/Contract Labor | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Salary |
|---------------------------------|---|--|

|   |                               |  |
|---|-------------------------------|--|
| <b>9</b> 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.

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| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Jason J. Cisneroz  | <b>3</b> Filer ID (Ethics Commission filers)  |
| <b>4</b> Date<br>11/4/2015        | <b>5</b> Payee name<br>David Gonzalez  |   |
| <b>6</b> Amount (\$)<br>54.83     | <b>7</b> Payee address; City; State; Zip Code<br>5006 Charriton Dr<br><br>Houston TX 77039                               |   |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Office Overhead/Rental Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Reimbursement |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |   |

|                                 |  |  |
|---------------------------------|--|--|
| <b>4</b> Date<br>11/28/2015     | <b>5</b> Payee name<br>Louis Gonzalez  |  |
| <b>6</b> Amount (\$)<br>246     | <b>7</b> Payee address; City; State; Zip Code<br>406 Elser<br><br>Houston TX 77009                                       |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Salaries/Wages/Contract Labor  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                                 |  |                 |
|---------------------------------|--|-----------------|
| <b>4</b> Date<br>12/3/2015      | <b>5</b> Payee name<br>Google, Inc.  |                 |
| <b>6</b> Amount (\$)<br>25.32   | <b>7</b> Payee address; City; State; Zip Code<br>1600 Amphitheatre Parkway<br><br>Mountain View CA 94043 |                 |
| <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.

|  |   |   |                                       |
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| 1 Total pages Schedule F1:                             | 2 FILER NAME Jason J. Cisneroz                          |   | 3 Filer ID (Ethics Commission filers) |
|  | Office Overhead/Rental Expense                          | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense | Web services and email accounts       |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name office sought office held |   |                                       |

|  |   |   |  |
|--|---|---|--|
| 4 Date<br>11/4/2015                                    | 5 Payee name<br>Google, Inc.  |   |  |
| 6 Amount (\$)<br>20                                    | 7 Payee address; City; State; Zip Code<br>1600 Amphitheatre Parkway<br>Mountain View CA 94043 |   |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Office Overhead/Rental Expense  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense | (b) Description<br>Web services and email accounts |
| 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.

|                            |   |  |
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| 1 Total pages Schedule F1: | 2 FILER NAME Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)  |
| 4 Date<br>12/1/2015        | 5 Payee name<br>Brittane Griffin  |  |
| 6 Amount (\$)<br>54        | 7 Payee address; City; State; Zip Code<br>12035 Huffmeister Rd<br>#732<br>Cypress TX 77429                        |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Salaries/Wages/Contract Labor   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Canvassing |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |  |
|--------------------------|---|--|
| 4 Date<br>11/23/2015     | 5 Payee name<br>Dranoel Harris  |  |
| 6 Amount (\$)<br>807     | 7 Payee address; City; State; Zip Code<br>4328 Tampico<br><br>Houston TX 77016                                    |  |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Salaries/Wages/Contract Labor   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>11/30/2015     | 5 Payee name<br>Sam Kraus   |                 |
| 6 Amount (\$)<br>750     | 7 Payee address; City; State; Zip Code<br>1411 Ruth St.<br><br>Houston TX 77004                                   |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1:                             | 2 FILER NAME Jason J. Cisneroz |                          | 3 Filer ID (Ethics Commission filers)  |
|  | Salaries/Wages/Contract Labor  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Salary |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held  |

|                      |   |  |  |
|----------------------|---|--|--|
| 4 Date<br>11/30/2015 | 5 Payee name<br>Sam Kraus   |  |  |
| 6 Amount (\$)<br>107 | 7 Payee address; City; State; Zip Code<br>1411 Ruth St.<br><br>Houston TX 77004 |  |  |

|                          |   |                          |   |
|--------------------------|---|--------------------------|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Salaries/Wages/Contract Labor | <input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Salary |
|--------------------------|---|--------------------------|---|

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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.

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|----------------------------|---|--|
| 1 Total pages Schedule F1: | 2 FILER NAME Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)  |
| 4 Date<br>11/30/2015       | 5 Payee name<br>Angela Mata   |  |
| 6 Amount (\$)<br>3000      | 7 Payee address; City; State; Zip Code<br>6924 Stella Link Road<br><br>Houston TX 77025                           |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Salaries/Wages/Contract Labor   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Salary |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |  |
|--------------------------|---|--|
| 4 Date<br>11/12/2015     | 5 Payee name<br>McDonald's  |  |
| 6 Amount (\$)<br>9.93    | 7 Payee address; City; State; Zip Code<br>2515 Fulton<br><br>Houston TX 77009                                     |  |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Food/Beverage Expense   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Volunteer food |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>10/28/2015     | 5 Payee name<br>NGPVAN  |                 |
| 6 Amount (\$)<br>69.46   | 7 Payee address; City; State; Zip Code<br>1101 15th St. NW<br>Suite 505<br>Washington DC 20005                    |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |

**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 Jason J. Cisneroz | <b>3</b> Filer ID (Ethics Commission filers)  |
|   | Advertising Expense                   | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name         | office sought                      office held  |

|                              |  |
|------------------------------|--|
| <b>4</b> Date<br>11/5/2015   | <b>5</b> Payee name<br>NGPVAN  |
| <b>6</b> Amount (\$)<br>5.96 | <b>7</b> Payee address;            City;            State;            Zip Code<br>1101 15th St. NW<br>Suite 505<br>Washington DC 20005 |

|                                 |                                     |  |
|---------------------------------|-------------------------------------|--|
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br>Advertising Expense | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |
|---------------------------------|-------------------------------------|--|

|   |                               |  |
|---|-------------------------------|--|
| <b>9</b> 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.

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| <b>1</b> Total pages Schedule F1: | <b>2</b> FILER NAME Jason J. Cisneroz  | <b>3</b> Filer ID (Ethics Commission filers)   |
| <b>4</b> Date<br>11/5/2015        | <b>5</b> Payee name<br>NGPVAN  |  |
| <b>6</b> Amount (\$)<br>9.35      | <b>7</b> Payee address; City; State; Zip Code<br>1101 15th St. NW<br>Suite 505<br>Washington DC 20005                    |  |
| <b>8 PURPOSE OF EXPENDITURE</b>   | (a) Category<br><br>Advertising Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |
|                                   | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                                 |  |  |
|---------------------------------|--|--|
| <b>4</b> Date<br>11/5/2015      | <b>5</b> Payee name<br>NGPVAN  |  |
| <b>6</b> Amount (\$)<br>7.57    | <b>7</b> Payee address; City; State; Zip Code<br>1101 15th St. NW<br>Suite 505<br>Washington DC 20005                    |  |
| <b>8 PURPOSE OF EXPENDITURE</b> | (a) Category<br><br>Advertising Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |
|                                 | <b>9</b> Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                                 |   |                 |
|---------------------------------|---|-----------------|
| <b>4</b> Date<br>12/3/2015      | <b>5</b> Payee name<br>NGPVAN   |                 |
| <b>6</b> Amount (\$)<br>64.13   | <b>7</b> Payee address; City; State; Zip Code<br>1101 15th St. NW<br>Suite 505<br>Washington DC 20005 |                 |
| <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.

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

|   |  |  |             |
|---|--|--|-------------|
| <b>4</b> Date<br>11/23/2015                                   | <b>5</b> Payee name<br>NGPVAN  |  |             |
| <b>6</b> Amount (\$)<br>338                                   | <b>7</b> Payee address;            City;            State;            Zip Code<br>1101 15th St. NW<br>Suite 505<br>Washington DC 20005 |  |             |
| <b>8</b> PURPOSE OF EXPENDITURE                               | (a) Category<br>Advertising Expense  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |             |
| <b>9</b> 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.

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| 1 Total pages Schedule F1: | 2 FILER NAME Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)  |
| 4 Date<br>11/28/2015       | 5 Payee name<br>Iolanda Palai   |  |
| 6 Amount (\$)<br>294       | 7 Payee address; City; State; Zip Code<br>1251 Wilcrest Dr.<br>#50<br>Houston TX 77042                            |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Salaries/Wages/Contract Labor   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |  |
|--------------------------|---|--|
| 4 Date<br>11/28/2015     | 5 Payee name<br>Dominique Parker  |  |
| 6 Amount (\$)<br>150     | 7 Payee address; City; State; Zip Code<br>905 Cypress Station Drive<br>#13<br>Houston TX 77090                    |  |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Salaries/Wages/Contract Labor   | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>11/28/2015     | 5 Payee name<br>Kariem Ramee  |                 |
| 6 Amount (\$)<br>150     | 7 Payee address; City; State; Zip Code<br>9797 Meadowglen Ln<br>#805<br>Houston TX 77042                          |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |                 |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1:                             | 2 FILER NAME Jason J. Cisneroz |                          | 3 Filer ID (Ethics Commission filers)  |
|  | Salaries/Wages/Contract Labor  | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held  |

|  |  |                          |   |
|--|--|--------------------------|---|
| 4 Date<br>11/28/2015                                   | 5 Payee name<br>Miguel Barrientos  |                          |   |
| 6 Amount (\$)<br>102                                   | 7 Payee address; City; State; Zip Code<br>1251 Wilcrest Dr.<br>#50<br>Houston TX 77042 |                          |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Salaries/Wages/Contract Labor  | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |
| 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.

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| <b>1</b> Total pages Schedule F1:                             | <b>2</b> FILER NAME Jason J. Cisneroz   |   | <b>3</b> Filer ID (Ethics Commission filers) |
| <b>4</b> Date<br>11/28/2015                                   | <b>5</b> Payee name<br>Aldo Charles   |   |  |
| <b>6</b> Amount (\$)<br>102                                   | <b>7</b> Payee address; City; State; Zip Code<br>1119 Sunny Dr.<br><br>Houston TX 77037 |   |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category  | (b) Description   |  |
|   | Salaries/Wages/Contract Labor   | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |  |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought   | office held                                  |

|   |  |   |             |
|---|--|---|-------------|
| <b>4</b> Date<br>11/28/2015                                   | <b>5</b> Payee name<br>Brianna Yentur  |   |             |
| <b>6</b> Amount (\$)<br>54                                    | <b>7</b> Payee address; City; State; Zip Code<br>14723 West Oaks Plaza St.<br><br>Houston TX 77082 |   |             |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category   | (b) Description   |             |
|   | Salaries/Wages/Contract Labor  | <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Voter outreach |             |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought   | office held |

|                                 |  |                 |  |
|---------------------------------|--|-----------------|--|
| <b>4</b> Date<br>10/26/2015     | <b>5</b> Payee name<br>Slattery Design Studios   |                 |  |
| <b>6</b> Amount (\$)<br>1100    | <b>7</b> Payee address; City; State; Zip Code<br>1712 Fairview<br><br>Houston TX 77006 |                 |  |
| <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.

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

|  |   |                          |  |
|--|---|--------------------------|--|
| 4 Date<br>11/18/2015                                   | 5 Payee name<br>Slattery Design Studios                                     |                          |  |
| 6 Amount (\$)<br>10425                                 | 7 Payee address; City; State; Zip Code<br>1712 Fairview<br>Houston TX 77006 |                          |  |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br>Consulting Expense  | <input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct mail |
| 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 Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)   |
| 4 Date<br>11/24/2015                                   | 5 Payee name<br>Slattery Design Studios   |   |
| 6 Amount (\$)<br>15600                                 | 7 Payee address; City; State; Zip Code<br>1712 Fairview<br><br>Houston TX 77006 |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Consulting Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct mail |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|  |   |   |
|--|---|---|
| 4 Date<br>12/2/2015                                    | 5 Payee name<br>Slattery Design Studios   |   |
| 6 Amount (\$)<br>11320                                 | 7 Payee address; City; State; Zip Code<br>1712 Fairview<br><br>Houston TX 77006 |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Consulting Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Direct mail |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|                          |  |                 |
|--------------------------|--|-----------------|
| 4 Date<br>11/25/2015     | 5 Payee name<br>Sprint 2 Print   |                 |
| 6 Amount (\$)<br>2543.88 | 7 Payee address; City; State; Zip Code<br>8748 Clay Rd<br>#300<br>Houston TX 77080 |                 |
| 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 Jason J. Cisneroz  |  | 3 Filer ID (Ethics Commission filers)  |
|  | Printing Expense  | <input type="checkbox"/><br><input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>Signs |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name                      office sought                      office held |  |  |

|                            |  |  |  |
|----------------------------|--|--|--|
| 4 Date<br><br>11/12/2015   | 5 Payee name<br><br>T MOBILE   |  |  |
| 6 Amount (\$)<br><br>38.59 | 7 Payee address;                      City;                      State;                      Zip Code<br><br>2435 Fulton<br><br>Houston TX 77009 |  |  |

|                          |  |  |   |
|--------------------------|--|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Office Overhead/Rental Expense | <input type="checkbox"/><br><input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>Cell phones |
|--------------------------|--|--|---|

|  |   |  |  |
|--|---|--|--|
| 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 Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)   |
| 4 Date<br>11/12/2015                                   | 5 Payee name<br>T MOBILE  |   |
| 6 Amount (\$)<br>38.59                                 | 7 Payee address; City; State; Zip Code<br>2435 Fulton<br><br>Houston TX 77009 |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Office Overhead/Rental Expense                            | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Cell phones |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|  |   |   |
|--|---|---|
| 4 Date<br>11/12/2015                                   | 5 Payee name<br>T MOBILE  |   |
| 6 Amount (\$)<br>38.59                                 | 7 Payee address; City; State; Zip Code<br>2435 Fulton<br><br>Houston TX 77009 |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Office Overhead/Rental Expense                            | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Cell phones |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held   |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>11/12/2015     | 5 Payee name<br>T MOBILE  |                 |
| 6 Amount (\$)<br>38.59   | 7 Payee address; City; State; Zip Code<br>2435 Fulton<br><br>Houston TX 77009 |                 |
| 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 Jason J. Cisneroz |                          | 3 Filer ID (Ethics Commission filers)   |
|  | Office Overhead/Rental Expense | <input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Cell phones |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought            | office held   |

|  |   |                          |   |
|--|---|--------------------------|---|
| 4 Date<br>10/26/2015                                   | 5 Payee name<br>TEXACO  |                          |   |
| 6 Amount (\$)<br>17.27                                 | 7 Payee address; City; State; Zip Code<br>3326 Canal St<br><br>Houston TX 77003 |                          |   |
| 8 PURPOSE OF EXPENDITURE                               | (a) Category<br><br>Food/Beverage Expense                                       | <input type="checkbox"/> | (b) Description<br><br>Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Volunteer food |
| 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 Jason J. Cisneroz  | 3 Filer ID (Ethics Commission filers)  |
| 4 Date<br>11/20/2015       | 5 Payee name<br>USPS  |  |
| 6 Amount (\$)<br>49        | 7 Payee address; City; State; Zip Code<br>3816 N Shepherd Dr.<br><br>Houston TX 77018                             |  |
| 8 PURPOSE OF EXPENDITURE   | (a) Category<br><br>Office Overhead/Rental Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Stamps |
|                            | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |  |
|--------------------------|---|--|
| 4 Date<br>11/16/2015     | 5 Payee name<br>USPS  |  |
| 6 Amount (\$)<br>49      | 7 Payee address; City; State; Zip Code<br>3816 N Shepherd Dr.<br><br>Houston TX 77018                             |  |
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Office Overhead/Rental Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br><br>Stamps |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>Candidate / Officeholder name office sought office held |  |

|                          |   |                 |
|--------------------------|---|-----------------|
| 4 Date<br>11/16/2015     | 5 Payee name<br>Winning Connections   |                 |
| 6 Amount (\$)<br>3500    | 7 Payee address; City; State; Zip Code<br>317 Pennsylvania Ave SE<br><br>Washington DC 20003                      |                 |
| 8 PURPOSE OF EXPENDITURE | (a) Category  | (b) Description |
|                          | 9 Complete ONLY if direct expendituree to benefit C/OH<br>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 Jason J. Cisneroz |  | 3 Filer ID (Ethics Commission filers)   |
|  | Consulting Expense             | <input type="checkbox"/><br><input type="checkbox"/> | Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>Phone services |
| 9 Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name  | office sought  | office held   |

|                       |  |  |  |
|-----------------------|--|--|--|
| 4 Date<br>12/1/2015   | 5 Payee name<br>Winning Connections  |  |  |
| 6 Amount (\$)<br>3900 | 7 Payee address; City; State; Zip Code<br>317 Pennsylvania Ave SE<br><br>Washington DC 20003 |  |  |

|                          |  |  |  |
|--------------------------|--|--|--|
| 8 PURPOSE OF EXPENDITURE | (a) Category<br><br>Consulting Expense | <input type="checkbox"/><br><input type="checkbox"/> | (b) Description<br>Check if travel outside of Texas, complete Schedule T<br>Check if Austin, TX, officeholder living expense<br>Phone services |
|--------------------------|--|--|--|

|  |                               |               |             |
|--|-------------------------------|---------------|-------------|
| 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.

|   |   |  |
|---|---|--|
| <b>1</b> Total pages Schedule F1:                             | <b>2</b> FILER NAME Jason J. Cisneroz   | <b>3</b> Filer ID (Ethics Commission filers)   |
| <b>4</b> Date<br>12/3/2015                                    | <b>5</b> Payee name<br>Winning Connections  |  |
| <b>6</b> Amount (\$)<br>2810                                  | <b>7</b> Payee address; City; State; Zip Code<br>317 Pennsylvania Ave SE<br><br>Washington DC 20003 |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category<br><br>Consulting Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held  |

|   |   |  |
|---|---|--|
| <b>4</b> Date<br>11/2/2015                                    | <b>5</b> Payee name<br>Winning Connections  |  |
| <b>6</b> Amount (\$)<br>3500                                  | <b>7</b> Payee address; City; State; Zip Code<br>317 Pennsylvania Ave SE<br><br>Washington DC 20003 |  |
| <b>8 PURPOSE OF EXPENDITURE</b>                               | (a) Category<br><br>Consulting Expense  | (b) Description<br><br><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Phone services |
| <b>9</b> Complete ONLY if direct expendituree to benefit C/OH | Candidate / Officeholder name   | office sought office held  |

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

**INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILERS**

**SCHEDULE K**

|   |   |                                     |  |
|---|---|-------------------------------------|--|
| The Instruction Guide explains how to complete this form. |   | 1 Total Pages Schedule K:           |  |
| 2 FILER NAME Jason J. Cisneroz                            |   | Filer ID (Ethics Commission filers) |  |
| 4 Date  | 5 Name of person whom amount is received                                | 8 Amount (\$)                       |  |
|   | 6 Address of person from whom amount is received; City; State; Zip Code |                                     |  |
|   | 7 Purpose for which amount is received                                  |                                     | <input type="checkbox"/> Check if political contribution returned to filer |

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

**CANDIDATE / OFFICEHOLDER REPORT:  
DESIGNATION OF FINAL REPORT**

**FORM C/OH - FR**

The Instruction Guide explains how to complete this form.

•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

**1** C/OH NAME

**2** ACCOUNT # (Ethics Commission filers)

**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

**4 FILER WHO IS NOT AN OFFICEHOLDER**

•• Complete A & B below only if you are not an officeholder. ••

**A. CAMPAIGN FUNDS**

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

I have unexpended contributions or unexpended interest or income earned from political contributions. I

understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

**B. ASSETS**

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions.

I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

**5 OFFICEHOLDER**

•• Complete this section only if you are an officeholder. ••

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder

**CANDIDATE / OFFICEHOLDER  
REPORT OF UNEXPENDED CONTRIBUTIONS**

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

|  |   |  |        |
|--|---|--|--------|
| The C/OH-UC Instruction Guide explains how to complete this form                 |   | 1 ACCOUNT # (Ethics Commission filers)   |        |
| 2 CANDIDATE / OFFICEHOLDER NAME  | MS/MRS/MR FIRST MI  | <b>OFFICE USED ONLY</b><br>Date Received |        |
|  | NICKNAME LAST SUFFIX  |  |        |
| 3 CANDIDATE / OFFICEHOLDER ADDRESS<br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT/ SUITE #; CITY; STATE; ZIP CODE   | Date Hand-delivered or Date Postmarked   |        |
| 4 REPORT TYPE  | <input type="checkbox"/> Annual <input type="checkbox"/> Final Disposition  | Receipt #                                | Amount |
| 5 PERIOD COVERED   | Month Day Year THROUGH Month Day Year   | Date Processed                           |        |
|  |   | Date Imaged                              |        |
| 6 TOTALS   | 1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DEC. 31 OF THE PREVIOUS YEAR.                           | \$                                       |        |
|  | 2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR. | \$                                       |        |

7 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.

Jason Cisneroz  
\_\_\_\_\_  
Signature Candidate or Officeholder

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      Print name of officer administering oath      Title of officer administering oath

**C/OH REPORT OF UNEXPENDED CONTRIBUTIONS  
EXPENDITURES**

**FORM C/OH-UC  
PG 2**

|  |   |   |  |
|--|---|---|--|
| 8 C/OH NAME ,  |   | 9 ACCOUNT # (Ethics Commission filers)  |  |
| 10 Date  | 11 Payee name<br>,<br>-----<br>12 Payee address; City; State; Zip Code; | 13 Amount (\$)  |  |
| 14 Purpose of expenditure<br><br>(If travel outside of Texas, complete schedule T) (See Instruction Guide) |   | 15 Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| <b>ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED</b>   |   |   |  |