

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form | 1 Filer ID(Ethics Commission filers) | 2 Total pages filed

3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI	OFFICE USE ONLY	
	Mr.	Robert			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY;	STATE;	ZIP CODE
	PO Box 230087		Houston TX		77223
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Received	
	(713)	256-3953		10/26/2015	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	Receipt #	Amount
	Mr.	James	Richard	Date Processed	
7 CAMPAIGN TREASURER ADDRESS (Business)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY;	STATE;	ZIP CODE
	PO Box 230087		Houston TX		77223
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
	(832)	609-4496			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)				
	10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year	
	9/25/2015			10/24/2015	
11 ELECTION	ELECTION DATE	ELECTION TYPE			
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
	11/3/2015				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)			
	City Council - District I	City Council - District I			

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

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

14 FILER NAME Robert Gallegos 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

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

GENERAL

SPECIFIC

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$0.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$9,775.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00
	4	TOTAL POLITICAL EXPENDITURES	\$52,386.12
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$51,251.74
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.

Robert Gallegos

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 Robert Gallegos		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	9775
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	0
4.	SCHEDULE E: LOANS	0
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	44579.32
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	7806.8
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 Robert Gallegos

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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
------------------------------	---------------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	Yolanda Navarro					
	6 Contributor address;			City;	State;	Zip Code
09/25/2015			Houston	TX	77023-1414	
						7 Amount of contributions (\$)
						\$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	Kristen Capps					
	6 Contributor address;			City;	State;	Zip Code
09/25/2015			Houston	TX	77,061.00	
						7 Amount of contributions (\$)
						\$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	Gloria Rodriguez					
	6 Contributor address;			City;	State;	Zip Code
09/25/2015			Houston	TX	77,049.00	
						7 Amount of contributions (\$)
						\$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	James Dinkins					
	6 Contributor address;			City;	State;	Zip Code
09/25/2015			Houston	TX	77,007.00	
						7 Amount of contributions (\$)
						\$25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
--------	----------------------------	--------------------------	------------------------	--	--	--

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert Gallegos		3 Filer ID (Ethics Commission filers)	
	Andrew Wright		7 Amount of contributions (\$)
09/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77,002.00		\$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Sammy Gallegos		7 Amount of contributions (\$)
09/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77020		\$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Kathryn McNeil		7 Amount of contributions (\$)
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77,219.00		\$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Thompson & Horton LLP		7 Amount of contributions (\$)
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77,027.00		\$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert Gallegos		3 Filer ID (Ethics Commission filers)	
	Linebarger, Goggan, Blair & Sampson LLP	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Austin TX 78760-7428	\$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Greater Houston Restaurant Association PAC	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77,007.00	\$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Evangelina Hammonds	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77,004.00	\$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Edmond Wulfe	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-3963	\$1,000.00	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Wulfe & Company	
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 Robert Gallegos		3	Filer ID (Ethics Commission filers)
10/09/2015	Houston Federation of Teachers COPE 6 Contributor address; City; State; Zip Code Houston TX 77027-5752	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor Steven Guthrie out of state PAC(ID#) 6 Contributor address; City; State; Zip Code Houston TX 77,008.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor Lindsay Horne out of state PAC(ID#) 6 Contributor address; City; State; Zip Code Houston TX 77,061.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor Lee Vela out of state PAC(ID#) 6 Contributor address; City; State; Zip Code Sugar Land TX 77,479.00	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4	Date 5 Full name of contributor 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 Robert Gallegos		3	Filer ID (Ethics Commission filers)
10/15/2015	Wes Hart ----- 6 Contributor address; City; State; Zip Code Houston TX 77,292.00	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor Gloria Moreno <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77,003.00	7	Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor Ianne Fasthoff <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77,002.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor Audrey Reed <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77,005.00	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# C00199711)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert Gallegos		3 Filer ID (Ethics Commission filers)	
10/23/2015	Health Care Service Corporation Employees' PAC 6 Contributor address; City; State; Zip Code Chicago IL 60601-5014	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/23/2015	5 Full name of contributor Ali Davari 6 Contributor address; City; State; Zip Code Houston TX 77257-0427	7	Amount of contributions (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Nightclub owner		9 Employer (See Instructions) Self	
10/23/2015	5 Full name of contributor Keith Hamm 6 Contributor address; City; State; Zip Code Houston TX 77,023.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/19/2015	5 Full name of contributor Nathelyne Kennedy 6 Contributor address; City; State; Zip Code Houston TX 77,036.00	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4	Date	5 Full name of contributor	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 Robert Gallegos		3	Filer ID (Ethics Commission filers)
09/29/2015	Texas Taxi PAC ----- 6 Contributor address; City; State; Zip Code Austin TX 78,701.00	7	Amount of contributions (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
09/25/2015	4 Date 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# C00428391) Republic Services Better Government PAC ----- 6 Contributor address; City; State; Zip Code Phoenix AZ 85,054.00	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/17/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ruben Mercado ----- 6 Contributor address; City; State; Zip Code Houston TX 77,092.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/13/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Eva Loreda ----- 6 Contributor address; City; State; Zip Code Houston TX 77012-1139	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4	Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
------------------------------	---------------------------------------

	John W. Lodge III	7 Amount of contributions (\$)
10/07/2015	6 Contributor address; City; State; Zip Code Houston TX 77,013.00	\$500.00

8 Principal occupation / Job title (See Instructions) President	9 Employer (See Instructions) Lodge Lumber Co., Inc.
--	---

	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Laura Spanjian	7 Amount of contributions (\$)
10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77,006.00	\$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Michael Sachs	7 Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77,002.00	\$350.00

8 Principal occupation / Job title (See Instructions)	9 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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 09/30/15	5 Payee name Campaign Strategies, Inc.	
6 Amount (\$) \$3,346.22	7 Payee address; City; State; Zip Code P.O. Box 3308 Houston TX 77253	
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vote by mail program
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/30/15	5 Payee name SFA High School	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 1314 Texas Avenue #1120 Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Golf Hole Sponsor
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/01/15	5 Payee name InFocus Campaigns	
6 Amount (\$) \$906.04	7 Payee address; City; State; Zip Code P.O. Box 10726 Fort Worth TX 76114	
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 Robert Gallegos		3 Filer ID (Ethics Commission filers)
	Printing Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vote by mail program
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/01/15	5 Payee name Talafero Media Group, Inc.		
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 7322 Southwest Freeway #805 Houston TX 77074		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/04/15	5 Payee name Bison Signs	
6 Amount (\$) \$1,621.04	7 Payee address; City; State; Zip Code 10100 Clay Road Suite G Houston TX 77080	
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign signs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/04/15	5 Payee name Lillie Schechter Consulting	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 1 Greenway Plaza Suite 470 Houston TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/07/15	5 Payee name InFocus Campaigns	
6 Amount (\$) \$1,809.64	7 Payee address; City; State; Zip Code P.O. Box 10726 Fort Worth TX 76114	
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 Robert Gallegos		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone bank program
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/09/15	5 Payee name Bison Signs		
6 Amount (\$) \$795.64	7 Payee address; City; State; Zip Code 10100 Clay Road Suite G Houston TX 77080		
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign signs
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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/09/15	5 Payee name Sprint 2 Print	
6 Amount (\$) \$339.91	7 Payee address; City; State; Zip Code 8748 Clay Rd. Suite 300 Houston TX 77080	
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/10/15	5 Payee name J. Dinkins Consulting	
6 Amount (\$) \$380.00	7 Payee address; City; State; Zip Code P.O. Box 992 Houston TX 77001	
8 PURPOSE OF EXPENDITURE	(a) Category Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense General consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/11/15	5 Payee name V & M Solutions	
6 Amount (\$) \$1,080.00	7 Payee address; City; State; Zip Code 12727 Cooper Break Dr. Houston TX 77346	
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 Robert Gallegos		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field staff
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 10/14/15	5 Payee name V & M Solutions		
6 Amount (\$) \$792.00	7 Payee address; City; State; Zip Code 12727 Cooper Break Dr. Houston TX 77346		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Field staff
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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/19/15	5 Payee name Campaign Strategies, Inc.	
6 Amount (\$) \$31,074.97	7 Payee address; City; State; Zip Code P.O. Box 3308 Houston TX 77253	
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of mail pieces
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/22/15	5 Payee name V&M Solutions	
6 Amount (\$) \$432.00	7 Payee address; City; State; Zip Code 12727 Cooper Break Dr. Houston TX 77346	
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field staff
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/28/2015	5 Payee name Piryx	
6 Amount (\$) 63.26	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

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

4 Date 9/29/2015	5 Payee name Piryx		
6 Amount (\$) 25.88	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105		

8 PURPOSE OF EXPENDITURE	(a) Category Fees	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing 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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/5/2015	5 Payee name Piryx	
6 Amount (\$) 43.14	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/8/2015	5 Payee name Piryx	
6 Amount (\$) 1.44	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/13/2015	5 Payee name Piryx	
6 Amount (\$) 14.38	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105	
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 Robert Gallegos		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/16/2015	5 Payee name Piryx		
6 Amount (\$) 14.38	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Fees	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing 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 Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/19/2015	5 Payee name Piryx	
6 Amount (\$) 14.38	7 Payee address; City; State; Zip Code 649 Mission Street, #204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online contribution processing fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/22/15	5 Payee name Nelly Fraga	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 5501 Brady Houston TX 77011	
8 PURPOSE OF EXPENDITURE	(a) Category Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ambassadors International Ballet Folklorico Sponsorship
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 09/28/15	6 Payee name El Tiempo	
7 Amount (\$) \$139.71	8 Payee address; City; State; Zip Code 2814 Navigation Blvd. Houston TX 77003	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 09/30/15	6 Payee name East End Table	
7 Amount (\$) \$132.87	8 Payee address; City; State; Zip Code 6701 Capitol Street Houston TX 77011	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner with Community
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 09/30/15	6 Payee name Net Victories	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD**SCHEDULE F4**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$18.31	309 NW 46th St. Seattle WA 98107	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date	6 Payee name		
10/01/15	Net Victories		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
\$0.18	309 NW 46th St. Seattle WA 98107		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held	

5 Date	6 Payee name		
10/02/15	Lowe's		
7 Amount (\$)	8 Payee address; City; State; Zip Code		
\$21.56	1000 Gulfgate Center Mall Houston TX 77087		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/03/15	6 Payee name Dona Chela Taqueria		
7 Amount (\$) \$29.15	8 Payee address; City; State; Zip Code 1112 76th St. Houston TX 77012		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast with volunteers	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 10/04/15	6 Payee name Office Depot		
7 Amount (\$) \$33.95	8 Payee address; City; State; Zip Code 1576 West Gray Street Houston TX 77019		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Office Overhead/Rental Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/05/15	6 Payee name Carroll Printing
7 Amount (\$) \$822.70	8 Payee address; City; State; Zip Code 2907 Canal Street Houston TX 77003

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
------------------------------	---	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing campaign materials

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
--	-------------------------------	---------------	-------------

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 10/05/15	6 Payee name Carroll Printing	
7 Amount (\$) \$487.13	8 Payee address; City; State; Zip Code 2907 Canal Street Houston TX 77003	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/05/15	6 Payee name Cricket	
7 Amount (\$) \$100.00	8 Payee address; City; State; Zip Code 6816 Harrisburg Blvd Houston TX 77011	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign phones
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/06/15	6 Payee name Little Buddy	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$3.00	2001 S Wayside Houston TX 77023	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Drinks for block walkers
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/07/15	6 Payee name Net Victories		
7 Amount (\$) \$50.00	8 Payee address; City; State; Zip Code 309 NW 46th St. Seattle WA 98107		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held	

5 Date 10/8/2015	6 Payee name Harris County Democratic Party		
7 Amount (\$) 500.00	8 Payee address; City; State; Zip Code 1445 North Loop W Houston TX 77008		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of JRR Dinner
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/08/15	6 Payee name CallFire		
7 Amount (\$) \$250.00	8 Payee address; City; State; Zip Code 1410 2nd Street Suite 200 Santa Monica CA 90401		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign phone program	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 10/08/15	6 Payee name Net Victories		
7 Amount (\$) \$0.18	8 Payee address; City; State; Zip Code 309 NW 46th St. Seattle WA 98107		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Advertising Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/08/15	6 Payee name Net Victories
7 Amount (\$) \$18.29	8 Payee address; City; State; Zip Code 309 NW 46th St. Seattle WA 98107

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
-----------------------	---	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
---------------------------	---	---

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held
---	-------------------------------	---------------------------

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 10/08/15	6 Payee name Vista Print	
7 Amount (\$) \$275.69	8 Payee address; City; State; Zip Code 95 Hayden Avenue Lexington MA 0.2421	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/09/15	6 Payee name Vista Print	
7 Amount (\$) \$24.82	8 Payee address; City; State; Zip Code 95 Hayden Avenue Lexington MA 0.2421	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/11/15	6 Payee name CallFire	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$500.00	1410 2nd Street Suite 200 Santa Monica CA 90401	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign phone program
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/11/15	6 Payee name CallFire		
7 Amount (\$) \$500.00	8 Payee address; City; State; Zip Code 1410 2nd Street Suite 200 Santa Monica CA 90401		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign phone program	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 10/12/15	6 Payee name Tejano Democrats		
7 Amount (\$) \$300.00	8 Payee address; City; State; Zip Code 2314 Tannehill Drive Houston TX 77008		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Roast & Toast
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/13/15	6 Payee name Montrose Counseling		
7 Amount (\$) \$250.00	8 Payee address; City; State; Zip Code 401 Branard St #2 Houston TX 77006		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 10/14/15	6 Payee name El Tiempo		
7 Amount (\$) \$93.26	8 Payee address; City; State; Zip Code 2814 Navigation Blvd. Houston TX 77003		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Food/Beverage Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Juliet Stipeche fundraiser
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/14/15	6 Payee name El Tiempo
7 Amount (\$) \$228.56	8 Payee address; City; State; Zip Code 2814 Navigation Blvd. Houston TX 77003

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
------------------------------	---	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Juliet Stipeche fundraiser

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
--	-------------------------------	---------------	-------------

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 10/17/15	6 Payee name Kelley's Country Kitchen	
7 Amount (\$) \$70.60	8 Payee address; City; State; Zip Code 8015 Park Place Houston TX 77087	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with block walkers
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/18/15	6 Payee name Luby's	
7 Amount (\$) \$91.80	8 Payee address; City; State; Zip Code 5335 Gulf Freeway Houston TX 77023	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner with block walkers
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/18/15	6 Payee name Lowe's	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
\$13.88	1000 Gulfgate Center Mall Houston TX 77087	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date	6 Payee name	
10/19/15	Ruchi's Mexican Restaurant	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
\$38.30	6969 Gulf Freeway #270 Houston TX 77087	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held	

5 Date	6 Payee name
10/19/15	Academy
7 Amount (\$)	8 Payee address; City; State; Zip Code
\$337.65	10414 Gulf Fwy Houston TX 77034

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tents for voting locations
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/20/15	6 Payee name CallFire		
7 Amount (\$) \$500.00	8 Payee address; City; State; Zip Code 1410 2nd Street Suite 200 Santa Monica CA 90401		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign phone program	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 10/20/15	6 Payee name CallFire		
7 Amount (\$) \$250.00	8 Payee address; City; State; Zip Code 1410 2nd Street Suite 200 Santa Monica CA 90401		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Advertising Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/> Campaign phone program
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/21/15	6 Payee name Facebook
7 Amount (\$) 25.19	8 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park CA 94025

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
-----------------------	---	--

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook advertising
---------------------------	---	--

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
---	-------------------------------	---------------	-------------

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 10/15/15	6 Payee name Carroll Printing	
7 Amount (\$) \$1,531.74	8 Payee address; City; State; Zip Code 2907 Canal Street Houston TX 77003	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/22/15	6 Payee name Fresh Spirit Wellness for Women, Inc.	
7 Amount (\$) \$100.00	8 Payee address; City; State; Zip Code 4 Riverway Houston TX 77056	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/10/15	6 Payee name Oak Leaf Smokehouse	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$40.65	1000 Telephone Road Houston TX 77023	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/22/15	6 Payee name Lowe's		
7 Amount (\$) \$27.63	8 Payee address; City; State; Zip Code 1000 Gulfgate Center Mall Houston TX 77087		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED