

**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	<b>OFFICE USE ONLY</b>	
	NICKNAME LAST SUFFIX		
Mr. Bill King		Date Received	10/5/2015
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX; APT/SUITE #; CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked	
	5900 Memorial 101-B Houston TX 77007		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION		
(832) 203-8660			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI	Receipt #	Amount
	NICKNAME LAST SUFFIX	Date Processed	
	Ms. Paula Arnold	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence)	STREET ADDRESS (No PO Box Please); APT/SUITE #; CITY; STATE; ZIP CODE		
1520 Tulane St. Houston TX 77008			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION		
(713) 962-1905			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 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
7/1/2015			9/24/2015
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE	
11/3/2015		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
		Mayor	

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

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

14 FILER NAME **Bill King** 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  <input type="checkbox"/> GENERAL  <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	\$10.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$284,031.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$626,621.57
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$322,474.66
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$650,000.00

18 AFFIDAVIT

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

Bill King

\_\_\_\_\_  
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 Bill King		20 Filer ID (Ethics Commission Filers)
21	<b>SCHEDULE SUBTOTALS</b>	<b>SUBTOTAL</b>
	<b>NAME OF SCHEDULE</b>	<b>AMOUNT</b>
1	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 278446
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 5575
3	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4	SCHEDULE E: LOANS	\$ 150000
5	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 626622
6	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0
8	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1950
9	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
10	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
11	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 Bill King

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 Bill King 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Doug McMurrey	7 Amount of contributions (\$)
7/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	100

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Peter Thompson	7 Amount of contributions (\$)
7/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	100

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jerald Broussard	7 Amount of contributions (\$)
7/1/2015	6 Contributor address; City; State; Zip Code Kingwood TX 77339	1000

8 Principal occupation / Job title (See Instructions) Business consulting	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Tom Hail	7 Amount of contributions (\$)
7/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	200

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
7/1/2015	R.L. Cubley ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77259	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions)	
7/4/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stuart Stedman ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Asset Management		9 Employer (See Instructions)	
7/6/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Michael W. Perrin ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)	
7/10/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Andrew Nobbay ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77046	7	Amount of contributions (\$) 600
8 Principal occupation / Job title (See Instructions) Finance Management		9 Employer (See Instructions)	
Mark Cover	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark Cover	7	Amount of contributions (\$) 600

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
7/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77002	2000	
8 Principal occupation / Job title (See Instructions) Real Estate Development		9 Employer (See Instructions)	
4 Date 7/10/2015	5 Full name of contributor Ali Ebrahimi	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 3000
	6 Contributor address; City; State; Zip Code Houston TX 77042		
8 Principal occupation / Job title (See Instructions) Real estate development		9 Employer (See Instructions)	
4 Date 7/10/2015	5 Full name of contributor James McGrath	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100
	6 Contributor address; City; State; Zip Code Houston TX 77042		
8 Principal occupation / Job title (See Instructions) Media Consultant		9 Employer (See Instructions)	
4 Date 7/13/2015	5 Full name of contributor Jack L. Baber III	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100
	6 Contributor address; City; State; Zip Code Houston TX 77027		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Hoyer	7	Amount of contributions (\$)
	7/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		100
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# ) Scott Rozzell	7	Amount of contributions (\$)
	7/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		5000
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Paula Dyer	7	Amount of contributions (\$)
	7/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		25
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# ) Jeffrey Baker	7	Amount of contributions (\$)
	7/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		25
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 Bill King		3	Filer ID (Ethics Commission filers)
7/20/2015	Cindy Vincent ----- 6 Contributor address; City; State; Zip Code Kingwood TX 77345	7	Amount of contributions (\$) 150
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/20/2015	Patricia Holmes ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
7/20/2015	Gerald Anhalt ----- 6 Contributor address; City; State; Zip Code Houston TX 77096	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions)	
7/22/2015	Robert Hafey ----- 6 Contributor address; City; State; Zip Code Sugar Land TX 77479	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Business consulting		9 Employer (See Instructions)	
	Mercedes Haass ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 500

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
7/23/2015	6 Contributor address; City; State; Zip Code San Antonio TX 78258		250
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)	
4 Date 7/24/2015	5 Full name of contributor Danny Walden	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 5
	6 Contributor address; City; State; Zip Code Houston TX 77007		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 7/25/2015	5 Full name of contributor Ralph Akin	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100
	6 Contributor address; City; State; Zip Code Houston TX 77077		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 7/26/2015	5 Full name of contributor William Dickey	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 500
	6 Contributor address; City; State; Zip Code Houston TX 77098		
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ralph Clinard	7	Amount of contributions (\$)
7/26/2015	6 Contributor address; City; State; Zip Code Houston TX 77082		100
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Don Schlossberg	7	Amount of contributions (\$)
7/26/2015	6 Contributor address; City; State; Zip Code The Woodlands TX 77380		10
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# ) Christian Seger	7	Amount of contributions (\$)
7/26/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		100
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# ) Jay Karahan	7	Amount of contributions (\$)
7/26/2015	6 Contributor address; City; State; Zip Code Houston TX 77219		50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

2 FILER NAME Bill King 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard C. Haass	7 Amount of contributions (\$)
7/27/2015	6 Contributor address; City; State; Zip Code San Antonio TX 78258	250

8 Principal occupation / Job title (See Instructions) CTO	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lee Neathery	7 Amount of contributions (\$)
7/27/2015	6 Contributor address; City; State; Zip Code Houston TX 77007	1000

8 Principal occupation / Job title (See Instructions) Co-Owner	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gregory Nelson	7 Amount of contributions (\$)
7/29/2015	6 Contributor address; City; State; Zip Code Houston TX 77002	2000

8 Principal occupation / Job title (See Instructions) Partner	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Vick	7 Amount of contributions (\$)
7/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77098	100

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
7/30/2015	Roksan Okan-Vick ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77098	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/30/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas A. Reiser ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77007	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Insurance Broker		9 Employer (See Instructions)	
7/30/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jay Bettis ----- 6 Contributor address;                      City;                      State;                      Zip Code Clear Lake Shores TX 77565	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/1/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) T.S. Hirtz ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77098	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Lawyer		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 Bill King		3 Filer ID (Ethics Commission filers)	
8/3/2015	Ralph O'Connor ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions)	
8/3/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Hunter L. Martin, Jr. ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/3/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jack Dulworth ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77004	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/3/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jerrilyn Terry ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77062	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/3/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dr. Sharon J. Garner ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77062	7	Amount of contributions (\$) 300

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
8/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77080	60	
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# ) J.S. Marks	7 Amount of contributions (\$)	
8/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	5000	
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Norm Wigington	7 Amount of contributions (\$)	
8/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	250	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Patricia Gayle Fallon	7 Amount of contributions (\$)	
8/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77098	250	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Curtiss Brown					
	6 Contributor address;			City;	State;	Zip Code
8/10/2015				Galveston	TX	77550
						7 Amount of contributions (\$)
						25

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 McGrath					
	6 Contributor address;			City;	State;	Zip Code
8/10/2015				Houston	TX	77042
						7 Amount of contributions (\$)
						100

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	J. Cary Gray					
	6 Contributor address;			City;	State;	Zip Code
8/11/2015				Houston	TX	77056
						7 Amount of contributions (\$)
						1000

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	David Keel					
	6 Contributor address;			City;	State;	Zip Code
8/11/2015				Houston	TX	77094
						7 Amount of contributions (\$)
						1000

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

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
8/11/2015	Ramsay Elder ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/11/2015	Kyle Sanders ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston Tx 77025	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/12/2015	David Hannah III ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/13/2015	Katharine Gay ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77058	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Car Dealer		9 Employer (See Instructions)	
8/13/2015	George Levan ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) 500

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
8/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77005		1000
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions)	
4 Date 8/15/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) R.A. Walker 6 Contributor address; City; State; Zip Code The Woodlands TX 77380		7 Amount of contributions (\$) 1500
8 Principal occupation / Job title (See Instructions) Chairman, President and CEO		9 Employer (See Instructions)	
4 Date 8/15/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) William Jackson 6 Contributor address; City; State; Zip Code Houston TX 77027		7 Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions)	
4 Date 8/17/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dennis Thornton 6 Contributor address; City; State; Zip Code Houston TX 77058		7 Amount of contributions (\$) 100
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# ) Ralph Clinard		7 Amount of contributions (\$) 100

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

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

8/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77082	100
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8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions)
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8/17/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Easton 6 Contributor address; City; State; Zip Code Houston TX 77227	7 Amount of contributions (\$)  200
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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8/18/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joanne Hook 6 Contributor address; City; State; Zip Code Houston TX 77007	7 Amount of contributions (\$)  100
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8 Principal occupation / Job title (See Instructions) Homemaker	9 Employer (See Instructions)
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8/18/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kathleen Jamail 6 Contributor address; City; State; Zip Code Houston TX 77024	7 Amount of contributions (\$)  50
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8 Principal occupation / Job title (See Instructions) Staffer	9 Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas Wilkinson	7	Amount of contributions (\$)
	8/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		1000
8	Principal occupation / Job title (See Instructions) Real Estate		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Don Fair	7	Amount of contributions (\$)
	8/18/2015	6 Contributor address; City; State; Zip Code Kingwood TX 77339		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# ) J. Philip McCormick	7	Amount of contributions (\$)
	8/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77025		500
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Danielle Ellis	7	Amount of contributions (\$)
	8/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		100
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 Bill King		3	Filer ID (Ethics Commission filers)
8/19/2015	James Bashaw ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	7	Amount of contributions (\$) 350
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/19/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Elizabeth Lauzon ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77062	7	Amount of contributions (\$) 150
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/19/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Tom Allen ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77096	7	Amount of contributions (\$) 150
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/19/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Alan Baum ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/19/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Imtihan Jawdat, M.D. ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	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 Bill King		3 Filer ID (Ethics Commission filers)	
8/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77025		50
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions)	
8/20/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen E. Brice 6 Contributor address; City; State; Zip Code Stafford TX 77477		7 Amount of contributions (\$)  1000
8 Principal occupation / Job title (See Instructions) Investor		9 Employer (See Instructions)	
8/20/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John W. Lodge III 6 Contributor address; City; State; Zip Code Houston TX 77213		7 Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)	
8/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Phyllis Sefeldt 6 Contributor address; City; State; Zip Code Houston TX 77024		7 Amount of contributions (\$)  50
8 Principal occupation / Job title (See Instructions) Executive Assistant		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Beirne, Maynard & Parsons, LLP		7 Amount of contributions (\$)
8/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		1000

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Pattie Everett		7 Amount of contributions (\$)
8/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77046		5000

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark Denman		7 Amount of contributions (\$)
8/24/2015	6 Contributor address; City; State; Zip Code Nassau Bay TX 77058		500

8 Principal occupation / Job title (See Instructions) Mayor	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) William Dickey		7 Amount of contributions (\$)
8/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77098		500

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
8/24/2015	T.H. Dinerstein ----- 6 Contributor address; City; State; Zip Code Houston TX 77046	7	Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions)	
8/24/2015	4 Date 5 Full name of contributor Lora Jean Kilroy <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions)	
8/24/2015	4 Date 5 Full name of contributor Sidney Adger <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/24/2015	4 Date 5 Full name of contributor Joseph McReynolds <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/24/2015	4 Date 5 Full name of contributor J.L. Emerson <input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$) 50



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
8/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1000
8 Principal occupation / Job title (See Instructions) Real estate lender		9 Employer (See Instructions)	
4 Date 8/24/2015	5 Full name of contributor Joe McQuade	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100
	6 Contributor address; City; State; Zip Code Houston TX 77061		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 8/25/2015	5 Full name of contributor Clive Runnells	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 2500
	6 Contributor address; City; State; Zip Code Houston TX 77027		
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions)	
4 Date 8/25/2015	5 Full name of contributor Sara Bettencourt	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 5000
	6 Contributor address; City; State; Zip Code Houston TX 77024		
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Moez S. Mangalji					
	6 Contributor address;			City;	State;	Zip Code
8/26/2015			Houston	TX	77024	
						7 Amount of contributions (\$)  5000

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Cathryn Gabor					
	6 Contributor address;			City;	State;	Zip Code
8/26/2015			Houston	TX	77019	
						7 Amount of contributions (\$)  250

8 Principal occupation / Job title (See Instructions) Executive Search	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Barbara Lewis					
	6 Contributor address;			City;	State;	Zip Code
8/26/2015			Houston	TX	77098	
						7 Amount of contributions (\$)  2500

8 Principal occupation / Job title (See Instructions) President	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Steven D. Alvis					
	6 Contributor address;			City;	State;	Zip Code
8/26/2015			Houston	TX	77040	
						7 Amount of contributions (\$)  5000

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
8/27/2015	William T. Luedke IV ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)	
8/27/2015	Katherine Fay ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions)	
8/27/2015	Elizabeth Ingersoll ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77080	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/28/2015	Jean Hancock Chernosky ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77007	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
8/28/2015	G. Dianne Johnson ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) 500



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Debra Hayes					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
8/31/2015	Houston TX 77055					250

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Edgar Ashley Smith					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
8/31/2015	Houston TX 77046					1000

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Peter Lauzon					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
8/31/2015	Houston TX 77062					500

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Kelly Gerland					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
8/31/2015	Houston TX 77018					100

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
8/31/2015	Kelly Gerland ----- 6 Contributor address; City; State; Zip Code Houston TX 77018	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lawrence W. Hill ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions)	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kyle Lippman ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions) Real Estate Development		9 Employer (See Instructions)	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jane L. Williams ----- 6 Contributor address; City; State; Zip Code Seabrook TX 77586	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Business owner		9 Employer (See Instructions)	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Charles Jeremiah ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 500

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77042		100
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bill Gross 6 Contributor address; City; State; Zip Code Houston TX 77024		7 Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Financial advisor		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Nicholas Florescu 6 Contributor address; City; State; Zip Code Houston TX 77019		7 Amount of contributions (\$)  200
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John C. Haugen 6 Contributor address; City; State; Zip Code Nassau Bay TX 77058		7 Amount of contributions (\$)  100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/1/2015		William E. Gipson
		6	Contributor address; City; State; Zip Code
			Houston TX 77019
		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# )
	9/1/2015		David R. Hoyer, Jr.
		6	Contributor address; City; State; Zip Code
			Houston TX 77019
		7	Amount of contributions (\$)
			100
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Physician		
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/1/2015		Kent Loftin
		6	Contributor address; City; State; Zip Code
			Houston TX 77003
		7	Amount of contributions (\$)
			50
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# )
	9/1/2015		Citizens for a Safer Houston PAC
		6	Contributor address; City; State; Zip Code
			Houston TX 77005
		7	Amount of contributions (\$)
			100
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 Bill King		3 Filer ID (Ethics Commission filers)	
9/1/2015	James T. McSpadden, Jr. ----- 6 Contributor address; City; State; Zip Code Houston TX 77077	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Albert Luna III ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lauris Tam ----- 6 Contributor address; City; State; Zip Code Sugar Land TX 77478	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James C. Simons ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jeff Dinerstein	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 Bill King 3 Filer ID (Ethics Commission filers)

9/1/2015	6 Contributor address; <span style="margin-left: 100px;">City;</span> <span style="margin-left: 100px;">State;</span> <span style="margin-left: 100px;">Zip Code</span> Houston TX 77005	500
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8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions)
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9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Fred Flickinger	7 Amount of contributions (\$)  250
	6 Contributor address; <span style="margin-left: 100px;">City;</span> <span style="margin-left: 100px;">State;</span> <span style="margin-left: 100px;">Zip Code</span> Kingwood TX 77345	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Les Flynn	7 Amount of contributions (\$)  200
	6 Contributor address; <span style="margin-left: 100px;">City;</span> <span style="margin-left: 100px;">State;</span> <span style="margin-left: 100px;">Zip Code</span> Lilburn GA 30047	

8 Principal occupation / Job title (See Instructions) Chief Financial Officer	9 Employer (See Instructions)
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9/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ralph Fite	7 Amount of contributions (\$)  50
	6 Contributor address; <span style="margin-left: 100px;">City;</span> <span style="margin-left: 100px;">State;</span> <span style="margin-left: 100px;">Zip Code</span> Houston TX 77057	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	R.C. Lee				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/1/2015	Houston TX 77096				25

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Jane Bock				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/1/2015	Houston TX 77096				20

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Melinda Brents				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/1/2015	Houston TX 77061				200

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Truett Latimer				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/1/2015	Houston TX 77027				100

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
9/1/2015	Annette G. Goldberg ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77025	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/2/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Suzanne S. Miller ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/2/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas R. Mongan ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/2/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Ward ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions)	
9/2/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jodie H. Skorecki ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 500

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
9/2/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	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# ) Lorinda B Madison	7 Amount of contributions (\$)
9/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1000
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard W. Weekley	7 Amount of contributions (\$)
9/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77055	5000
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Carol Butner	7 Amount of contributions (\$)
9/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	500
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions)

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

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

2 FILER NAME Bill King 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Patricia Holmes		
	6 Contributor address; City; State; Zip Code		
9/3/2015	Houston TX 77027		1000

8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Ned S. Holmes		
	6 Contributor address; City; State; Zip Code		
9/3/2015	Houston TX 77007		5000

8 Principal occupation / Job title (See Instructions) Investing	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Edwin Bluestein		
	6 Contributor address; City; State; Zip Code		
9/3/2015	La Porte TX 77571		500

8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Andrew Cordes		
	6 Contributor address; City; State; Zip Code		
9/4/2015	Houston TX 77056		1000

8 Principal occupation / Job title (See Instructions) Photography	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input checked="" type="checkbox"/> out of state PAC(ID# C00506733 )	
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/4/2015	Cadence Bank, NA PAC ----- 6 Contributor address; City; State; Zip Code Birmingham AL 35203	7	Amount of contributions (\$)  2500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/4/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John P. Kirk ----- 6 Contributor address; City; State; Zip Code Houston TX 77007	7	Amount of contributions (\$)  100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/6/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Imogen Papadopoulos ----- 6 Contributor address; City; State; Zip Code Houston Tx 77024	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)	
9/8/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James D'Agostino ----- 6 Contributor address; City; State; Zip Code Houston TX 77098	7	Amount of contributions (\$)  2500
8 Principal occupation / Job title (See Instructions) Managing Director		9 Employer (See Instructions)	
	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) George Hancock	7	Amount of contributions (\$)  2500

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/8/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	100	
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# ) Ben Morse	7 Amount of contributions (\$)	
9/8/2015	6 Contributor address; City; State; Zip Code Houston TX 77002	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# ) Howard Holsenbeck	7 Amount of contributions (\$)	
9/8/2015	6 Contributor address; City; State; Zip Code Houston TX 77074	1000	
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mimi Levine	7 Amount of contributions (\$)	
9/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	2500	
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions)	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/9/2015		Richard C. Haass
		6	Contributor address; City; State; Zip Code
			San Antonio TX 78258
		7	Amount of contributions (\$)
			250
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	CTO		
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/9/2015		Robert Cruikshank
		6	Contributor address; City; State; Zip Code
			Houston TX 77024
		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# )
	9/9/2015		Stuart Stedman
		6	Contributor address; City; State; Zip Code
			Houston TX 77019
		7	Amount of contributions (\$)
			1000
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Asset Management		
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/9/2015		Philip Schneidau
		6	Contributor address; City; State; Zip Code
			Houston TX 77027
		7	Amount of contributions (\$)
			1000
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Property management		
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 Bill King		3	Filer ID (Ethics Commission filers)
9/9/2015	6 Contributor address; City; State; Zip Code Joan Schnitzer Levy Houston TX 77019	7	Amount of contributions (\$) 1500
8 Principal occupation / Job title (See Instructions) Philanthropist		9 Employer (See Instructions)	
9/9/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Steve Goodman 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Financial services		9 Employer (See Instructions)	
9/9/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rick Diehl 6 Contributor address; City; State; Zip Code Houston TX 77007	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)	
9/10/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James McGrath 6 Contributor address; City; State; Zip Code Houston TX 77042	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Media Consultant		9 Employer (See Instructions)	
	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James E. Warren	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 Bill King		3 Filer ID (Ethics Commission filers)	
9/11/2015	6 Contributor address; City; State; Zip Code League City TX 77573		1000
8 Principal occupation / Job title (See Instructions) Wealth management		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sally Tyler	7	Amount of contributions (\$)
9/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		100
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# ) Jeffrey Lyman	7	Amount of contributions (\$)
9/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		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# ) John Lodge IV	7	Amount of contributions (\$)
9/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77013		1000
8 Principal occupation / Job title (See Instructions) VP-Operations		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Susan Thompson	7	Amount of contributions (\$)
	9/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		1500
8	Principal occupation / Job title (See Instructions) Community Volunteer		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Imad F. Abdullah	7	Amount of contributions (\$)
	9/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		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# ) Paula Arnold	7	Amount of contributions (\$)
	9/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		500
8	Principal occupation / Job title (See Instructions) Public relations		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Suzi Dore	7	Amount of contributions (\$)
	9/12/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		5000
8	Principal occupation / Job title (See Instructions) printing services		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 Bill King		3	Filer ID (Ethics Commission filers)
9/12/2015	William Dore ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77063	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) printing services		9 Employer (See Instructions)	
9/14/2015	Brent Perry ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77062	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/14/2015	Ralph Parr ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77062	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) Sales Associate		9 Employer (See Instructions)	
9/14/2015	Don Pennell ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77002	7	Amount of contributions (\$) 25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/14/2015	Edward Fred Heyne III ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77002	7	Amount of contributions (\$) 25

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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9/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	100
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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9/14/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Betty Vann 6 Contributor address; City; State; Zip Code Houston TX 77056	7 Amount of contributions (\$)  500
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8 Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions)
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9/14/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Janet Lodge 6 Contributor address; City; State; Zip Code Houston TX 77213	7 Amount of contributions (\$)  1000
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8 Principal occupation / Job title (See Instructions) Principal	9 Employer (See Instructions)
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9/14/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John W. Lodge III 6 Contributor address; City; State; Zip Code Houston TX 77213	7 Amount of contributions (\$)  4000
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8 Principal occupation / Job title (See Instructions) President	9 Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Don McCrory	7	Amount of contributions (\$)
	9/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		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# ) Raymond R. Betz	7	Amount of contributions (\$)
	9/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77079		1000
8	Principal occupation / Job title (See Instructions) CEO		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Redford	7	Amount of contributions (\$)
	9/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		150
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# ) Bill King	7	Amount of contributions (\$)
	9/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		25
8	Principal occupation / Job title (See Instructions) Businessman		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 Bill King		3 Filer ID (Ethics Commission filers)	
9/15/2015	Tina Pyne ----- 6 Contributor address; City; State; Zip Code Houston TX 77251	7	Amount of contributions (\$) 4500
8 Principal occupation / Job title (See Instructions) Community volunteer		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Herbert Levine ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions) Real Estate Developer		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christine Draughn ----- 6 Contributor address; City; State; Zip Code Montgomery TX 77356	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas Draughn ----- 6 Contributor address; City; State; Zip Code Montgomery TX 77356	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ramesh Kalluri ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 50



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77077	1000	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)	
4 Date 9/16/2015	5 Full name of contributor Laura Jaramillo out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Pearland TX 77584	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Senior Vice President		9 Employer (See Instructions)	
4 Date 9/16/2015	5 Full name of contributor David Griffis out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77079	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 9/17/2015	5 Full name of contributor Steven Howell out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77098	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/18/2015		Frances Nussbaum
		6	Contributor address; City; State; Zip Code
			Houston TX 77058
		7	Amount of contributions (\$)
			100
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# )
	9/18/2015		Peter Thompson
		6	Contributor address; City; State; Zip Code
			Houston TX 77024
		7	Amount of contributions (\$)
			100
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# )
	9/18/2015		Willis Dunkum
		6	Contributor address; City; State; Zip Code
			Houston TX 77056
		7	Amount of contributions (\$)
			1000
8	Principal occupation / Job title (See Instructions) Real estate finance		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/18/2015		Perry Britt Nolen
		6	Contributor address; City; State; Zip Code
			Houston TX 77006
		7	Amount of contributions (\$)
			50
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 Bill King		3	Filer ID (Ethics Commission filers)
9/21/2015	Sockalingam Kannappan ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77089	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions)	
9/21/2015	Rodney H. Margolis ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions)	
9/21/2015	Lisa Mellencamp ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Assistant General Counsel		9 Employer (See Instructions)	
9/21/2015	Elizabeth Petersen ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/21/2015	H. Dean Lane, Jr. ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) 250

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	1000	
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions)	
4 Date 9/21/2015	5 Full name of contributor Randall Meyer out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77005	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 9/21/2015	5 Full name of contributor James J. Braniff III out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Insurance Broker		9 Employer (See Instructions)	
4 Date 9/21/2015	5 Full name of contributor Joe F. Wheat PC out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
	Dr. James Moore	7 Amount of contributions (\$)
9/21/2015	6 Contributor address; City; State; Zip Code	
	Houston TX 77056	500

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
	Kelly Frels	7 Amount of contributions (\$)
9/21/2015	6 Contributor address; City; State; Zip Code	
	Houston TX 77056	250

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
	Holloway Frost	7 Amount of contributions (\$)
9/21/2015	6 Contributor address; City; State; Zip Code	
	Houston TX 77001	5000

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Founder and CEO	

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
	Debra Marcell Real Estate LLC	7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code	
	Missouri City TX 77459	1000

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# )	
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
9/22/2015	Anthony Zagorski ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Manufacturing		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Tom Mesa ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77034	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) William E. Penland, Jr. ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Harris ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77079	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Rickel	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 Bill King		3 Filer ID (Ethics Commission filers)	
9/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		750
8 Principal occupation / Job title (See Instructions) SVP and CFO		9 Employer (See Instructions)	
4 Date 9/22/2015	5 Full name of contributor James Druzvik out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Tomball TX 77377	7	Amount of contributions (\$)  250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 9/22/2015	5 Full name of contributor Vicki West out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions)	
4 Date 9/22/2015	5 Full name of contributor Mano DeAyala out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$)  2000
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Sallie Morian						
	6 Contributor address;			City;	State;	Zip Code	
9/22/2015			Houston	TX	77005		7 Amount of contributions (\$) 500

8 Principal occupation / Job title (See Instructions) Aircraft services	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Michael Clark						
	6 Contributor address;			City;	State;	Zip Code	
9/22/2015			Houston	TX	77005		7 Amount of contributions (\$) 200

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Krista Tucek						
	6 Contributor address;			City;	State;	Zip Code	
9/22/2015			Houston	TX	77008		7 Amount of contributions (\$) 1000

8 Principal occupation / Job title (See Instructions) Executive Director	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Don Hooper						
	6 Contributor address;			City;	State;	Zip Code	
9/22/2015			Richmond	TX	77406		7 Amount of contributions (\$) 50

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
9/22/2015	Richard C. Haass ----- 6 Contributor address; City; State; Zip Code San Antonio TX 78258	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) CTO	9	Employer (See Instructions)
9/22/2015	Katharine Gay ----- 6 Contributor address; City; State; Zip Code Houston TX 77058	7	Amount of contributions (\$) 1000
8	Principal occupation / Job title (See Instructions) Car Dealer	9	Employer (See Instructions)
9/22/2015	Glenn Ballard ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) Lawyer	9	Employer (See Instructions)
9/22/2015	Marianne Ibrahim ----- 6 Contributor address; City; State; Zip Code Houston TX 77098	7	Amount of contributions (\$) 1000
8	Principal occupation / Job title (See Instructions) Legal compliance	9	Employer (See Instructions)
9/22/2015	Gary Crum ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 500

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	5000	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rob Hardin 6 Contributor address; City; State; Zip Code The Woodlands TX 77381	7 Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions) Financial advisor		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ralph Clinard 6 Contributor address; City; State; Zip Code Houston TX 77082	7 Amount of contributions (\$) 100	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Fred E. Bullough 6 Contributor address; City; State; Zip Code Kingwood TX 77339	7 Amount of contributions (\$) 50	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) The Hesterberg Family Trust	7 Amount of contributions (\$) 50	

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total Pages Schedule A1:
2 FILER NAME Bill King			3 Filer ID (Ethics Commission filers)
9/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	2500	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stacey Gillman Wimbish 6 Contributor address; City; State; Zip Code Houston TX 77027	7 Amount of contributions (\$) 500	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Moose Rosenfeld 6 Contributor address; City; State; Zip Code Houston TX 77056	7 Amount of contributions (\$) 100	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Steven Finkelman 6 Contributor address; City; State; Zip Code Houston TX 77096	7 Amount of contributions (\$) 250	
8 Principal occupation / Job title (See Instructions) Apparel Manufacturing		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Joanie Haley					7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code					50
			Houston TX 77057			

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Robert Herrin					7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code					500
			Houston TX 77057			

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	John Hartman					7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code					100
			Houston TX 77007			

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Paul Gessinger					7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code					100
			Houston TX 77056			

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/22/2015	William Gage ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions)	
9/22/2015	Daniel Fishman ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77071	7	Amount of contributions (\$) 18
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/22/2015	Howard Holsenbeck ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77074	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions)	
9/22/2015	Robert T Herrin III ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Executive Officer		9 Employer (See Instructions)	
9/22/2015	Gregory Hamer ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) 500

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/22/2015	6 Contributor address; Morgan City LA 70381		1000
8 Principal occupation / Job title (See Instructions) Co-founder		9 Employer (See Instructions)	
4 Date 9/23/2015	5 Full name of contributor Jerry Reese	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 2500
	6 Contributor address; Houston TX 77002		
8 Principal occupation / Job title (See Instructions) Founder		9 Employer (See Instructions)	
4 Date 9/23/2015	5 Full name of contributor Bill Chen	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 1000
	6 Contributor address; Houston TX 77058		
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions)	
4 Date 9/23/2015	5 Full name of contributor Peter C. DeLongchamps	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 1000
	6 Contributor address; Houston TX 77024		
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Alice Butrum	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		300
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# ) Diane Ofner	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		2500
8	Principal occupation / Job title (See Instructions) Interior design		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Carla Nims	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		500
8	Principal occupation / Job title (See Instructions) Energy		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bob Stokes	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77005		500
8	Principal occupation / Job title (See Instructions) President		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 Bill King		3	Filer ID (Ethics Commission filers)
9/23/2015	Nicholas Swyka ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77002	7	Amount of contributions (\$)  1000
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Peter Wareing ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77098	7	Amount of contributions (\$)  5000
8 Principal occupation / Job title (See Instructions) Co-Founder and Partner		9 Employer (See Instructions)	
9/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ellen Prella ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Event Coordinator		9 Employer (See Instructions)	
9/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Susan Rutherford ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Community volunteer		9 Employer (See Instructions)	
9/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Philip Schneidau	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 Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lester Kastleman	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		500
8	Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Don Jordan	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		2500
8	Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard Andrassy	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		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# ) Alan Jeffrey Bricker	7	Amount of contributions (\$)
	9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77071		5000
8	Principal occupation / Job title (See Instructions) Principal		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 Bill King		3	Filer ID (Ethics Commission filers)
9/23/2015	Michael Hendryx ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Culver Stedman ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions)	
9/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Houston Westside PAC ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77242	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ariel Leibovitz ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lewis Ball ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 250

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		100
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# ) Jenny Moore	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1000
8 Principal occupation / Job title (See Instructions) Founder and President		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Zary Rassoli	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		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# ) Maryam Tavakoli	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		500
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)	



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
9/24/2015	Bill Barry ----- 6 Contributor address; City; State; Zip Code Kingwood TX 77339	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor J. Richard Hall <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77055	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor Patrick Hall <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77062	7	Amount of contributions (\$) 30
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor Tracie Lane Logan <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77059	7	Amount of contributions (\$) 10
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor Charles C. Foster <input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$) 10



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	Franklin J. Harberg, Jr. ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	
		500

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	Tyson Voelkel ----- 6 Contributor address; City; State; Zip Code Friendswood TX 77456	
		1000

8 Principal occupation / Job title (See Instructions) Business Management/Strategy	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	Robert Esenwein ----- 6 Contributor address; City; State; Zip Code Hockley TX 77447	
		100

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/24/2015	Mark Brown ----- 6 Contributor address; City; State; Zip Code Houston TX 77006	
		250

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/24/2015	Anne Symonds ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)	
9/24/2015	Peggie Pentecost ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	Cindy Vincent ----- 6 Contributor address;                      City;                      State;                      Zip Code Kingwood TX 77345	7	Amount of contributions (\$) 150
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	Ted Richardson ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/24/2015	Edward J. Cummins, Jr. ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) 500

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77098	1000	
8 Principal occupation / Job title (See Instructions) Commercial Real Estate		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Gene Dewhurst	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 5000
	6 Contributor address; City; State; Zip Code Houston TX 77056		
8 Principal occupation / Job title (See Instructions) Energy		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Jim Kole	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100
	6 Contributor address; City; State; Zip Code The Woodlands TX 77384		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Jeff Gray	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 5000
	6 Contributor address; City; State; Zip Code Houston TX 77019		
8 Principal occupation / Job title (See Instructions) Real estate development		9 Employer (See Instructions)	
4 Date	5 Full name of contributor Susan Gray	<input type="checkbox"/> out of state PAC(ID# )	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 Bill King		3 Filer ID (Ethics Commission filers)	
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	5000	
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Susan Walden out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77006	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Fundraiser		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Ann Trammell out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Tim Arnoult out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas Knudson	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		1000
8 Principal occupation / Job title (See Instructions) Chairman of the Board		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Wayne Webb	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77059		100
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# ) Don Schlossberg	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code The Woodlands TX 77380		18
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# ) Aaron Webster	7	Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77005		5000
8 Principal occupation / Job title (See Instructions) Managing Member		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Patricia Jones				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015			Houston TX 77056		500

8 Principal occupation / Job title (See Instructions) Homemaker	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Connie Dyer				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015			Houston TX 77024		500

8 Principal occupation / Job title (See Instructions) Community volunteer	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Carolyn Cross				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015			Magnolia TX 77354		1000

8 Principal occupation / Job title (See Instructions) General Manager	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Arnie Altsuler				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015			Houston TX 77056		1000

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

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
9/24/2015	John Lollar ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$)                      200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Mandell ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77096	7	Amount of contributions (\$)                      25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Virginia Watt ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	7	Amount of contributions (\$)                      100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Malcolm Bailey ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057	7	Amount of contributions (\$)                      1500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
9/24/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Keith Stevenson	7	Amount of contributions (\$)                      78 of 250



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Bill King			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Khoury	7	Amount of contributions (\$)
	9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77041		100
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# ) George Levan	7	Amount of contributions (\$)
	9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77005		500
8	Principal occupation / Job title (See Instructions) Executive		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jim Blair	7	Amount of contributions (\$)
	9/24/2015	6 Contributor address; City; State; Zip Code The Woodlands TX 77380		1000
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mostafa Alavi	7	Amount of contributions (\$)
	9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		25
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Elizabeth Winston Jones						
	6 Contributor address;			City;	State;	Zip Code	
9/24/2015			Houston	TX	77007		7 Amount of contributions (\$)  25

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# )				
	Allan Port						
	6 Contributor address;			City;	State;	Zip Code	
9/24/2015			Houston	TX	77024		7 Amount of contributions (\$)  1000

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Said Bina						
	6 Contributor address;			City;	State;	Zip Code	
9/24/2015			Houston	TX	77024		7 Amount of contributions (\$)  500

8 Principal occupation / Job title (See Instructions) Surgeon	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Lawrence Rearick						
	6 Contributor address;			City;	State;	Zip Code	
9/24/2015			Seabrook	TX	77586		7 Amount of contributions (\$)  500

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

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
9/24/2015	6 Contributor address; City; State; Zip Code Cassye Cook Provost Houston TX 77045	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Janice McNair 6 Contributor address; City; State; Zip Code Houston TX 77054	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert McNair 6 Contributor address; City; State; Zip Code Houston TX 77054	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Patricia Mcbean 6 Contributor address; City; State; Zip Code Anna Maria FL 34216	7	Amount of contributions (\$) 2000
8 Principal occupation / Job title (See Instructions) Marketing Coordinator		9 Employer (See Instructions)	
9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laurence Neuhaus	7	Amount of contributions (\$) 2000

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule A1:

2 FILER NAME Bill King

3 Filer ID (Ethics Commission filers)

9/24/2015

6 Contributor address; City; State; Zip Code

Houston TX 77056

100

8 Principal occupation / Job title (See Instructions)

Real Estate Management

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**

# 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 Bill King 3 Filer ID (Ethics Commission filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$5,575.00

5	Date	6 Full name of contributor Jim Blackburn	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)  1500.00	9 In-Kind contribution description  food/beverages for campaign event
	7/30/2015	7 Contributor address;  Houston TX 77005	City; State; Zip Code			
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) Attorney	11 Employer (See Instructions) Blackburn & Carter
--	--

5	Date	6 Full name of contributor George Strake III	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)  675.00	9 In-Kind contribution description  food/beverages for campaign event
	9/22/2015	7 Contributor address;  Houston TX 77056	City; State; Zip Code			
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) Vice Chairman	11 Employer (See Instructions) Cushman & Wakefield
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5	Date	6 Full name of contributor Group 1 Automotive, Inc. PAC	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)  2600.00	9 In-Kind contribution description  food/beverages for campaign event
	9/22/2015	7 Contributor address;  Houston TX 77024	City; State; Zip Code			
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
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# 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 Bill King 3 Filer ID (Ethics Commission filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$5,575.00

5	Date	6 Full name of contributor Susan Aron Lee	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/2/2015	7 Contributor address; City; State; Zip Code Houston TX 77056			100.00	food/beverages for campaign event
				<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions) N/A	11 Employer (See Instructions) Community Volunteer
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5	Date	6 Full name of contributor John Dickson Rogers	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/2/2015	7 Contributor address; City; State; Zip Code Houston TX 77056			100.00	food/beverages for campaign event
				<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions) N/A	11 Employer (See Instructions) Retired
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5	Date	6 Full name of contributor Jackelyn Iloff	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/11/2015	7 Contributor address; City; State; Zip Code Houston TX 77056			600.00	food/beverages for campaign event
				<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions) Senior Advisor	11 Employer (See Instructions) Joel Osteen Ministries
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

<b>LOANS</b>		<b>SCHEDULE E</b>
<b>The Instruction Guide explains how to complete this form.</b>		1 Total Pages Schedule E:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS:      => => => => => =>		
5 Date of loan  9/24/2015	7 Name of lender Bill King  out of state PAC(ID#)	9 Loan Amount (\$)  150,000.00
6 Is Lender a Financial Institution?  No	8 Lender Address;  Houston TX 77056	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Businessman		13 Employer (See Instructions) Self
14 Description of collateral  <input type="checkbox"/> none		15 <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address;  City; State; Zip Code	
20 Principal Occupation		21 Employer
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If lender is out-of-state PAC, please see instruction guide for additional reporting requirements		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/1/2015	5 Payee name 5900 Interests Ltd	
6 Amount (\$) 1793	7 Payee address; City; State; Zip Code 5959 Richmond Ave. Suite 440  Houston TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category  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 rent
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/1/2015	5 Payee name Speedy Printing	
6 Amount (\$) 1394.08	7 Payee address; City; State; Zip Code 3433 West Alabama, Suite C  Houston TX 77027	
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 stationary
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/1/2015	5 Payee name Pinkcilantro LLC	
6 Amount (\$) 7500	7 Payee address; City; State; Zip Code 11333 Chimney Rock Rd  Houston TX 77035	
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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King		<b>3</b> 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 Social media marketing	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date 7/1/2015	<b>5</b> Payee name Walden & Associates		
<b>6</b> Amount (\$) 15000	<b>7</b> Payee address; City; State; Zip Code 310 Sul Ross St. Houston TX 77006		

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Consulting Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign fundraising and consulting

<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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/1/2015	<b>5</b> Payee name Philip J. Kunetka	
<b>6</b> Amount (\$) 1250	<b>7</b> Payee address; City; State; Zip Code 5611 Edith St.  Houston TX 77081	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/1/2015	<b>5</b> Payee name Christopher A. Watson	
<b>6</b> Amount (\$) 1250	<b>7</b> Payee address; City; State; Zip Code 909 Texas Avenue, #1413  Houston TX 77002	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/1/2015	<b>5</b> Payee name Julia McGowen	
<b>6</b> Amount (\$) 1750	<b>7</b> Payee address; City; State; Zip Code 3603 Chenevert Street, Apt. 403  Houston TX 77004	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/1/2015	5 Payee name Kelly Randall		
6 Amount (\$) 2500	7 Payee address; City; State; Zip Code 2502 Rosewood  Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/2/2015	<b>5</b> Payee name Nicholas Reed	
<b>6</b> Amount (\$) 3500	<b>7</b> Payee address; City; State; Zip Code 1001 Tabor Street  Housotn TX 77009	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense research and policy work
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 7/2/2015	<b>5</b> Payee name Walmart	
<b>6</b> Amount (\$) 46.27	<b>7</b> Payee address; City; State; Zip Code 111 Yale St  Houston TX 77007	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 7/2/2015	<b>5</b> Payee name Tony's Restaurant	
<b>6</b> Amount (\$) 500	<b>7</b> Payee address; City; State; Zip Code 3755 Richmond Ave.  Houston TX 77046	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
	<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.

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

4 Date  7/2/2015	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  1000	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		

8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 software
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/2/2015	<b>5</b> Payee name ADP	
<b>6</b> Amount (\$) 568.14	<b>7</b> Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 7/6/2015	<b>5</b> Payee name Comcast	
<b>6</b> Amount (\$) 896.44	<b>7</b> Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Campaign headquarters internet/phone/cable
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 7/8/2015	<b>5</b> Payee name Sarah Tropoli	
<b>6</b> Amount (\$) 10000	<b>7</b> Payee address; City; State; Zip Code 3105 Avalon PI  Houston TX 77019	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
	<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.

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

4 Date 7/8/2015	5 Payee name Campos Communications		
6 Amount (\$) 8000	7 Payee address; City; State; Zip Code 816 Ralfallen Houston TX 77008		
8 PURPOSE OF EXPENDITURE	(a) Category Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/10/2015	5 Payee name Star Stop	
6 Amount (\$) 33	7 Payee address; City; State; Zip Code 5401 Katy Fwy  Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  gas
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/10/2015	5 Payee name ADP	
6 Amount (\$) 69.27	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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  Payroll fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/13/2015	5 Payee name Constant Contact	
6 Amount (\$) 95.94	7 Payee address; City; State; Zip Code 85 Second Street, Suite 100  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 Bill King		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 Email marketing
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/15/2015	5 Payee name Gulf Coast Hot Shot		
6 Amount (\$) 150	7 Payee address; City; State; Zip Code PO Box 935 Sugar Land TX 77487		
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental 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 courier 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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/15/2015	<b>5</b> Payee name Begala-McGrath	
<b>6</b> Amount (\$) 8000	<b>7</b> Payee address; City; State; Zip Code 4141 Coleridge Street  Houston TX 77005	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name ContentActive LLC	
<b>6</b> Amount (\$) 189.44	<b>7</b> Payee address; City; State; Zip Code PO Box 2279  Cypress TX 77410	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense website hosting
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name Razor IT Solutions	
<b>6</b> Amount (\$) 1000	<b>7</b> Payee address; City; State; Zip Code 340 S Lemon Ave, #7557N  Los Angeles CA 91789	
<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 Bill King		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 online media buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  7/15/2015	5 Payee name  Colon & Company		
6 Amount (\$)  3500	7 Payee address;      City;      State;      Zip Code  3311 Richmond Ave., Suite 319  Houston TX 77098		

8 PURPOSE OF EXPENDITURE	(a) Category  Consulting 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 Consulting
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/15/2015	<b>5</b> Payee name Colon & Company	
<b>6</b> Amount (\$) 1069.47	<b>7</b> Payee address; City; State; Zip Code 3311 Richmond Ave., Suite 319  Houston TX 77098	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Loan Repayment/Reimbursement	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement for items listed on Sched G of July Report.
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name Julia McGowen	
<b>6</b> Amount (\$) 1750	<b>7</b> Payee address; City; State; Zip Code 3603 Chenevert Street, Apt. 403  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name Kelly Randall	
<b>6</b> Amount (\$) 2500	<b>7</b> Payee address; City; State; Zip Code 2502 Rosewood  Houston TX 77004	
<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 Bill King		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 Salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 7/15/2015	5 Payee name Philip J. Kunetka		
6 Amount (\$) 1250	7 Payee address;      City;      State;      Zip Code 5611 Edith St.  Houston TX 77081		
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 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 Bill King		<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date  7/15/2015	<b>5</b> Payee name  Christopher A. Watson		
<b>6</b> Amount (\$)  1250	<b>7</b> Payee address; City; State; Zip Code  909 Texas Avenue, #1413  Houston TX 77002		
<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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date  7/16/2015	<b>5</b> Payee name  ADP		
<b>6</b> Amount (\$)  550.15	<b>7</b> Payee address; City; State; Zip Code  13141 Northwest Freeway  Houston TX 77040		
<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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date  7/17/2015	<b>5</b> Payee name  Chris Gillett		
<b>6</b> Amount (\$)  750	<b>7</b> Payee address; City; State; Zip Code  3220 Robinhood  Houston TX 77005		
<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 Bill King		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 campaign photography
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/17/2015	5 Payee name ContentActive LLC		
6 Amount (\$) 1033.78	7 Payee address; City; State; Zip Code PO Box 2279 Cypress TX 77410		
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 website design
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/21/2015	<b>5</b> Payee name Campaign Strategies, Inc.	
<b>6</b> Amount (\$) 15000	<b>7</b> Payee address; City; State; Zip Code PO Box 3308  Houston TX 77253	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/22/2015	<b>5</b> Payee name FedEx Office	
<b>6</b> Amount (\$) 30.36	<b>7</b> Payee address; City; State; Zip Code 4902 Washington Ave.  Houston TX 77007	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 campaign flyers
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/24/2015	<b>5</b> Payee name ADP	
<b>6</b> Amount (\$) 95.92	<b>7</b> Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
<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 Bill King		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 Payroll fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/28/2015	5 Payee name Jewish Herald Voice		
6 Amount (\$) 660	7 Payee address; City; State; Zip Code 3403 Audley St.  Houston TX 77098		
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 buy
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/28/2015	5 Payee name Texas Association of Business	
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 1209 Nueces St.  Austin TX 78701	
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 Houston Chapter Meeting Registration
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/29/2015	5 Payee name KSEV Radio	
6 Amount (\$) 6077.5	7 Payee address; City; State; Zip Code 11451 Katy Freeway, Ste. 215  Houston TX 77079	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense radio ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/29/2015	5 Payee name IHeartMedia	
6 Amount (\$) 85034	7 Payee address; City; State; Zip Code P.O. Box 847654  Dallas TX 75284	
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 Bill King		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 radio ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/30/2015	5 Payee name Speedy Printing		
6 Amount (\$) 591.12	7 Payee address; City; State; Zip Code 3433 West Alabama, Suite C  Houston TX 77027		
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 pushcards
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/31/2015	5 Payee name Corner Store	
6 Amount (\$) 37	7 Payee address; City; State; Zip Code 7129 Lawndale Street  Houston TX 77023	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  gas
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/31/2015	5 Payee name Shell	
6 Amount (\$) 35	7 Payee address; City; State; Zip Code 6955 Griggs Rd.  Houston TX 77023	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  gas
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/31/2015	5 Payee name The Home Depot	
6 Amount (\$) 125.68	7 Payee address; City; State; Zip Code 6810 Gulf Freeway  Houston TX 77087	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense posts for campaign signs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/31/2015	5 Payee name John Perez		
6 Amount (\$) 288	7 Payee address; City; State; Zip Code 7723 Elm Houston TX 77023		
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 sign placement
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/31/2015	5 Payee name Phil Kunetka	
6 Amount (\$) 960.26	7 Payee address; City; State; Zip Code 5611 Edith St.  Houston TX 7781	
8 PURPOSE OF EXPENDITURE	(a) Category  Loan Repayment/Reimbursement	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  mileage reimbursement
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/31/2015	5 Payee name Phil Kunetka	
6 Amount (\$) 157.82	7 Payee address; City; State; Zip Code 5611 Edith St.  Houston TX 7781	
8 PURPOSE OF EXPENDITURE	(a) Category  Loan Repayment/Reimbursement	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  reimburse phone charges/lunch at Jason's Deli
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/31/2015	5 Payee name Kolache Factory	
6 Amount (\$) 31.27	7 Payee address; City; State; Zip Code 3813 Southwest Freeway  Houston TX 77046	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign meeting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/31/2015	5 Payee name The Home Depot		
6 Amount (\$) 125.68	7 Payee address; City; State; Zip Code 8400 Katy Freeway  Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 posts for 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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/31/2015	5 Payee name John Perez	
6 Amount (\$) 208	7 Payee address; City; State; Zip Code 7723 Elm  Houston TX 77023	
8 PURPOSE OF EXPENDITURE	(a) Category  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 sign placement
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/31/2015	5 Payee name 5900 Interests Ltd	
6 Amount (\$) 1793	7 Payee address; City; State; Zip Code 5959 Richmond Ave. Suite 440  Houston TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category  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 rent
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/31/2015	5 Payee name Julia McGowen	
6 Amount (\$) 1750	7 Payee address; City; State; Zip Code 3603 Chenevert Street, Apt. 403  Houston TX 77004	
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 Bill King		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 Salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/31/2015	5 Payee name Kelly Randall		
6 Amount (\$) 2500	7 Payee address; City; State; Zip Code 2502 Rosewood  Houston TX 77004		
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 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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 7/31/2015	5 Payee name Philip J. Kunetka	
6 Amount (\$) 1250	7 Payee address; City; State; Zip Code 5611 Edith St.  Houston TX 77081	
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 Salary
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/31/2015	5 Payee name Christopher A. Watson	
6 Amount (\$) 1250	7 Payee address; City; State; Zip Code 909 Texas Avenue, #1413  Houston TX 77002	
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 Salary
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/31/2015	5 Payee name ADP	
6 Amount (\$) 523.14	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/3/2015	5 Payee name Campos Communications		
6 Amount (\$) 8000	7 Payee address; City; State; Zip Code 816 Ralfallen Houston TX 77008		
8 PURPOSE OF EXPENDITURE	(a) Category Consulting 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 Consulting
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/3/2015	5 Payee name Walden & Associates	
6 Amount (\$) 15000	7 Payee address; City; State; Zip Code 310 Sul Ross St.  Houston TX 77006	
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 campaign fundraising and consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/3/2015	5 Payee name Nicholas Reed	
6 Amount (\$) 3500	7 Payee address; City; State; Zip Code 1001 Tabor Street  Housotn TX 77009	
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 research and policy work
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/3/2015	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 1000	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense software
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/4/2015	5 Payee name Comcast		
6 Amount (\$) 296.21	7 Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040		

8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 headquarters internet/phone/cable
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/5/2015	<b>5</b> Payee name Gulf Coast Hot Shot	
<b>6</b> Amount (\$) 84	<b>7</b> Payee address; City; State; Zip Code PO Box 935 Sugar Land TX 77487	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 courier services
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/5/2015	<b>5</b> Payee name Kubis Interactive, Inc.	
<b>6</b> Amount (\$) 4330	<b>7</b> Payee address; City; State; Zip Code 1210 West Clay, Suite 26 Houston TX 77019	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense online ads
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/5/2015	<b>5</b> Payee name Pinkciantro LLC	
<b>6</b> Amount (\$) 6500	<b>7</b> Payee address; City; State; Zip Code 11333 Chimney Rock Rd Houston TX 77035	
<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 Bill King		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 Social media marketing
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/6/2015	5 Payee name Reel Connection Media, Inc.		
6 Amount (\$) 1985	7 Payee address; City; State; Zip Code 16115 Parish Hall Dr. Spring TX 77379		
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 video production and editing
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/6/2015	<b>5</b> Payee name Begala-McGrath	
<b>6</b> Amount (\$) 17857.5	<b>7</b> Payee address; City; State; Zip Code 4141 Coleridge Street  Houston TX 77005	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer and ad commission
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/7/2015	<b>5</b> Payee name Pastorini-Bosby Talent, Inc.	
<b>6</b> Amount (\$) 2483.04	<b>7</b> Payee address; City; State; Zip Code 6300 W. Loop South, #350  Bellaire TX 77401	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense radio ad production
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/7/2015	<b>5</b> Payee name Begala-McGrath	
<b>6</b> Amount (\$) 3750	<b>7</b> Payee address; City; State; Zip Code 4141 Coleridge Street  Houston TX 77005	
<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 Bill King		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 Advertising buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/7/2015	5 Payee name Comcast		
6 Amount (\$) 71251.25	7 Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040		
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 Television advertising buy
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/7/2015	5 Payee name ADP	
6 Amount (\$) 69.27	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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 Payroll fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/10/2015	5 Payee name ContentActive LLC	
6 Amount (\$) 189.44	7 Payee address; City; State; Zip Code PO Box 2279  Cypress TX 77410	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense website hosting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/11/2015	5 Payee name United States Postal Service	
6 Amount (\$) 245	7 Payee address; City; State; Zip Code 1319 Richmond Ave.  Houston TX 77006	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/12/2015	5 Payee name Constant Contact		
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6 Amount (\$) 95.94	7 Payee address; City; State; Zip Code 85 Second Street, Suite 100  San Francisco CA 94105		
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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 Email marketing
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/13/2015	<b>5</b> Payee name ContentActive LLC	
<b>6</b> Amount (\$) 235.44	<b>7</b> Payee address; City; State; Zip Code PO Box 2279  Cypress TX 77410	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense website design
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/13/2015	<b>5</b> Payee name Optiquet Internet Services, Inc.	
<b>6</b> Amount (\$) 106.69	<b>7</b> Payee address; City; State; Zip Code 780 Westridge Road  The Woodlands TX 77380	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Exchange mail hosting
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/14/2015	<b>5</b> Payee name Jaqueline Haugen	
<b>6</b> Amount (\$) 2500	<b>7</b> Payee address; City; State; Zip Code 18630 Upper Bay Rd.  Houston TX 77058	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense internship
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/14/2015	5 Payee name City of Houston		
6 Amount (\$) 1250	7 Payee address; City; State; Zip Code 900 Bagby  Houston TX 77002		

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 COH filing fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/15/2015	5 Payee name Kelly Randall	
6 Amount (\$) 2500	7 Payee address; City; State; Zip Code 2502 Rosewood  Houston TX 77004	
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 Salary
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/15/2015	5 Payee name Julia McGowen	
6 Amount (\$) 1750	7 Payee address; City; State; Zip Code 3603 Chenevert Street, Apt. 403  Houston TX 77004	
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 Salary
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/15/2015	5 Payee name Philip J. Kunetka	
6 Amount (\$) 1250	7 Payee address; City; State; Zip Code 5611 Edith St.  Houston TX 77081	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/15/2015	5 Payee name Christopher A. Watson		
6 Amount (\$) 1250	7 Payee address; City; State; Zip Code 909 Texas Avenue, #1413  Houston TX 77002		

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

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/15/2015	5 Payee name ADP	
6 Amount (\$) 516.39	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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 Payroll taxes
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/18/2015	5 Payee name Talegate	
6 Amount (\$) 6130	7 Payee address; City; State; Zip Code 636 FM 977  Leona Texas 75850	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense television ad production
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/19/2015	5 Payee name FedEx	
6 Amount (\$) 11.91	7 Payee address; City; State; Zip Code 4902 Washington Ave.  Houston TX 77007	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense copies
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/19/2015	5 Payee name FedEx		
6 Amount (\$) 17.15	7 Payee address; City; State; Zip Code 4902 Washington Ave.  Houston TX 77007		
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense copies
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/19/2015	5 Payee name Campaign Strategies, Inc.	
6 Amount (\$) 15000	7 Payee address; City; State; Zip Code PO Box 3308 Houston TX 77253	
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 Consulting fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/20/2015	5 Payee name John Perez	
6 Amount (\$) 195	7 Payee address; City; State; Zip Code 7723 Elm Houston TX 77023	
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 sign placement
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/20/2015	5 Payee name Speedy Printing	
6 Amount (\$) 2010.03	7 Payee address; City; State; Zip Code 3433 West Alabama, Suite C Houston TX 77027	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Printing Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense stationary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 8/21/2015	5 Payee name ADP		
6 Amount (\$) 69.27	7 Payee address;      City;      State;      Zip Code 13141 Northwest Freeway  Houston TX 77040		

8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description <input type="checkbox"/> <input type="checkbox"/> Payroll fees
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/24/2015	<b>5</b> Payee name Conservative Media Properties	
<b>6</b> Amount (\$) 75000	<b>7</b> Payee address; City; State; Zip Code 2211 Norfolk St., Suite 920  Houston TX 77098	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  ad
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/25/2015	<b>5</b> Payee name Hawley Design	
<b>6</b> Amount (\$) 543.75	<b>7</b> Payee address; City; State; Zip Code 2602 La Teche  Seabrook TX 77586	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  graphic design
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/25/2015	<b>5</b> Payee name Target	
<b>6</b> Amount (\$) 53.04	<b>7</b> Payee address; City; State; Zip Code 4323 San Felipe  Houston TX 77027	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense office supplies
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/26/2015	5 Payee name Staples		
6 Amount (\$) 91.97	7 Payee address; City; State; Zip Code 1919 Taylor Street  Houston TX 77007		
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Office supplies  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/26/2015	<b>5</b> Payee name Kenny & ZiggyÕs	
<b>6</b> Amount (\$) 389.7	<b>7</b> Payee address; City; State; Zip Code 2327 Post Oak Blvd.  Houston TX 77056	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 committee meeting
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/27/2015	<b>5</b> Payee name Speedy Printing	
<b>6</b> Amount (\$) 97.43	<b>7</b> Payee address; City; State; Zip Code 3433 West Alabama, Suite C  Houston TX 77027	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 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 8/27/2015	<b>5</b> Payee name Speedy Printing	
<b>6</b> Amount (\$) 528.63	<b>7</b> Payee address; City; State; Zip Code 3433 West Alabama, Suite C  Houston TX 77027	
<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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> 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 stationary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>4</b> Date 8/27/2015	<b>5</b> Payee name John Perez
<b>6</b> Amount (\$) 150	<b>7</b> Payee address;            City;            State;            Zip Code 7723 Elm  Houston TX 77023

<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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense sign placement

<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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/30/2015	5 Payee name ADP	
6 Amount (\$) 592.89	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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 Payroll taxes
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/31/2015	5 Payee name Nicholas Reed	
6 Amount (\$) 3500	7 Payee address; City; State; Zip Code 1001 Tabor Street  Housotn TX 77009	
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 research and policy work
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/31/2015	5 Payee name Optiquet Internet Services, Inc.	
6 Amount (\$) 94.84	7 Payee address; City; State; Zip Code 780 Westridge Road  The Woodlands TX 77380	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Exchange mail hosting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/31/2015	5 Payee name Kelly Randall		
6 Amount (\$) 2500	7 Payee address; City; State; Zip Code 2502 Rosewood  Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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 Bill King		<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date  8/31/2015	<b>5</b> Payee name  Julia McGowen		
<b>6</b> Amount (\$)  1750	<b>7</b> Payee address; City; State; Zip Code  3603 Chenevert Street, Apt. 403  Houston TX 77004		
<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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date  8/31/2015	<b>5</b> Payee name  Philip J. Kunetka		
<b>6</b> Amount (\$)  1250	<b>7</b> Payee address; City; State; Zip Code  5611 Edith St.  Houston TX 77081		
<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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date  8/31/2015	<b>5</b> Payee name  Christopher A. Watson		
<b>6</b> Amount (\$)  2250	<b>7</b> Payee address; City; State; Zip Code  909 Texas Avenue, #1413  Houston TX 77002		
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/1/2015	5 Payee name Sarah Tropoli		
6 Amount (\$) 5000	7 Payee address; City; State; Zip Code 3105 Avalon PI Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category Consulting 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 Consulting
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/1/2015	<b>5</b> Payee name Pinkcilantro LLC	
<b>6</b> Amount (\$) 7500	<b>7</b> Payee address; City; State; Zip Code 11333 Chimney Rock Rd  Houston TX 77035	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social media marketing
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/2/2015	<b>5</b> Payee name Walden & Associates	
<b>6</b> Amount (\$) 15000	<b>7</b> Payee address; City; State; Zip Code 310 Sul Ross St.  Houston TX 77006	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign fundraising and consulting
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/2/2015	<b>5</b> Payee name Comcast	
<b>6</b> Amount (\$) 33250	<b>7</b> Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040	
<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 Bill King		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 Advertising buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/2/2015	5 Payee name KSEV Radio		
6 Amount (\$) 3400	7 Payee address; City; State; Zip Code 11451 Katy Freeway, Ste. 215  Houston TX 77079		
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 buy
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/2/2015	<b>5</b> Payee name Total Traffic Weather Network	
<b>6</b> Amount (\$) 16957.5	<b>7</b> Payee address; City; State; Zip Code 2000 West Loop South Suite 300  Houston TX 77027	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/2/2015	<b>5</b> Payee name IHeartMedia	
<b>6</b> Amount (\$) 34940	<b>7</b> Payee address; City; State; Zip Code P.O. Box 847654  Dallas TX 75284	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/2/2015	<b>5</b> Payee name Republic Saloon	
<b>6</b> Amount (\$) 1132.32	<b>7</b> Payee address; City; State; Zip Code 1910 Bagby St., Suite 100  Houston TX 77002	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense campaign event
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  9/2/2015	5 Payee name  OfficeMax		
6 Amount (\$)  14.92	7 Payee address;      City;      State;      Zip Code  1576 West Gray  Houston TX 77019		

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

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/3/2015	<b>5</b> Payee name 5900 Interests Ltd	
<b>6</b> Amount (\$) 1793	<b>7</b> Payee address; City; State; Zip Code 5959 Richmond Ave. Suite 440  Houston TX 77057	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 rent
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/3/2015	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 1000	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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  software
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/4/2015	<b>5</b> Payee name Comcast	
<b>6</b> Amount (\$) 296.21	<b>7</b> Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign headquarters internet/phone/cable
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/4/2015	5 Payee name ADP		
6 Amount (\$) 69.27	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040		
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 Payroll 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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/8/2015	5 Payee name Arvey	
6 Amount (\$) 69.44	7 Payee address; City; State; Zip Code 2201 Taylor  Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category  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 stationary for campaign letter
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/8/2015	5 Payee name United States Postal Service	
6 Amount (\$) 5848.25	7 Payee address; City; State; Zip Code 1319 Richmond Ave.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  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 postage
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/8/2015	5 Payee name John Perez	
6 Amount (\$) 288	7 Payee address; City; State; Zip Code 7723 Elm  Houston TX 77023	
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 Bill King		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 sign placement
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/8/2015	5 Payee name Google		
6 Amount (\$) 200	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View CA 94043		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense 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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/8/2015	5 Payee name OfficeMax	
6 Amount (\$) 67.98	7 Payee address; City; State; Zip Code 1576 West Gray  Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category  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
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/9/2015	5 Payee name Colon & Company	
6 Amount (\$) 7000	7 Payee address; City; State; Zip Code 3311 Richmond Ave., Suite 319  Houston TX 77098	
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 Consulting fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/9/2015	5 Payee name United States Postal Service	
6 Amount (\$) 245	7 Payee address; City; State; Zip Code 1319 Richmond Ave.  Houston TX 77006	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/10/2015	5 Payee name Latonya Howard		
6 Amount (\$) 160	7 Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584		

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

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/10/2015	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) 350	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View CA 94043	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/10/2015	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View CA 94043	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/11/2015	<b>5</b> Payee name John Perez	
<b>6</b> Amount (\$) 240	<b>7</b> Payee address; City; State; Zip Code 7723 Elm  Houston TX 77023	
<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 Bill King		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 sign placement
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/14/2015	5 Payee name Rodney McFadden		
6 Amount (\$) 325	7 Payee address; City; State; Zip Code 10170 Oakberry St.  Houston TX 77042		
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 sign placement
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/14/2015	<b>5</b> Payee name Constant Contact	
<b>6</b> Amount (\$) 95.94	<b>7</b> Payee address; City; State; Zip Code 85 Second Street, Suite 100  San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Email marketing
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/14/2015	<b>5</b> Payee name OfficeMax	
<b>6</b> Amount (\$) 251.1	<b>7</b> Payee address; City; State; Zip Code 1576 West Gray  Houston TX 77019	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Julia McGowen	
<b>6</b> Amount (\$) 1750	<b>7</b> Payee address; City; State; Zip Code 3603 Chenevert Street, Apt. 403  Houston TX 77004	
<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 Bill King		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 Salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/15/2015	5 Payee name Christopher A. Watson		
6 Amount (\$) 1750	7 Payee address; City; State; Zip Code 909 Texas Avenue, #1413  Houston TX 77002		
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 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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/15/2015	<b>5</b> Payee name Kelly Randall	
<b>6</b> Amount (\$) 2500	<b>7</b> Payee address; City; State; Zip Code 2502 Rosewood  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Philip J. Kunetka	
<b>6</b> Amount (\$) 1250	<b>7</b> Payee address; City; State; Zip Code 5611 Edith St.  Houston TX 77081	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Salary
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/15/2015	<b>5</b> Payee name OfficeMax	
<b>6</b> Amount (\$) 72.52	<b>7</b> Payee address; City; State; Zip Code 1576 West Gray  Houston TX 77019	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/15/2015	5 Payee name Begala-McGrath		
6 Amount (\$) 17045.02	7 Payee address; City; State; Zip Code 4141 Coleridge Street  Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category  Consulting Expense	<input type="checkbox"/>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer and ad commission
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/15/2015	5 Payee name ADP	
6 Amount (\$) 554.64	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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 Payroll taxes
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/15/2015	5 Payee name ADP	
6 Amount (\$) 554.69	7 Payee address; City; State; Zip Code 13141 Northwest Freeway  Houston TX 77040	
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 Payroll taxes
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/16/2015	5 Payee name United States Postal Service	
6 Amount (\$) 98	7 Payee address; City; State; Zip Code 1319 Richmond Ave.  Houston TX 77006	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/17/2015	5 Payee name Google		
6 Amount (\$) 500	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View CA 94043		
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/22/2015	5 Payee name Google	
6 Amount (\$) 500	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/15/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 0.01	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/15/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 0.01	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  08/15/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  0.01	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/15/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 0.03	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/15/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 0.05	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/15/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 0.05	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  08/15/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  0.05	7 Payee address;                      City;                      State;                      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 0.05	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 07/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 0.25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 07/26/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 0.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  09/22/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  0.9	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 0.9	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/10/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/15/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  09/15/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  1.25	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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1 Total pages Schedule F1:	2 FILER NAME Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 07/26/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

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FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/26/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/18/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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1 Total pages Schedule F1:	2 FILER NAME Bill King		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 credit card processing fee
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4 Date 09/22/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held



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# SCHEDULE F1

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1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/22/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

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1 Total pages Schedule F1:	2 FILER NAME Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  09/24/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  2.5	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

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# SCHEDULE F1

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1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 07/01/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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1 Total pages Schedule F1:	2 FILER NAME Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 07/25/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 07/26/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 07/26/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/11/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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1 Total pages Schedule F1:	2 FILER NAME Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/17/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/17/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/31/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/08/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

4 Date  09/17/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  5	7 Payee address;      City;      State;      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		

8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		
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**POLITICAL EXPENDITURES  
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**SCHEDULE F1**

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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/18/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

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	Fees	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense credit card processing fee
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4 Date  09/22/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  5	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

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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 credit card processing fee
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6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  09/24/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  5	7 Payee address;      City;      State;      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		

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

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/19/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 7.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  09/22/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  10	7 Payee address;                      City;                      State;                      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 10	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 10	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 10	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  07/27/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  12.5	7 Payee address;                      City;                      State;                      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/08/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/14/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/21/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  09/22/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  12.5	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/23/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  09/24/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  12.5	7 Payee address;      City;      State;      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/19/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 17.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 07/26/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  08/31/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  25	7 Payee address;      City;      State;      Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/03/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/06/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/09/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/16/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/21/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/22/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/22/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/23/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/23/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/23/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/23/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held



**POLITICAL EXPENDITURES  
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**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
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**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  09/24/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  25	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 07/01/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 07/27/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/17/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/28/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/04/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/09/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/22/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/23/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/23/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/23/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 75	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 07/29/15	5 Payee name Aristotle International, Inc.		
6 Amount (\$) 100	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/02/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 100	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/22/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 100	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/24/15	<b>5</b> Payee name Aristotle International, Inc.	
<b>6</b> Amount (\$) 100	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
	<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.

1 Total pages Schedule F1:	2 FILER NAME Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  08/15/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  125	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		

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 credit card processing fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 07/10/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 150	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/22/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 250	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/24/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 250	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  09/24/15	5 Payee name  Aristotle International, Inc.		
6 Amount (\$)  250	7 Payee address; City; State; Zip Code  205 Pennsylvania Avenue SE  Washington DC 20003		
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 credit card processing fee
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 09/12/15	5 Payee name Aristotle International, Inc.	
6 Amount (\$) 500	7 Payee address; City; State; Zip Code 205 Pennsylvania Avenue SE  Washington DC 20003	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/26/2015	5 Payee name PayPal	
6 Amount (\$) 175.00	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/30/2015	5 Payee name PayPal	
6 Amount (\$) 175.00	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 7/16/2015	5 Payee name PayPal		
6 Amount (\$) 155.30	7 Payee address;      City;      State;      Zip Code 2211 North First Street  San Jose CA 95131		

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

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/23/2015	5 Payee name PayPal	
6 Amount (\$) 87.50	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/23/2015	5 Payee name PayPal	
6 Amount (\$) 77.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/23/2015	5 Payee name PayPal	
6 Amount (\$) 77.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/31/2015	5 Payee name PayPal		
6 Amount (\$) 77.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131		
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 credit card processing fee
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 Bill King	3 Filer ID (Ethics Commission filers)
4 Date 8/25/2015	5 Payee name PayPal	
6 Amount (\$) 77.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/4/2015	5 Payee name PayPal	
6 Amount (\$) 46.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/3/2015	5 Payee name PayPal	
6 Amount (\$) 35.00	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/3/2015	5 Payee name PayPal		
6 Amount (\$) 35.00	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/31/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 35.00	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/24/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 35.00	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/24/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 31.30	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 9/18/2015	5 Payee name PayPal		
6 Amount (\$) 31.30	7 Payee address;      City;      State;      Zip Code 2211 North First Street  San Jose CA 95131		

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

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/14/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 31.30	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/31/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 31.30	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/20/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 31.30	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/18/2015	5 Payee name PayPal		
6 Amount (\$) 31.30	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131		

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 credit card processing fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/11/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 29.30	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/22/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 17.50	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/22/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 17.50	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  9/24/2015	5 Payee name  PayPal		
6 Amount (\$)  15.80	7 Payee address;      City;      State;      Zip Code  2211 North First Street  San Jose CA 95131		

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

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/22/2015	5 Payee name PayPal	
6 Amount (\$) 15.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/21/2015	5 Payee name PayPal	
6 Amount (\$) 15.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/3/2015	5 Payee name PayPal	
6 Amount (\$) 15.80	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 9/2/2015	5 Payee name PayPal		
6 Amount (\$) 15.80	7 Payee address;      City;      State;      Zip Code 2211 North First Street  San Jose CA 95131		

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

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/19/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 15.80	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/20/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 14.80	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 8.75	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/26/2015	5 Payee name PayPal		
6 Amount (\$) 8.75	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/31/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 8.05	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/20/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 8.05	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/3/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 7.00	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/24/2015	5 Payee name PayPal		
6 Amount (\$) 3.50	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/19/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.50	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/30/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.40	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/10/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 8/10/2015	5 Payee name PayPal		
6 Amount (\$) 3.20	7 Payee address;      City;      State;      Zip Code 2211 North First Street  San Jose CA 95131		

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

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/30/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/30/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		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 credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/13/2015	5 Payee name PayPal		
6 Amount (\$) 3.20	7 Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131		
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 credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/10/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/4/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/1/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.20	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 7/1/2015	5 Payee name PayPal		
6 Amount (\$) 3.20	7 Payee address;      City;      State;      Zip Code 2211 North First Street  San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/3/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 1.85	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/27/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 1.85	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/18/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 1.85	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<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 Bill King		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 9/24/2015	5 Payee name PayPal		
6 Amount (\$) 1.75	7 Payee address;      City;      State;      Zip Code 2211 North First Street  San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense credit card processing fee
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 Bill King	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/27/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 0.82	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/28/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 0.33	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street  San Jose CA 95131	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 credit card processing fee
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/28/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$)	<b>7</b> Payee address; City; State; Zip Code 2211 North First Street	
<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 Bill King		3 Filer ID (Ethics Commission filers)
		<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
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**



**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

<b>1</b> Total Pages Schedule G:	<b>2</b> FILER NAME Bill King	<b>3</b> FilerID (Ethics Commission filers)		
<b>4</b> Date 7/16/2015	<b>5</b> Payee name Aristotle International, Inc.			
<b>6</b> Amount (\$) 650 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee Address; 205 Pennsylvania Avenue SE	City; Washingt on	State; DC	Zip Code 20003
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category Office Overhead/Rental Expense	(b) Description campaign software		
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	

<b>4</b> Date 8/16/2015	<b>5</b> Payee name Aristotle International, Inc.			
<b>6</b> Amount (\$) 650 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee Address; 205 Pennsylvania Avenue SE	City; Washingt on	State; DC	Zip Code 20003
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	(a) Category Office Overhead/Rental Expense	(b) Description campaign software		
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	

<b>4</b> Date 9/16/2015	<b>5</b> Payee name Aristotle International, Inc.			
<b>6</b> Amount (\$) 650 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee Address; 205 Pennsylvania Avenue SE	City; Washingt on	State; DC	Zip Code 20003

**POLITICAL EXPENDITURES  
MADE FROM PERSONAL FUNDS**

**SCHEDULE G**

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	2 FILER NAME Bill King	3 FilerID (Ethics Commission filers)	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental Expense	(b) Description  campaign software  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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