

**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
	Mr.	Bill	
	NICKNAME	LAST	SUFFIX
		King	
<b>OFFICE USE ONLY</b>			
Date Received			
10/26/2015			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY; STATE; ZIP CODE
	5900 Memorial	101-B	Houston TX 77007
Date Hand-delivered or Date Postmarked			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(832)	203-8660	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
	Ms.	Paula	
	NICKNAME	LAST	SUFFIX
		Arnold	
Receipt #		Amount	
Date Processed			
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 type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)		
10 PERIOD COVERED	Month	Day	Year
		9/25/2015	THROUGH
	Month	Day	Year
			10/24/2015
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	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	\$
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$317,919.25
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$572,737.98
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$123,349.24
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	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	288515
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	29404.25
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	
4.	SCHEDULE E: LOANS	
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	572737.98
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

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

**FORM C/OH  
ADDENDUM**

C/OH NAME 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# )
	9/28/2015		Allen R. Hartman
		6	Contributor address; City; State; Zip Code
			Houston TX 77057
		7	Amount of contributions (\$)
			5000
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	CEO		Hartman Income REIT
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/25/2015		Don Schlossberg
		6	Contributor address; City; State; Zip Code
			The Woodlands TX 77380
		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# )
	9/25/2015		Scott Greene
		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# )
	9/25/2015		Ralph Clinard
		6	Contributor address; City; State; Zip Code
			Houston TX 77082
		7	Amount of contributions (\$)
			50
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Retired		N/A

# 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# ) Joann Crassas	7	Amount of contributions (\$)
	9/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		250
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Personette & Assoc.		
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Hamid Hamadianian	7	Amount of contributions (\$)
	9/25/2015	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# ) Massoud Taghdisi	7	Amount of contributions (\$)
	9/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		500
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Houston Oriental Rug Bazaar		
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gilman & Gilman, P.C.	7	Amount of contributions (\$)
	9/25/2015	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# )		

# 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)
9/25/2015	Albrik Nazarian ----- 6 Contributor address; City; State; Zip Code Houston TX 77063	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) Dentist	9	Employer (See Instructions) Richmond Dental Associates
9/25/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kashan Holdings, LP ----- 6 Contributor address; City; State; Zip Code Houston TX 77057	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions)	9	Employer (See Instructions)
9/25/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Morteza Baharloo ----- 6 Contributor address; City; State; Zip Code Sugar Land TX 77478	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) Writer	9	Employer (See Instructions) Self
9/28/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mary Jo Antone-Hatfield ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 1000
8	Principal occupation / Job title (See Instructions) Retired	9	Employer (See Instructions) N/A
	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sandra Parker	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)	
9/30/2015	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# ) Peter Meyer	7 Amount of contributions (\$)	
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	200	
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 Comeaux	7 Amount of contributions (\$)	
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	200	
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# ) Susan Boss	7 Amount of contributions (\$)	
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	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:
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 Ellender	7	Amount of contributions (\$)
	9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77009		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# ) Cheryl Ford	7	Amount of contributions (\$)
	9/30/2015	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# ) David Graham	7	Amount of contributions (\$)
	9/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		1000
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) N/A
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Manuel Sanchez	7	Amount of contributions (\$)
	9/29/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		1000
8	Principal occupation / Job title (See Instructions) SCM Lead		9	Employer (See Instructions) CB&I
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)
9/29/2015	Norm Wigington ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 250
8	Principal occupation / Job title (See Instructions) Retired	9	Employer (See Instructions) N/A
9/29/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ann Trammell ----- 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) Self
9/29/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kay Holmes ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 5000
8	Principal occupation / Job title (See Instructions) Community volunteer	9	Employer (See Instructions) N/A
9/29/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) R. Jack Linville ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 1000
8	Principal occupation / Job title (See Instructions) Architecture	9	Employer (See Instructions) PGAL
9/29/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Paula Arnold	7	Amount of contributions (\$) 1000

# 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)	
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	1000	
8 Principal occupation / Job title (See Instructions) Public relations		9 Employer (See Instructions) Paula Arnold Associates	
9/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Timothy J. Connolly 6 Contributor address; City; State; Zip Code Houston TX 77024	7 Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions) Banking		9 Employer (See Instructions) Credit Suisse	
9/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Lumpkins 6 Contributor address; City; State; Zip Code Houston TX 77024	7 Amount of contributions (\$) 500	
8 Principal occupation / Job title (See Instructions) Investor Relations		9 Employer (See Instructions) Petrologistics	
10/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mary Linn Marks 6 Contributor address; City; State; Zip Code Houston TX 77056	7 Amount of contributions (\$) 500	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A	

# 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 Kotts	7 Amount of contributions (\$)
10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	1000

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jean Hancock Chernosky	7 Amount of contributions (\$)
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77007	500

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lee W. Hogan	7 Amount of contributions (\$)
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1000

8 Principal occupation / Job title (See Instructions) Cellular infrastructure	9 Employer (See Instructions) Crown Castle International Corp.
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christine Napier	7 Amount of contributions (\$)
10/1/2015	6 Contributor address; City; State; Zip Code Kingwood TX 77339	500

8 Principal occupation / Job title (See Instructions) Owner	9 Employer (See Instructions) Fairwinds Intl.
--	--

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)	
10/1/2015	Yousef Panahpour ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Group 1 Automotive, Inc. Political Action Committee ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Susan G. Baker ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions) N/A	
9/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Eva M. Wolski ----- 6 Contributor address; City; State; Zip Code Houston TX 77007	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
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)	
9/30/2015	Andrew Clark ----- 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)	
10/1/2015	Rachel Bristow ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	Patricia Gayle Fallon ----- 6 Contributor address; City; State; Zip Code Houston TX 77098	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/1/2015	Martha Adger ----- 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)	
10/1/2015	Erich Reindl ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 1000

# 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)	
10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1000	
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Avanti Int'l Transportation Ltd	
10/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ricardo Weitz 6 Contributor address; City; State; Zip Code Houston TX 77027	7 Amount of contributions (\$) 5000	
8 Principal occupation / Job title (See Instructions) Car dealer		9 Employer (See Instructions) Self	
10/1/2015	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 (\$) 1000	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Diehl Chemical	
10/1/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Ledbetter 6 Contributor address; City; State; Zip Code Houston TX 77027	7 Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Higginbothan	

# 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# ) Marsha Beeson	7	Amount of contributions (\$)
	10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		5000
8	Principal occupation / Job title (See Instructions) Homemaker		9	Employer (See Instructions) N/A
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Keith Stevenson	7	Amount of contributions (\$)
	10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		1000
8	Principal occupation / Job title (See Instructions) Asset Management		9	Employer (See Instructions) Sequent Asset Management
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Soheya Moazami	7	Amount of contributions (\$)
	10/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		500
8	Principal occupation / Job title (See Instructions) Homemaker		9	Employer (See Instructions) N/A
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Alan Finger	7	Amount of contributions (\$)
	10/2/2015	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# )		



# 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)	
10/2/2015	RL Rothfelder ----- 6 Contributor address; City; State; Zip Code Houston TX 77002	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Rothfelder & Falick LLP	
10/2/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sarah Huynh ----- 6 Contributor address; City; State; Zip Code Houston TX 77036	7	Amount of contributions (\$)  100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/2/2015	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 (\$)  1000
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/2/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Winfield Campbell, Sr. ----- 6 Contributor address; City; State; Zip Code Houston TX 77005	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Campbell & Riggs	
10/2/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Betty Vann	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)	
10/2/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		500
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/2/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) J. Downey Bridgwater 6 Contributor address; City; State; Zip Code Houston TX 77210		7 Amount of contributions (\$)  1000
8 Principal occupation / Job title (See Instructions) President - Houston Market		9 Employer (See Instructions) Comerica Bank	
10/2/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cindy Albert 6 Contributor address; City; State; Zip Code Houston TX 77079		7 Amount of contributions (\$)  25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/2/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Beverly Hornsby 6 Contributor address; City; State; Zip Code Houston TX 77024		7 Amount of contributions (\$)  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:	
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# ) Laura Schlameus		7 Amount of contributions (\$)
10/2/2015	6 Contributor address; City; State; Zip Code Houston TX 77008		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# ) Fresh Brew Group USA LLC		7 Amount of contributions (\$)
10/2/2015	6 Contributor address; City; State; Zip Code Houston TX 77038		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# ) Sam Banks		7 Amount of contributions (\$)
10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		500
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Yuma Energy	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Howard Mays, Jr.		7 Amount of contributions (\$)
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		1000
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jones, Mays, Ramsey & Parikh	
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)
10/6/2015	Mohammad Athari ----- 6 Contributor address; City; State; Zip Code Baytown TX 77521	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Self	
10/6/2015	Anna Dean ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/6/2015	Ellie Francisco ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions) Event Planner		9 Employer (See Instructions) Self	
10/6/2015	Frann G Lichtenstein ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Community Volunteer		9 Employer (See Instructions) N/A	
10/6/2015	Imad F. Abdullah ----- 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)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	500	
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Landmark Architects Inc	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Albert Keller	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	500	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) ALK Interests, Inc.	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John T. Cabaniss	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77002	1000	
8 Principal occupation / Job title (See Instructions) Senior retired partner		9 Employer (See Instructions) Andrews Kurth LLP	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Nicholas Florescu	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	1000	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Kubis Interactive, Inc.	

# 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# ) Dan H. Montgomery	7	Amount of contributions (\$)
10/6/2015	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# ) Robert C. Watson	7	Amount of contributions (\$)
10/6/2015	6 Contributor address; City; State; Zip Code Montgomery TX 77356		500
8 Principal occupation / Job title (See Instructions) Real Estate Broker		9 Employer (See Instructions) Self	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Donatella Benckenstein	7	Amount of contributions (\$)
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		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# ) Martha E. Rocks	7	Amount of contributions (\$)
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		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# )		

# 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)
10/6/2015	James Thompson ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 2500
8 Principal occupation / Job title (See Instructions) Engineering		9 Employer (See Instructions) AECOM	
10/6/2015	Sid Weiss ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Real Estate Management		9 Employer (See Instructions) Weiss Realty Group	
10/6/2015	Martha Adger ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Martha Turner Sotheby's International Realty	
10/6/2015	George Pontikes ----- 6 Contributor address; City; State; Zip Code Houston TX 77041	7	Amount of contributions (\$) 2000
8 Principal occupation / Job title (See Instructions) Construction		9 Employer (See Instructions) Satterfield & Pontikes Construction	
10/6/2015	Gordon Stewart ----- 6 Contributor address; City; State; Zip Code	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)	
10/6/2015	6 Contributor address; City; State; Zip Code Magnolia TX 77354	1000	
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions) Joe Schwartz Electric	
4 Date 10/6/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Macey Family Properties, LTD. 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 10/6/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Adger 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Sr. Sales Representative		9 Employer (See Instructions) RR Donnelley	
4 Date 10/6/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Walter Beard 6 Contributor address; City; State; Zip Code Houston TX 77057	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Icon Bank	



**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 K. Gibbs				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
10/6/2015	Houston	TX	77019		1000

8 Principal occupation / Job title (See Instructions) Real Estate	9 Employer (See Instructions) David K. Gibbs Associates
--	--

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Jerry Reese				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
10/6/2015	Houston	TX	77002		1000

8 Principal occupation / Job title (See Instructions) Founder	9 Employer (See Instructions) So-Mac Contractors, Ltd.
--	---

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		
	Carl Roger Meisner				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
10/6/2015	Houston	TX	77031		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# )		
	R.O. Hunton				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
10/6/2015	Houston	TX	77042		1000

8 Principal occupation / Job title (See Instructions) HVAC Systems	9 Employer (See Instructions) The Hunton Group
---	---

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3	Filer ID (Ethics Commission filers)
10/6/2015	Janet Lodge ----- 6 Contributor address; City; State; Zip Code Houston TX 77213	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) Principal	9	Employer (See Instructions) Lodge Lumber
10/6/2015	Mickey Ables ----- 6 Contributor address; City; State; Zip Code Houston TX 77005	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) Energy	9	Employer (See Instructions) Self
10/5/2015	Christopher Pinkerton ----- 6 Contributor address; City; State; Zip Code Houston TX 77055	7	Amount of contributions (\$) 1000
8	Principal occupation / Job title (See Instructions) Attorney	9	Employer (See Instructions) The Pinkerton Law Firm
10/5/2015	Gregory A. Prioli ----- 6 Contributor address; City; State; Zip Code Katy TX 77450	7	Amount of contributions (\$) 200
8	Principal occupation / Job title (See Instructions)	9	Employer (See Instructions)
10/5/2015	Marvin Stapper ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 200

# 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)	
10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		500
8 Principal occupation / Job title (See Instructions) Commercial Real Estate		9 Employer (See Instructions) MM Stapper Co.	
10/5/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Paul Magaziner 6 Contributor address; City; State; Zip Code Houston TX 77095		7 Amount of contributions (\$)  600
8 Principal occupation / Job title (See Instructions) Printing		9 Employer (See Instructions) Self	
10/5/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) HOME-PAC Greater Houston Builders Association 6 Contributor address; City; State; Zip Code Houston TX 77064		7 Amount of contributions (\$)  250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/6/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Sweeney 6 Contributor address; City; State; Zip Code Houston TX 77027		7 Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) John Daugherty Real Estate	
	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Afsaneh Jalalabadi		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)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	500	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ileana Trevino	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1000	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Memorial Hermann Foundation	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Debra Clark	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Stafford TX 77477	500	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Astrid Van Dyke	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77046	500	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Vanco Energy Company	

# 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 (\$)
	Lori Veters		
	6 Contributor address; City; State; Zip Code		
10/6/2015	Houston	TX 77005	500

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

4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	John Pitts		
	6 Contributor address; City; State; Zip Code		
10/6/2015	Houston	TX 77227	1000

8 Principal occupation / Job title (See Instructions) Government relations	9 Employer (See Instructions) Texas Star Alliance
---	--

4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Alan Feinsilver		
	6 Contributor address; City; State; Zip Code		
10/6/2015	Houston	TX 77056	2500

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

4 Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Michael Rose		
	6 Contributor address; City; State; Zip Code		
10/6/2015	Houston	TX 77027	1000

8 Principal occupation / Job title (See Instructions) Real estate	9 Employer (See Instructions) Rose Properties
--	--

4 Date	5 Full name of contributor	<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)	
10/8/2015	Mischer Investments, LP ----- 6 Contributor address; City; State; Zip Code Houston TX 77046	7	Amount of contributions (\$)  5000
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John R. Huff ----- 6 Contributor address; City; State; Zip Code Houston TX 77041	7	Amount of contributions (\$)  2500
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Huff International	
10/6/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Patrick C. Oxford ----- 6 Contributor address; City; State; Zip Code Houston TX 77002	7	Amount of contributions (\$)  2000
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Bracewell & Giuliani LLP	
10/6/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Valentina Ugolini, M.D. ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$)  1000
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Methodist Hospital	
	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christine Underwood	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)	
10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	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# ) Janet Burke	7 Amount of contributions (\$)	
10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77042	200	
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# ) Paul Hobby	7 Amount of contributions (\$)	
10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	500	
8 Principal occupation / Job title (See Instructions) Managing Partner		9 Employer (See Instructions) Genesis Park	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Walter E. Johnson	7 Amount of contributions (\$)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1500	
8 Principal occupation / Job title (See Instructions) Banking		9 Employer (See Instructions) Amegy Bank	

# 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# ) Matthew Rotan	7	Amount of contributions (\$)
	10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1000
8	Principal occupation / Job title (See Instructions) Vice Chairman		9	Employer (See Instructions) ARA Newmark
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Greg Dalton	7	Amount of contributions (\$)
	10/5/2015	6 Contributor address; City; State; Zip Code Katy TX 77492		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# ) Walter Goff	7	Amount of contributions (\$)
	10/2/2015	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# ) Lance Livingston	7	Amount of contributions (\$)
	10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		500
8	Principal occupation / Job title (See Instructions) Event Planner		9	Employer (See Instructions) Helms Briscoe
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)	
10/6/2015	Jeff Henry ----- 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)	
10/6/2015	Karen Stall ----- 6 Contributor address; City; State; Zip Code Metairie LA 70001	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/6/2015	Sandy Barrett ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/6/2015	Grace Kim ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/6/2015	Peggie Kohnert ----- 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)	
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77005	500	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Keller Williams	
4 Date 10/6/2015	5 Full name of contributor Joann Crassas	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 250
	6 Contributor address; City; State; Zip Code Houston TX 77063		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Personette & Assoc.	
4 Date 10/7/2015	5 Full name of contributor Kathaleen Hall	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 5000
	6 Contributor address; City; State; Zip Code Houston TX 77001		
8 Principal occupation / Job title (See Instructions) Community activist		9 Employer (See Instructions) N/A	
4 Date 10/7/2015	5 Full name of contributor John M. Watkins	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) 100
	6 Contributor address; City; State; Zip Code Kingwood TX 77345		
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# ) Raymond Hooker	7	Amount of contributions (\$)
	10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77058		500
8	Principal occupation / Job title (See Instructions) Real Estate		9	Employer (See Instructions) RE/MAX
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Leonard Bedell	7	Amount of contributions (\$)
	10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77255		500
8	Principal occupation / Job title (See Instructions) Steel fabrication		9	Employer (See Instructions) Mobil Steel
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Smith	7	Amount of contributions (\$)
	10/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77059		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# ) Enrique van Santen	7	Amount of contributions (\$)
	10/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		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)
10/10/2015	Michael McFarlane ----- 6 Contributor address; City; State; Zip Code Houston TX 77062	7	Amount of contributions (\$) 5
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/9/2015	Eugene Tulich ----- 6 Contributor address; City; State; Zip Code Spring TX 77379	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/9/2015	Julia McGowen ----- 6 Contributor address; City; State; Zip Code Houston TX 77004	7	Amount of contributions (\$) 1
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/9/2015	Elahe Taghdisi ----- 6 Contributor address; City; State; Zip Code Houston TX 77098	7	Amount of contributions (\$) 750
8 Principal occupation / Job title (See Instructions) Interior decorating		9 Employer (See Instructions) Plush Home	
10/9/2015	William Dickey ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 750

# 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)	
10/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77098		500
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) Self-employed	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) F. John Bradford	7	Amount of contributions (\$)
10/8/2015	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# ) John Haslam	7	Amount of contributions (\$)
10/8/2015	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# ) Wade Taylor	7	Amount of contributions (\$)
10/8/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		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# )		7 Amount of contributions (\$)
	Amal Nassar				
10/8/2015	6 Contributor address; City; State; Zip Code				
	Bellaire TX 77401				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# )		7 Amount of contributions (\$)
	Staman Ogilvie				
10/8/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77056				1000

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		7 Amount of contributions (\$)
	Kenneth Jacobson				
10/8/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77025				500

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Loan agency	Hometruster Mortgage Co.

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		7 Amount of contributions (\$)
	Brenda Kirk				
10/8/2015	6 Contributor address; City; State; Zip Code				
	Humble TX 77346				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)
10/8/2015	Gregg Falgout ----- 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)	
10/8/2015	David Weekley ----- 6 Contributor address; City; State; Zip Code Houston TX 77055	7	Amount of contributions (\$)  5000
8 Principal occupation / Job title (See Instructions) Real Estate Development		9 Employer (See Instructions) Weekley Properties	
10/9/2015	Harold Hook ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$)  2500
8 Principal occupation / Job title (See Instructions) Management Training		9 Employer (See Instructions) Main Event Management Corp.	
10/9/2015	Elizabeth Altschuler ----- 6 Contributor address; City; State; Zip Code Houston Tx 77024	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A	
10/9/2015	Suzanne Simons ----- 6 Contributor address; City; State; Zip Code Houston Tx 77024	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)	
10/9/2015	6 Contributor address; City; State; Zip Code Houston Tx 77019		500
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) N/A	
10/9/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Warren McFatter 6 Contributor address; City; State; Zip Code Houston TX 77024		7 Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) President & CEO		9 Employer (See Instructions) Woodstone Resources Corporation	
10/9/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Karen Maclnnes 6 Contributor address; City; State; Zip Code Houston TX 77057		7 Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/9/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Gulley 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)	



# 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 (\$)
	Pat Rutherford	
	-----	
	6 Contributor address; City; State; Zip Code	
10/9/2015	Houston TX 77046	1000

8 Principal occupation / Job title (See Instructions) President and CEO	9 Employer (See Instructions) Rutherford Oil Corp.
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Manuel Sanchez	
	-----	
	6 Contributor address; City; State; Zip Code	
10/8/2015	Houston TX 77019	1000

8 Principal occupation / Job title (See Instructions) SCM Lead	9 Employer (See Instructions) CB&I
---	---------------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Sharhrzad Hamedarian	
	-----	
	6 Contributor address; City; State; Zip Code	
10/12/2015	Houston TX 77024	500

8 Principal occupation / Job title (See Instructions) Sales	9 Employer (See Instructions) Berkshire Hathaway Home Services
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
	Donna Freedman	
	-----	
	6 Contributor address; City; State; Zip Code	
10/8/2015	Houston TX 77024	500

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

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)
10/12/2015	Bruce Newell ----- 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)	
10/12/2015	4 Date 5 Full name of contributor SIMA of Houston <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77092	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/12/2015	4 Date 5 Full name of contributor Steven Mach <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77219	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Manufacturing		9 Employer (See Instructions) Mach Industrial Group	
10/12/2015	4 Date 5 Full name of contributor William Dickey <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77098	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) Self-employed	
10/12/2015	4 Date 5 Full name of contributor Phil Tanner <input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$) 200

**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)	
10/12/2015	6 Contributor address; City; State; Zip Code Seabrook TX 77586	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# ) Wayne Brinton	7 Amount of contributions (\$)	
10/12/2015	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# ) David McClanahan	7 Amount of contributions (\$)	
10/12/2015	6 Contributor address; City; State; Zip Code Houston TX 77005	1000	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Wilhelm	7 Amount of contributions (\$)	
10/12/2015	6 Contributor address; City; State; Zip Code Houston Tx 77057	100	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Wilhelm Enterprises	

**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 (\$)
	John Orton				
10/13/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77056				500

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Real Estate Partner	Thompson & Knight LLP

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	Kenneth Breitbell				
10/13/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77005				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# )	7	Amount of contributions (\$)
	Gregg Falgout				
10/12/2015	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# )	7	Amount of contributions (\$)
	Donald McAdams				
10/12/2015	6 Contributor address; City; State; Zip Code				
	Bellaire TX 77401				100

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
President	Center for Reform of School Systems

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)	
10/13/2015	Bradley Radoff ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Portfolio Management		9 Employer (See Instructions) Fondren Management, LP	
10/13/2015	4 Date 5 Full name of contributor Victor Grinshtein ----- 6 Contributor address; City; State; Zip Code Houston TX 77035	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Xvand Technology	
10/13/2015	4 Date 5 Full name of contributor Patricia Hair ----- 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)	
10/13/2015	4 Date 5 Full name of contributor Norm Wigington ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/13/2015	4 Date 5 Full name of contributor Suzanne Page-Pryde ----- 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)	
10/13/2015	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# ) Joanne K. Herring	7 Amount of contributions (\$)	
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	500	
8 Principal occupation / Job title (See Instructions) Community volunteer		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Haworth	7 Amount of contributions (\$)	
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77004	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# ) Barbara Patton	7 Amount of contributions (\$)	
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	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# )			
	John W. Miller					7 Amount of contributions (\$)
10/13/2015	6 Contributor address; City; State; Zip Code					200
			Houston TX 77079			

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# )			
	L.E. Simmons					7 Amount of contributions (\$)
10/13/2015	6 Contributor address; City; State; Zip Code					5000
			Houston TX 77002			

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Chairman	SCF Partners

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Floyd Mahanay					7 Amount of contributions (\$)
10/13/2015	6 Contributor address; City; State; Zip Code					250
			Houston TX 77020			

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Douglas C Atnipp					7 Amount of contributions (\$)
10/13/2015	6 Contributor address; City; State; Zip Code					1000
			Houston TX 77024			

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

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)	
10/13/2015	John Kirksey ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024	7	Amount of contributions (\$) 2000
8 Principal occupation / Job title (See Instructions) Architecture		9 Employer (See Instructions) Kirksey Architecture	
10/13/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) K. Alan Hassenflu ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Managing Principal		9 Employer (See Instructions) Fidelis Realty Partner	
10/13/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cherie G. Hassenflu ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Interior Design		9 Employer (See Instructions) Savant Design Group	
10/13/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Brad Fish ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77061	7	Amount of contributions (\$) 3000
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Sullair of Houston	
10/13/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Steve Cross	7	Amount of contributions (\$) 3000



# 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)	
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77062	1000	
8 Principal occupation / Job title (See Instructions) Employee compensation consulting		9 Employer (See Instructions) Frederic W. Cook & Co.	
10/13/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cornelius Dupre II 6 Contributor address; City; State; Zip Code Houston TX 77057	7 Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions) Independent Director		9 Employer (See Instructions) Energy XXI	
10/15/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) I.M. Jawdat, MD 6 Contributor address; City; State; Zip Code Houston TX 77025	7 Amount of contributions (\$) 100	
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Houston Heart Clinic	
10/15/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ralph O'Connor 6 Contributor address; City; State; Zip Code Houston TX 77024	7 Amount of contributions (\$) 4000	
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Ralph S. O'Connor & Associates	

# 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# ) J. Andrew Billipp	7	Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1500
8 Principal occupation / Job title (See Instructions) Real Estate Development		9 Employer (See Instructions) JA Billipp Company	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Andrews & Kurth Texas PAC	7	Amount of contributions (\$)
10/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77002		2500
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 Khoury	7	Amount of contributions (\$)
10/15/2015	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# ) John Brentin	7	Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77002		250
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Porter Hedges LLP	
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)	
10/15/2015	David Dominy ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Senior Managing Director		9 Employer (See Instructions) Integra Realty Resources	
10/15/2015	John L. Ebeling ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/15/2015	Edwin Bluestein ----- 6 Contributor address; City; State; Zip Code La Porte TX 77571	7	Amount of contributions (\$) 150
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/15/2015	Edward Goldsberry ----- 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)	
10/15/2015	Laura Schlameus ----- 6 Contributor address; City; State; Zip Code	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)
------------------------	---------------------------------------

10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77008	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# ) Christian Seger	7 Amount of contributions (\$)
10/15/2015	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# ) Tom Kirkendall	7 Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77381	300

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jeff Dinerstein	7 Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77005	500

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

# 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# )			
	Willis Dunkum					7 Amount of contributions (\$)
10/16/2015	6 Contributor address; City; State; Zip Code					500
			Houston TX 77056			

8 Principal occupation / Job title (See Instructions) Real estate finance	9 Employer (See Instructions) Grandbridge Real Estate
--	--

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Jason Ryan					7 Amount of contributions (\$)
10/16/2015	6 Contributor address; City; State; Zip Code					1000
			Houston TX 77021			

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Keith Stevenson					7 Amount of contributions (\$)
10/16/2015	6 Contributor address; City; State; Zip Code					1000
			Houston TX 77057			

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )			
	Katharine Gay					7 Amount of contributions (\$)
10/16/2015	6 Contributor address; City; State; Zip Code					500
			Houston TX 77058			

8 Principal occupation / Job title (See Instructions) Car Dealer	9 Employer (See Instructions) Gay Family Auto
---	--

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)
10/16/2015	Fred E. Bullough ----- 6 Contributor address; City; State; Zip Code Kingwood TX 77339	7	Amount of contributions (\$) 100
8	Principal occupation / Job title (See Instructions) Retired	9	Employer (See Instructions) N/A
10/16/2015	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)
10/16/2015	Raymond Hooker ----- 6 Contributor address; City; State; Zip Code Houston TX 77058	7	Amount of contributions (\$) 500
8	Principal occupation / Job title (See Instructions) Real Estate	9	Employer (See Instructions) REMAX
10/16/2015	Charles C. Foster ----- 6 Contributor address; City; State; Zip Code Houston TX 77006	7	Amount of contributions (\$) 750
8	Principal occupation / Job title (See Instructions) Attorney	9	Employer (See Instructions) Foster Global LLP
10/16/2015	Larry Campagna ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 750

**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)	
10/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	7 Amount of contributions (\$) 250	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Chamberlain Hrdlicka	
10/16/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard E Berry 6 Contributor address; City; State; Zip Code Magnolia TX 77355	7 Amount of contributions (\$) 100	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/15/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Elliot Gershenson 6 Contributor address; City; State; Zip Code Houston TX 77071	7 Amount of contributions (\$) 100	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Interfaith Ministries	
10/15/2015	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 (\$) 1500	
8 Principal occupation / Job title (See Instructions) Financial services		9 Employer (See Instructions) Goodman Financial Corporation	

**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# ) Melinda Brents	7 Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77061	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# ) John Merrill	7 Amount of contributions (\$)
10/15/2015	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# ) Jack Apple	7 Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	500

8 Principal occupation / Job title (See Instructions) Car dealer	9 Employer (See Instructions) Greenspoint Dodge
---	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Culver Stedman	7 Amount of contributions (\$)
10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77057	250

8 Principal occupation / Job title (See Instructions) Real estate	9 Employer (See Instructions) EDGE Realty Partners
--	---

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)	
10/16/2015	Dan Silvestri ----- 6 Contributor address; City; State; Zip Code Houston TX 77055	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Real Estate Investment		9 Employer (See Instructions) Silvestri Investments	
10/16/2015	Patrick Hall ----- 6 Contributor address; City; State; Zip Code Houston TX 77062	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/16/2015	Neal Pleasant ----- 6 Contributor address; City; State; Zip Code Kemah TX 77565	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/16/2015	Larry Johnson ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Real estate development		9 Employer (See Instructions) Johnson Development Corp.	
10/16/2015	Julie Baker ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 5000

# 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)	
10/16/2015	6 Contributor address; Houston	City; Houston	State; TX	Zip Code 77082
			100	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Community Volunteer			N/A	
4 Date	5 Full name of contributor Susan G. Baker	out of state PAC(ID# )		7
10/16/2015	6 Contributor address; Houston	City; Houston	State; TX	Zip Code 77024
			Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Community Volunteer			N/A	
4 Date	5 Full name of contributor Robert Clarke	out of state PAC(ID# )		7
10/16/2015	6 Contributor address; Houston	City; Houston	State; TX	Zip Code 77002
			Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Attorney			Bracewell Giuliani	
4 Date	5 Full name of contributor James Bartley	out of state PAC(ID# )		7
10/16/2015	6 Contributor address; Houston	City; Houston	State; TX	Zip Code 77099
			Amount of contributions (\$) 250	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)	
Owner			Newbart Products Inc.	

# 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# ) Soheyla Moazami	7	Amount of contributions (\$)
	10/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		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# ) Jim Dawley	7	Amount of contributions (\$)
	10/16/2015	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# ) Sallymoon Bentz	7	Amount of contributions (\$)
	10/19/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		500
8	Principal occupation / Job title (See Instructions) Community volunteer		9	Employer (See Instructions) N/A
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Esther Polland	7	Amount of contributions (\$)
	10/19/2015	6 Contributor address; City; State; Zip Code Bellaire TX 77401		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)	
10/19/2015	Patrick Hughes ----- 6 Contributor address;                      City;                      State;                      Zip Code The Woodlands TX 77381		7	Amount of contributions (\$) 375
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Haynes and Boone		
10/19/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John T. Cabaniss ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77002		7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) Senior retired partner		9 Employer (See Instructions) Andrews Kurth LLP		
10/17/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Val A. Aldred ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77079		7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A		
10/16/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Patricia Curtis ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027		7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Gemsa Loan Services LP		
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)	
10/16/2015	Louis K. Brandt ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/19/2015	4 Date 5 Full name of contributor Amir Ajani <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Sugar Land TX 77479	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) CSoft Technologies	
10/19/2015	4 Date 5 Full name of contributor Jan Wm. Verkaik <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77061	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/19/2015	4 Date 5 Full name of contributor Melvyn Wolff <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Chairman of the Board		9 Employer (See Instructions) Star Furniture	
10/19/2015	4 Date 5 Full name of contributor Kyle Lippman <input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$) 1000

# 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)	
10/19/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	750	
8 Principal occupation / Job title (See Instructions) Real Estate Development		9 Employer (See Instructions) NewQuest Properties	
10/19/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James E. Winn 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)	
10/19/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joe F. Wheat PC 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)	
10/19/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Meg Weekley 6 Contributor address; City; State; Zip Code Houston TX 77055	7 Amount of contributions (\$) 5000	
8 Principal occupation / Job title (See Instructions) Philanthropist		9 Employer (See Instructions) N/A	

# 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# )
	10/19/2015		Curtiss Brown
		6	Contributor address; City; State; Zip Code
			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# )
	10/19/2015		Eugene Tulich
		6	Contributor address; City; State; Zip Code
			Spring TX 77379
		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# )
	10/20/2015		Stephen Esses
		6	Contributor address; City; State; Zip Code
			Houston TX 77024
		7	Amount of contributions (\$)
			500
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Surgeon		Self
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	10/19/2015		Bill Toomey
		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)
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)
10/19/2015	Wayne Webb ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77059	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/19/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Brandon Henderson ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77007	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kathleen Yates ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77042	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Scott Phillips ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77042	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Alison Gardner	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)	
10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77042	30	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Anne Woods 6 Contributor address; City; State; Zip Code Houston TX 77036	7 Amount of contributions (\$) 50	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kelly Brown 6 Contributor address; City; State; Zip Code Houston TX 77010	7 Amount of contributions (\$) 500	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Crain Caton & James	
10/20/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Adger 6 Contributor address; City; State; Zip Code Houston TX 77019	7 Amount of contributions (\$) 600	
8 Principal occupation / Job title (See Instructions) Sr. Sales Representative		9 Employer (See Instructions) RR Donnelley	

# 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 (\$)
10/20/2015	Kimberly Van belle-ebel 6 Contributor address; City; State; Zip Code Houston TX 77063	1000

8 Principal occupation / Job title (See Instructions) Interior Design	9 Employer (See Instructions) KVBE Designs LLC
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/20/2015	Gary Gibson 6 Contributor address; City; State; Zip Code Houston TX 77056	500

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/20/2015	Randall Morse 6 Contributor address; City; State; Zip Code Richmond TX 77406	2000

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/20/2015	John Baber 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# )	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)	
10/20/2015	Bart Duckworth ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) The Ainbinder Company	
10/20/2015	Kelly Randall ----- 6 Contributor address; City; State; Zip Code Houston TX 77004	7	Amount of contributions (\$) 1
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/20/2015	Alain LeNotre ----- 6 Contributor address; City; State; Zip Code Houston TX 77022	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Culinary Institute LeNotre	
10/20/2015	Joann Crassas ----- 6 Contributor address; City; State; Zip Code Houston TX 77063	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Personette & Assoc.	
10/20/2015	Jafar Davoody ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 200

# 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)	
10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77046	500	
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Goli Real Estate LLC	
4 Date	5 Full name of contributor John Dietert	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1000	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor Deborah Keyser	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77002	1000	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
4 Date	5 Full name of contributor Kane Weiner	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	2000	
8 Principal occupation / Job title (See Instructions) Oil and gas		9 Employer (See Instructions) Texas Crude Energy Inc	

# 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# ) Paul Merryman	7	Amount of contributions (\$)
	10/20/2015	6 Contributor address; City; State; Zip Code Kemah TX 77565		300
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) N/A
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) George W. Strake	7	Amount of contributions (\$)
	10/20/2015	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# ) Linda Lawson	7	Amount of contributions (\$)
	10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77062		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# ) Fatima Mawji	7	Amount of contributions (\$)
	10/19/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		500
8	Principal occupation / Job title (See Instructions) Anesthesiologist		9	Employer (See Instructions) Self
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)
10/19/2015	Jason Barton ----- 6 Contributor address; City; State; Zip Code Houston TX 77058	7	Amount of contributions (\$)  50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/17/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Freudenberger ----- 6 Contributor address; City; State; Zip Code Houston TX 77096	7	Amount of contributions (\$)  400
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Briggs & Veselka Co.	
10/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) 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)	
10/13/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Chase Zalman ----- 6 Contributor address; City; State; Zip Code Sugar Land TX 77479	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# ) James McGrath	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)	
10/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77042		100
8 Principal occupation / Job title (See Instructions) Media Consultant		9 Employer (See Instructions) Begala-McGrath LLC	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard Seitz	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Spring TX 77388		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Dannenbaum Engineering	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Daniel Everett	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Lake Dallas TX 75065		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Dannenbaum Engineering	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jacob Polatsek	7	Amount of contributions (\$)
10/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		
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# ) Charles Jordan	7	Amount of contributions (\$)
10/20/2015	6 Contributor address; City; State; Zip Code Friendswood TX 77546		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# ) Charlie Thomas	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		2500
8 Principal occupation / Job title (See Instructions) Car dealer		9 Employer (See Instructions) Self	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Morrie Abramson	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		600
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Norm Wigington	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		250
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
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)
10/21/2015	Conlin R. Brogan ----- 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)	
10/21/2015	Eric Schaeffer ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027	7	Amount of contributions (\$)  500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Schaeffer Law Firm	
10/21/2015	Ben Morse ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77002	7	Amount of contributions (\$)  75
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/21/2015	George Farish ----- 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)	
10/21/2015	Stephen Pitt ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Bill King		3 Filer ID (Ethics Commission filers)	
10/21/2015	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# ) David Dunwoody	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77002		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# ) Fredell Deutser	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1000
8 Principal occupation / Job title (See Instructions) Community volunteer		9 Employer (See Instructions) N/A	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Clay Hoster	7	Amount of contributions (\$)
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77005		500
8 Principal occupation / Job title (See Instructions) Banker		9 Employer (See Instructions) Independent Bank	

# 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# )			
	Debra Hayes					
	6 Contributor address;			City;	State;	Zip Code
10/21/2015			Houston	TX	77055	
						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# )			
	Roy Beery					
	6 Contributor address;			City;	State;	Zip Code
10/21/2015			Houston	TX	77056	
						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# )			
	Bob Brooks					
	6 Contributor address;			City;	State;	Zip Code
10/21/2015			Houston	TX	77025	
						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# )			
	Bob Brooks					
	6 Contributor address;			City;	State;	Zip Code
10/21/2015			Houston	TX	77025	
						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)	
10/21/2015	LeRoy Mehan ----- 6 Contributor address;                      City;                      State;                      Zip Code Kingwood TX 77345	7	Amount of contributions (\$)  100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lee Neathery ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77007	7	Amount of contributions (\$)  1050
8 Principal occupation / Job title (See Instructions) Co-Owner		9 Employer (See Instructions) Bike Barn	
10/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Frank Markantonis ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77040	7	Amount of contributions (\$)  2000
8 Principal occupation / Job title (See Instructions) General Counsel		9 Employer (See Instructions) Pappas Restaurants	
10/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robbie Guinn ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77063	7	Amount of contributions (\$)  50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/22/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mario Frosinini	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)	
10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77043	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# ) Elizabeth Hoff	7 Amount of contributions (\$)	
10/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1500	
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) JDRF	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Victor Grinshtein	7 Amount of contributions (\$)	
10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77035	200	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Xvand Technology	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Barineau	7 Amount of contributions (\$)	
10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	500	
8 Principal occupation / Job title (See Instructions) Property Management		9 Employer (See Instructions) Radney Management	

# 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 (\$)
	Elizabeth Winston Jones				
	6 Contributor address; City; State; Zip Code				
10/22/2015			Houston TX 77007		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# )	7	Amount of contributions (\$)
	Richard Domercq				
	6 Contributor address; City; State; Zip Code				
10/22/2015			Houston TX 77019		200

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	David R. Hoyer, Jr.				
	6 Contributor address; City; State; Zip Code				
10/22/2015			Houston TX 77019		120

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

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	Janey Aldred				
	6 Contributor address; City; State; Zip Code				
10/22/2015			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)	
10/22/2015	Richard Harris ----- 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)	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) I.M. Jawdat, MD ----- 6 Contributor address; City; State; Zip Code Houston TX 77025	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Houston Heart Clinic	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Grant Harvey ----- 6 Contributor address; City; State; Zip Code Houston TX 77055	7	Amount of contributions (\$) 1000
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Gibbs & Brun LLP	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Hannah III ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Vasant Hariani	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)	
10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	7 Amount of contributions (\$) 1500	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Infrastructure Associates	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Darrell Morrison 6 Contributor address; City; State; Zip Code Pasadena TX 77505	7 Amount of contributions (\$) 1500	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) HTS Consultants	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) LAN-PAC 6 Contributor address; City; State; Zip Code Houston TX 77042	7 Amount of contributions (\$) 2500	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) H.A. Forouzan 6 Contributor address; City; State; Zip Code Sugar Land TX 77479	7 Amount of contributions (\$) 1000	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Gupta & Associates	



# 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# ) Louis K. Brandt	7	Amount of contributions (\$)
	10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		100
8	Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John T. McMahon	7	Amount of contributions (\$)
	10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		75
8	Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Hlgman Marine Services	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Irwin L. Levy	7	Amount of contributions (\$)
	10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		150
8	Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gregory Nelson	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77002		1000
8	Principal occupation / Job title (See Instructions) Partner		9 Employer (See Instructions) Paul Hastings LLP	
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)
10/23/2015	Alice Butrum ----- 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)	
10/23/2015	4 Date 5 Full name of contributor Charles W. Jenness ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Vice Chairman		9 Employer (See Instructions) Cadence Bank	
10/23/2015	4 Date 5 Full name of contributor Paula Arnold ----- 6 Contributor address; City; State; Zip Code Houston TX 77057	7	Amount of contributions (\$) 750
8 Principal occupation / Job title (See Instructions) Public relations		9 Employer (See Instructions) Paula Arnold Associates	
10/23/2015	4 Date 5 Full name of contributor Todd Johnson ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 3000
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Aztec Events and Tents	
10/23/2015	4 Date 5 Full name of contributor Kelly Randall ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	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)	
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77004	1	
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# ) Peter C. DeLongchamps	7 Amount of contributions (\$)	
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Group 1 Automotive	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Darryl Burman	7 Amount of contributions (\$)	
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		
8 Principal occupation / Job title (See Instructions) VP and General Counsel		9 Employer (See Instructions) Group 1 Automotive	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Debra Marcell	7 Amount of contributions (\$)	
10/23/2015	6 Contributor address; City; State; Zip Code Missouri City TX 77459		
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Debra Marcell Real Estate LLC	

# 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 Rickel	7 Amount of contributions (\$)	
10/23/2015	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) Group One Automotive	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Group 1 Automotive, Inc. Political Action Committee	7 Amount of contributions (\$)	
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	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# ) Krista Tucek	7 Amount of contributions (\$)	
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77008	3000	
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) HISD Foundation	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Cryan	7 Amount of contributions (\$)	
10/23/2015	6 Contributor address; City; State; Zip Code Sealy TX 77474	500	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Ranch Country Custom Homes	

# 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# ) Toby Gold	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		1000
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) N/A
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark Russell	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Spring TX 77388		500
8	Principal occupation / Job title (See Instructions) CPA		9	Employer (See Instructions) Self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Eddie Burke	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77042		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# ) James Waller	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		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# )		

# 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)	
10/23/2015	Jay Karkowsky ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 60
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Charles F. Hall ----- 6 Contributor address;                      City;                      State;                      Zip Code League City TX 77574	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Mastandrea ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77063	7	Amount of contributions (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/23/2015	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 (\$) 1000
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Sumner Realty	
10/23/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ralph Clinard	7	Amount of contributions (\$) 60

# 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)	
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77082	360	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
10/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Fred Prella 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)	
10/23/2015	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 (\$)  200	
8 Principal occupation / Job title (See Instructions) Finance Management		9 Employer (See Instructions) Occidental Oil & Gas	
10/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Donald McAdams 6 Contributor address; City; State; Zip Code Bellaire TX 77401	7 Amount of contributions (\$)  300	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Center for Reform of School Systems	

# 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# ) Carl Glaw	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77028		2000
8	Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) GLO CPAs, LLP	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Howard T. Tellepsen, Jr.	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Simonton TX 77476		500
8	Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Tellepsen	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Allan Port	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1000
8	Principal occupation / Job title (See Instructions) Executive Vice President		9 Employer (See Instructions) Amegy Bank	
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Norm Wigington	7	Amount of contributions (\$)
	10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		100
8	Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	
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)
10/23/2015	Laurence Neuhaus ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Real Estate Management		9 Employer (See Instructions) Newhouse Investment	
10/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laurence Neuhaus ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Real Estate Management		9 Employer (See Instructions) Newhouse Investment	
10/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Duncan ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027	7	Amount of contributions (\$) 150
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Transwestern	
10/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Randolph DeLay ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77082	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
10/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) George Martinez ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77082	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)	
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77040	500	
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Alegiance Bank of Texas	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Esenwein	7 Amount of contributions (\$)	
10/24/2015	6 Contributor address; City; State; Zip Code Hockley TX 77447	200	
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# ) Laura Jaramillo	7 Amount of contributions (\$)	
10/24/2015	6 Contributor address; City; State; Zip Code Pearland TX 77584	500	
8 Principal occupation / Job title (See Instructions) Senior Vice President		9 Employer (See Instructions) Wells Fargo	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Arthur W. Epley III	7 Amount of contributions (\$)	
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	100	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A	

# 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# ) Peter Brown	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77098	500

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Brenda Mainwaring	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Spring TX 77373	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# ) John Orton	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	500

8 Principal occupation / Job title (See Instructions) Real Estate	9 Employer (See Instructions) Thompson & Knight LLP
--	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Don Hooper	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Richmond TX 77406	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)
10/24/2015	Laurie Morse ----- 6 Contributor address; City; State; Zip Code Lakeway TX 78734	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/24/2015	4 Date 5 Full name of contributor Webb Jennings ----- 6 Contributor address; City; State; Zip Code Houston TX 77056 out of state PAC(ID# )	7	Amount of contributions (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/24/2015	4 Date 5 Full name of contributor Bill Boyar ----- 6 Contributor address; City; State; Zip Code Houston TX 77027 out of state PAC(ID# )	7	Amount of contributions (\$) 500
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Boyar Miller	
10/24/2015	4 Date 5 Full name of contributor Eugene Tulich ----- 6 Contributor address; City; State; Zip Code Spring TX 77379 out of state PAC(ID# )	7	Amount of contributions (\$) 50
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/24/2015	4 Date 5 Full name of contributor Patricia Jones ----- 6 Contributor address; City; State; Zip Code 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)

10/24/2015	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77056	100
------------	---	-----

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

10/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) William Dickey 6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77098	7 Amount of contributions (\$)  250
------------	---	---

8 Principal occupation / Job title (See Instructions) Real estate	9 Employer (See Instructions) Self-employed
--	--

10/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ted Dom 6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston Tx 77019	7 Amount of contributions (\$)  100
------------	--	---

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

10/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bill Mosley 6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77057	7 Amount of contributions (\$)  500
------------	--	---

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

# 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# ) Dennis Thornton	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77058	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# ) Paul Gessinger	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	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# ) Ann Trammell	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	3000

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mary Jo Antone-Hatfield	7 Amount of contributions (\$)
10/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	300

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

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)	
10/24/2015	Danny Walden ----- 6 Contributor address; City; State; Zip Code Houston TX 77007	7	Amount of contributions (\$) 1
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thomas Brents ----- 6 Contributor address; City; State; Zip Code Houston TX 77061	7	Amount of contributions (\$) 200
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/8/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bonnie Weekley ----- 6 Contributor address; City; State; Zip Code Houston TX 77055	7	Amount of contributions (\$) 5000
8 Principal occupation / Job title (See Instructions) Philanthropist		9 Employer (See Instructions) N/A	
9/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Freudenberger ----- 6 Contributor address; City; State; Zip Code Houston TX 77096	7	Amount of contributions (\$) 300
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) Briggs & Veselka Co.	
	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Anderson	7	Amount of contributions (\$) 1

# 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)	
9/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77025	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# ) Ramsay Elder	7 Amount of contributions (\$)	
10/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77005	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# ) Terry Townsend	7 Amount of contributions (\$)	
10/4/2015	6 Contributor address; City; State; Zip Code Houston TX 77006	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# ) David Andrew	7 Amount of contributions (\$)	
10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	500	
8 Principal occupation / Job title (See Instructions) CFA		9 Employer (See Instructions) Autumn Lane Advisors	



# 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# )
	10/13/2015		Hans Olavson
		6	Contributor address; City; State; Zip Code
			Houston TX 77079
		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# )
	10/15/2015		John Dickson Rogers
		6	Contributor address; City; State; Zip Code
			Houston TX 77056
		7	Amount of contributions (\$)
			500
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Retired		N/A
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	10/19/2015		Dave Smalley
		6	Contributor address; City; State; Zip Code
			The Woodlands TX 77387
		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# )
	10/23/2015		Danny Walden
		6	Contributor address; City; State; Zip Code
			Houston TX 77007
		7	Amount of contributions (\$)
			1
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# ) Robert Wisner	7	Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77010		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sarah Huynh	7	Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77036		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Timothy Seay	7	Amount of contributions (\$)
10/22/2015	6 Contributor address; City; State; Zip Code The Woodlands TX 77380		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Matthew Rotan	7	Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		1,000.00
8 Principal occupation / Job title (See Instructions) Vice Chairman		9 Employer (See Instructions) ARA Newmark	

**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# ) Betty Vann	7 Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	400.00

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lora Jean Kilroy	7 Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77019	300.00

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

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sidney Adger	7 Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	50.00

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

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

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

# 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	Date	6 Full name of contributor Houston Realty Business Coalition	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/28/2015	7 Contributor address; City; State; Zip Code Houston TX 77027			2709.76	Pro rata share of mailer
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

5	Date	6 Full name of contributor Houston Realty Business Coalition	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/13/2015	7 Contributor address; City; State; Zip Code Houston TX 77027			3280.05	Pro rata share of mailer
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

5	Date	6 Full name of contributor Houston Realty Business Coalition	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/23/2015	7 Contributor address; City; State; Zip Code Houston TX 77027			3280.05	Pro rata share of mailer
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

# 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	Date	6 Full name of contributor C Club	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/5/2015	7 Contributor address; Houston TX 77201	City; State; Zip Code Houston TX 77201		2400.00	Pro rata share of mailer
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

5	Date	6 Full name of contributor C Club	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/19/2015	7 Contributor address; Houston TX 77201	City; State; Zip Code Houston TX 77201		4800.00	Pro rata share of mailer
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

5	Date	6 Full name of contributor Cheri Fama	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/29/2015	7 Contributor address; Houston TX 77027	City; State; Zip Code Houston TX 77027		350.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

# 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	Date	6 Full name of contributor Heidi Dugan	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/29/2015	7 Contributor address; Houston TX 77098	City; State; Zip Code		350.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

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

5	Date	6 Full name of contributor Nancy Scott	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/29/2015	7 Contributor address; Houston Tx 77086	City; State; Zip Code		350.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) Realtor	11 Employer (See Instructions) Heritage Texas Properties
---	---

5	Date	6 Full name of contributor Mike Huff	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/29/2015	7 Contributor address; Houston TX 77006	City; State; Zip Code		550.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) Realtor	11 Employer (See Instructions) Berkshire Hathaway HomeServices Anderson Properties
---	---

# 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	Date	6 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/29/2015	John Dietert			\$1,050.03	food/beverages for event
		7 Contributor address; City; State; Zip Code				
		Houston TX 77056				
				<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
Retired	N/A

5	Date	6 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/7/2015	Davis Holdings L.P.			\$952.13.	food/beverages for event
		7 Contributor address; City; State; Zip Code				
		Houston TX 77010				
				<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

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

5	Date	6 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/5/2015	Tina Silvestri			\$225.00	food/beverages for event
		7 Contributor address; City; State; Zip Code				
		Houston TX 77063				
				<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

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

# 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	Date	6 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/19/2015	Cheryl Ford				500.00	food/beverages for event
		7 Contributor address; City; State; Zip Code					
		The Woodlands TX 77381					
					<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

10 Principal occupation / Job title (See Instructions) Realtor	11 Employer (See Instructions) Gary Greene
---	---

5	Date	6 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/17/2015	Suneeta Rangwani				225.00	food/beverages for event
		7 Contributor address; City; State; Zip Code					
		Houston TX 77007					
					<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

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

5	Date	6 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/5/2015	Masraff's Restaurant				2516.81	food/beverages for event
		7 Contributor address; City; State; Zip Code					
		Houston TX 77056					
					<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		

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



# 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	Date	6 Full name of contributor Karun Sreerama	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/17/2015	7 Contributor address; Houston TX 77059	City; State; Zip Code		500.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) Asset Management Consultant	11 Employer (See Instructions) Self
---	--

5	Date	6 Full name of contributor Ileana Trevino	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/6/2015	7 Contributor address; Houston TX 77056	City; State; Zip Code		3000.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) CEO	11 Employer (See Instructions) Memorial Hermann Foundation
---	---

5	Date	6 Full name of contributor Suzanne Ebrahimi	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/25/2015	7 Contributor address; Houston TX 77042	City; State; Zip Code		1200.00	food/beverages for event
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) Homemaker	11 Employer (See Instructions) N/A
---	---------------------------------------

**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	Date	6 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/13/2015	Guy Matthews				2117.55	food/beverages for event
		7 Contributor address; City; State; Zip Code					
				Houston TX 77057	<input type="checkbox"/>		Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (See Instructions) Attorney	11 Employer (See Instructions) Matthews Lawson McCutcheon & Joseph PLLC
--	--

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

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/25/2015	5 Payee name River Oaks Country Club	
6 Amount (\$) 246.92	7 Payee address; City; State; Zip Code 1600 River Oaks Blvd.  Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(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 campaign meeting
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/25/2015	5 Payee name Latonya Howard	
6 Amount (\$) 336	7 Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584	
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 9/25/2015	5 Payee name KTRK-TV	
6 Amount (\$) 16977.5	7 Payee address; City; State; Zip Code 3310 Bissonnet St.  Houston TX 77005	
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 ad buy	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date 9/25/2015	<b>5</b> Payee name KRIV		
<b>6</b> Amount (\$) 6545	<b>7</b> Payee address; City; State; Zip Code 4261 Southwest Fwy Houston TX 77027		

<b>8</b> 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 ad buy
---------------------------------	-------------------------------------	--

<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.

<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 9/25/2015	<b>5</b> Payee name Comcast	
<b>6</b> Amount (\$) 14450.85	<b>7</b> Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040	
<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 buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/25/2015	<b>5</b> Payee name KSEV Radio	
<b>6</b> Amount (\$) 2040	<b>7</b> Payee address; City; State; Zip Code 11451 Katy Freeway, Ste. 215  Houston TX 77079	
<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 buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/25/2015	<b>5</b> Payee name IHeartMedia	
<b>6</b> Amount (\$) 27370	<b>7</b> Payee address; City; State; Zip Code P.O. Box 847654  Dallas TX 75284	
<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 ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/25/2015	5 Payee name KPRC		
6 Amount (\$) 17701	7 Payee address; City; State; Zip Code 8181 Southwest Freeway  Houston TX 77074		
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad 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 9/25/2015	<b>5</b> Payee name KHOU TV	
<b>6</b> Amount (\$) 16681.25	<b>7</b> Payee address; City; State; Zip Code 1945 Allen Parkway  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 ad buy
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/25/2015	<b>5</b> Payee name Speedy Printing	
<b>6</b> Amount (\$) 1728.17	<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 Push Cards
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/25/2015	<b>5</b> Payee name ADP	
<b>6</b> Amount (\$) 69.27	<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
	<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 Payroll fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/25/2015	5 Payee name Speedy Printing		
6 Amount (\$) 4353.81	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 mail piece
--------------------------	--------------------------------------	--------------------------	---

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 9/25/2015	5 Payee name Speedy Printing	
6 Amount (\$) 2265.02	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 mail piece
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/25/2015	5 Payee name Speedy Printing	
6 Amount (\$) 286.6	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 stationary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/28/2015	5 Payee name Google	
6 Amount (\$) 500	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View CA 94043	
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 advertising
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/28/2015	5 Payee name John Perez		
6 Amount (\$) 598	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"/>	(b) Description  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

# 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 9/29/2015	5 Payee name Target	
6 Amount (\$) 32.44	7 Payee address; City; State; Zip Code 4323 San Felipe  Houston TX 77027	
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 9/29/2015	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 9/30/2015	5 Payee name Latonya Howard	
6 Amount (\$) 240	7 Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584	
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 9/30/2015	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"/> <input type="checkbox"/> 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 9/30/2015	<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 9/30/2015	<b>5</b> Payee name Christopher A. Watson	
<b>6</b> Amount (\$) 1750	<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 9/30/2015	<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
	<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)
	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 9/30/2015	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	<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 taxes
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 10/1/2015	<b>5</b> Payee name KPRC	
<b>6</b> Amount (\$) 17701	<b>7</b> Payee address; City; State; Zip Code 8181 Southwest Freeway  Houston TX 77074	
<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 buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/1/2015	<b>5</b> Payee name KHOU TV	
<b>6</b> Amount (\$) 17002.5	<b>7</b> Payee address; City; State; Zip Code 1945 Allen Parkway  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 ad buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/1/2015	<b>5</b> Payee name IHeartMedia	
<b>6</b> Amount (\$) 25695.5	<b>7</b> Payee address; City; State; Zip Code P.O. Box 847654  Dallas TX 75284	
<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"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/1/2015	5 Payee name KSEV Radio		
6 Amount (\$) 2040	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"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad 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 10/1/2015	5 Payee name Pinkciantro LLC	
6 Amount (\$) 9500	7 Payee address; City; State; Zip Code 11333 Chimney Rock Rd  Houston TX 77035	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense social media management
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/1/2015	5 Payee name Hawley Design	
6 Amount (\$) 1125	7 Payee address; City; State; Zip Code 2602 La Teche  Seabrook TX 77586	
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 graphic design
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/1/2015	5 Payee name McNee Productions	
6 Amount (\$) 1538.57	7 Payee address; City; State; Zip Code 3301 West Alabama  Houston TX 77098	
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 ad production
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/1/2015	5 Payee name Razor IT Solutions		
6 Amount (\$) 500	7 Payee address; City; State; Zip Code 340 S Lemon Ave, #7557N  Los Angeles CA 91789		
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 research
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 10/1/2015	<b>5</b> Payee name Beavers Media	
<b>6</b> Amount (\$) 9600.58	<b>7</b> Payee address; City; State; Zip Code 8925 Briar Forest Drive  Houston TX 77024	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense 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 10/1/2015	<b>5</b> Payee name OCS	
<b>6</b> Amount (\$) 102.84	<b>7</b> Payee address; City; State; Zip Code 780 Westridge Rd.  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 software service
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/1/2015	<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	(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 10/1/2015	5 Payee name Cinthia M. Moore Make-Up Artist, LP		
6 Amount (\$) 350	7 Payee address; City; State; Zip Code 5518 Cheltenham Drive Houston TX 77096		

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 ad production
--------------------------	-------------------------------------	--------------------------	--

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 10/1/2015	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  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 research and policy work
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/1/2015	5 Payee name Begala-McGrath	
6 Amount (\$) 18350	7 Payee address; City; State; Zip Code 4141 Coleridge Street  Houston TX 77005	
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 and commission
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/1/2015	5 Payee name 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	(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)
	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 10/1/2015	5 Payee name Campos Communications		
6 Amount (\$) 16000	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.

<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 10/2/2015	<b>5</b> Payee name Doug Quinn	
<b>6</b> Amount (\$) 1000	<b>7</b> Payee address; City; State; Zip Code 11284 Hwy 119 N  Yorktown TX 78164	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Refund	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense refund contribution
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/2/2015	<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 10/2/2015	<b>5</b> Payee name The What's UP Program	
<b>6</b> Amount (\$) 15000	<b>7</b> Payee address; City; State; Zip Code 12337 Jones Road, Suite 450  Houston TX 77070	
<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"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 10/2/2015	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	(b) Description <input type="checkbox"/> <input type="checkbox"/> 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 10/2/2015	<b>5</b> Payee name KTRK-TV		
<b>6</b> Amount (\$) 16977.5	<b>7</b> Payee address; City; State; Zip Code 3310 Bissonnet St.  Houston TX 77005		
<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 buy	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>4</b> Date 10/2/2015	<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 10/2/2015	<b>5</b> Payee name Comcast		
<b>6</b> Amount (\$) 14450.85	<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 ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/2/2015	5 Payee name KRIV		
6 Amount (\$) 6545	7 Payee address; City; State; Zip Code 4261 Southwest Fwy Houston TX 77027		
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 ad 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 10/2/2015	5 Payee name Prosperity Bank	
6 Amount (\$) 20	7 Payee address; City; State; Zip Code 55 Waugh Dr., #100  Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  bank fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/5/2015	5 Payee name OfficeMax	
6 Amount (\$) 81.16	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 10/5/2015	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	(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 10/5/2015	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 10/6/2015	5 Payee name Phil Kunetka	
6 Amount (\$) 1870.17	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 10/6/2015	5 Payee name Kubis Interactive, Inc.	
6 Amount (\$) 4654.75	7 Payee address; City; State; Zip Code 1210 West Clay, Suite 26  Houston TX 77019	
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 online ads
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/6/2015	5 Payee name Latonya Howard	
6 Amount (\$) 352	7 Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

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

<b>4</b> Date 10/7/2015	<b>5</b> Payee name Kelly Randall
<b>6</b> Amount (\$) 106.93	<b>7</b> Payee address;            City;            State;            Zip Code 2502 Rosewood  Houston TX 77004

<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 Reimburse for office supplies
---------------------------------	---	---

<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.

<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 10/7/2015	<b>5</b> Payee name John Perez	
<b>6</b> Amount (\$) 450	<b>7</b> Payee address; City; State; Zip Code 7723 Elm  Houston TX 77023	
<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 sign placement
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/8/2015	<b>5</b> Payee name KSEV Radio	
<b>6</b> Amount (\$) 1500	<b>7</b> Payee address; City; State; Zip Code 11451 Katy Freeway, Ste. 215  Houston TX 77079	
<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 buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/8/2015	<b>5</b> Payee name IHeartMedia	
<b>6</b> Amount (\$) 30500	<b>7</b> Payee address; City; State; Zip Code P.O. Box 847654  Dallas TX 75284	
<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 ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/8/2015	5 Payee name Sprint 2 Print		
6 Amount (\$) 2339.28	7 Payee address; City; State; Zip Code 8748 Clay Rd. Ste. 300  Houston TX 77080		

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

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



**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

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

<b>4</b> Date 10/12/2015	<b>5</b> Payee name KPRC	
<b>6</b> Amount (\$) 12325	<b>7</b> Payee address; City; State; Zip Code 8181 Southwest Freeway  Houston TX 77074	
<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 buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/12/2015	<b>5</b> Payee name KHOU TV	
<b>6</b> Amount (\$) 12410	<b>7</b> Payee address; City; State; Zip Code 1945 Allen Parkway  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)
	Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 10/12/2015	5 Payee name Comcast		
6 Amount (\$) 18500	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"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad 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 10/12/2015	<b>5</b> Payee name KRIV	
<b>6</b> Amount (\$) 12792.5	<b>7</b> Payee address; City; State; Zip Code 4261 Southwest Fwy  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 ad buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/12/2015	<b>5</b> Payee name United States Postal Service	
<b>6</b> Amount (\$) 11684.96	<b>7</b> Payee address; City; State; Zip Code 1319 Richmond Ave.  Houston TX 77006	
<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 postage
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/12/2015	<b>5</b> Payee name Latonya Howard	
<b>6</b> Amount (\$) 344	<b>7</b> Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584	
<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 10/12/2015	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  Advertising Expense	(b) Description <input type="checkbox"/> <input type="checkbox"/> Email marketing
--------------------------	---	--

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 10/12/2015	5 Payee name United States Postal Service	
6 Amount (\$) 441	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 10/13/2015	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 10/13/2015	5 Payee name KTRK-TV	
6 Amount (\$) 13026.25	7 Payee address; City; State; Zip Code 3310 Bissonnet St.  Houston TX 77005	
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)
	Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 10/13/2015	5 Payee name OfficeMax		
6 Amount (\$) 72.08	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"/> <input type="checkbox"/> Office supplies
--------------------------	--	--

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 10/13/2015	5 Payee name Prosperity Bank	
6 Amount (\$) 20	7 Payee address; City; State; Zip Code 55 Waugh Dr., #100  Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  bank fee
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/14/2015	5 Payee name Sprint 2 Print	
6 Amount (\$) 1829.43	7 Payee address; City; State; Zip Code 8748 Clay Rd. Ste. 300  Houston TX 77080	
8 PURPOSE OF EXPENDITURE	(a) Category  Printing Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  campaign t-shirts
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/14/2015	5 Payee name Jewish Herald Voice	
6 Amount (\$) 1511	7 Payee address; City; State; Zip Code 3403 Audley St.  Houston TX 77098	
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)
	Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/15/2015	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"/> <input type="checkbox"/> 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 10/15/2015	<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 10/15/2015	<b>5</b> Payee name Christopher A. Watson	
<b>6</b> Amount (\$) 1750	<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 10/15/2015	<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	(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 10/15/2015	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	<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 taxes
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 10/15/2015	5 Payee name OfficeMax	
6 Amount (\$) 231.56	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 10/15/2015	5 Payee name OfficeMax	
6 Amount (\$) 213.22	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 10/15/2015	5 Payee name OfficeMax	
6 Amount (\$) 72.52	7 Payee address; City; State; Zip Code 1576 West Gray  Houston TX 77019	
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 Office supplies
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 10/16/2015	5 Payee name John Perez		
6 Amount (\$) 638.57	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 10/17/2015	5 Payee name Comcast	
6 Amount (\$) 3282.95	7 Payee address; City; State; Zip Code 8550 West Tidwell Road  Houston TX 77040	
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 ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/17/2015	5 Payee name Latonya Howard	
6 Amount (\$) 328	7 Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584	
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 10/19/2015	5 Payee name Beavers Media	
6 Amount (\$) 17345.08	7 Payee address; City; State; Zip Code 8925 Briar Forest Drive  Houston TX 77024	
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 ad design
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/19/2015	5 Payee name Gulf Coast Hot Shot		
6 Amount (\$) 289	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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 10/19/2015	5 Payee name Cynthia M. Moore Make-Up Artist, LP	
6 Amount (\$) 700	7 Payee address; City; State; Zip Code 5518 Cheltenham Drive Houston TX 77096	
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 ad production
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/19/2015	5 Payee name OCS	
6 Amount (\$) 622.44	7 Payee address; City; State; Zip Code 780 Westridge Rd. The Woodlands TX 77380	
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 software service
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/19/2015	5 Payee name Reel Connection Media, Inc.	
6 Amount (\$) 1150	7 Payee address; City; State; Zip Code 16115 Parish Hall Dr. Spring TX 77379	
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 video production and editing
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/19/2015	5 Payee name Pinkciantro LLC		
6 Amount (\$) 2000	7 Payee address; City; State; Zip Code 11333 Chimney Rock Rd  Houston TX 77035		

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 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 10/19/2015	5 Payee name Speedy Printing	
6 Amount (\$) 1891.48	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 invitations
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/19/2015	5 Payee name KSEV Radio	
6 Amount (\$) 2665	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 ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/19/2015	5 Payee name IHeartMedia	
6 Amount (\$) 25330	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"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad buy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/19/2015	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"/> <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.

<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 10/20/2015	<b>5</b> Payee name Latonya Howard	
<b>6</b> Amount (\$) 264	<b>7</b> Payee address; City; State; Zip Code 2400 Business Ctr Dr  Houston TX 77584	
<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 sign placement
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/20/2015	<b>5</b> Payee name Lonnie Green	
<b>6</b> Amount (\$) 340	<b>7</b> Payee address; City; State; Zip Code 10314 Carter Rd.  Houston TX 77070	
<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 sign placement
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/22/2015	<b>5</b> Payee name Lonnie Green	
<b>6</b> Amount (\$) 588	<b>7</b> Payee address; City; State; Zip Code 10314 Carter Rd.  Houston TX 77070	
<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 10/22/2015	5 Payee name Latonya Howard		
6 Amount (\$) 398	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"/> <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 10/22/2015	5 Payee name John Perez	
6 Amount (\$) 350	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 10/22/2015	5 Payee name Christopher A. Watson	
6 Amount (\$) 131	7 Payee address; City; State; Zip Code 909 Texas Avenue, #1413  Houston TX 77002	
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 gas reimbursement
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/23/2015	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	(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)
	Advertising Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense advertising
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 10/23/2015	5 Payee name KSEV Radio		
6 Amount (\$) 2125	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"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense ad 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 10/23/2015	<b>5</b> Payee name IHeartMedia	
<b>6</b> Amount (\$) 25865.5	<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  ad buy
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/23/2015	<b>5</b> Payee name Colon & Company	
<b>6</b> Amount (\$) 7000	<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  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
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/23/2015	<b>5</b> Payee name ADP	
<b>6</b> Amount (\$) 69.27	<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 10/24/2015	5 Payee name Speedy Printing		
6 Amount (\$) 1002.61	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 stationary
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 10/24/2015	5 Payee name Hawley Design	
6 Amount (\$) 300	7 Payee address; City; State; Zip Code 2602 La Teche  Seabrook TX 77586	
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 graphic design
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/24/2015	5 Payee name Reel Connection Media, Inc.	
6 Amount (\$) 600	7 Payee address; City; State; Zip Code 16115 Parish Hall Dr.  Spring TX 77379	
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 video production and editing
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 10/24/2015	5 Payee name Bay Oaks Country Club	
6 Amount (\$) 242.57	7 Payee address; City; State; Zip Code 14545 Bay Oaks Blvd.  Houston TX 77059	
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)
	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 meeting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/24/2015	5 Payee name Gulf Coast Hot Shot		
6 Amount (\$) 130	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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 9/28/2015	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	(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 9/28/2015	5 Payee name PayPal	
6 Amount (\$) 31.3	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 9/30/2015	5 Payee name PayPal	
6 Amount (\$) 31.3	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 10/1/2015	5 Payee name PayPal		
6 Amount (\$) 14.8	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 10/1/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 35	<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 10/1/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 35	<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 10/1/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 14.8	<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 10/1/2015	5 Payee name PayPal		
6 Amount (\$) 14.8	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 10/1/2015	5 Payee name PayPal	
6 Amount (\$) 35	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 10/1/2015	5 Payee name PayPal	
6 Amount (\$) 10.5	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 10/2/2015	5 Payee name PayPal	
6 Amount (\$) 35	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 10/2/2015	5 Payee name PayPal		
6 Amount (\$) 35	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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 10/2/2015	5 Payee name PayPal	
6 Amount (\$) 14.8	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 10/5/2015	5 Payee name PayPal	
6 Amount (\$) 17.5	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 10/6/2015	5 Payee name PayPal	
6 Amount (\$) 7.55	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 10/6/2015	5 Payee name PayPal		
6 Amount (\$) 3.2	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 10/6/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 14.8	<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 10/7/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 17.5	<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 10/10/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.2	<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 10/12/2015	5 Payee name PayPal		
6 Amount (\$) 14.8	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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 10/13/2015	5 Payee name PayPal	
6 Amount (\$) 87.3	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 10/13/2015	5 Payee name PayPal	
6 Amount (\$) 3.2	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 10/13/2015	5 Payee name PayPal	
6 Amount (\$) 29.3	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 10/13/2015	5 Payee name PayPal		
6 Amount (\$) 145.3	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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 10/16/2015	5 Payee name PayPal	
6 Amount (\$) 3.2	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 10/16/2015	5 Payee name PayPal	
6 Amount (\$) 4.65	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 10/17/2015	5 Payee name PayPal	
6 Amount (\$) 11.9	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 10/19/2015	5 Payee name PayPal		
6 Amount (\$) 14.8	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.

1 Total pages Schedule F1:	2 FILER NAME Bill King	3 Filer ID (Ethics Commission filers)
4 Date 10/19/2015	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	(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 10/20/2015	5 Payee name PayPal	
6 Amount (\$) 29.3	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 10/20/2015	5 Payee name PayPal	
6 Amount (\$) 29.3	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 10/20/2015	5 Payee name PayPal		
6 Amount (\$) 7.55	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 10/20/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 7	<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 10/20/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 1.75	<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  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 10/20/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 9	<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 10/22/2015	5 Payee name PayPal		
6 Amount (\$) 4.65	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 10/22/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 2.63	<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 10/22/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 30.75	<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  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 10/22/2015	<b>5</b> Payee name PayPal	
<b>6</b> Amount (\$) 3.2	<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  10/23/2015	5 Payee name  PayPal		
6 Amount (\$)  15.8	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 10/23/2015	5 Payee name PayPal	
6 Amount (\$) 3.4	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 10/23/2015	5 Payee name PayPal	
6 Amount (\$) 23.55	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 10/23/2015	5 Payee name PayPal	
6 Amount (\$) 11.46	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 9/25/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 9/25/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 9/25/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 9/25/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 9/30/2015	5 Payee name Aristotle		
6 Amount (\$) 15	7 Payee address;      City;      State;      Zip Code 205 Pennsylvania Ave 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 9/30/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 9/30/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 9/30/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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.

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

<b>4</b> Date 10/1/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave SE  Washington DC 20003		
<b>8</b> 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	
<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)
4 Date 10/1/2015	5 Payee name Aristotle	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/1/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/2/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/2/2015	5 Payee name Aristotle		
6 Amount (\$) 1.25	7 Payee address;      City;      State;      Zip Code 205 Pennsylvania Ave 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 10/2/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/2/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/3/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/4/2015	5 Payee name Aristotle		
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/5/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/5/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/5/2015	5 Payee name Aristotle	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/7/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address;      City;      State;      Zip Code 205 Pennsylvania Ave 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 10/7/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/7/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/7/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/7/2015	5 Payee name Aristotle		
6 Amount (\$) 12.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/7/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/7/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 500	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	5 Payee name Aristotle	
6 Amount (\$) 12.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/8/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/9/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/9/2015	5 Payee name Aristotle	
6 Amount (\$) 37.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/9/2015	5 Payee name Aristotle	
6 Amount (\$) 0.05	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/9/2015	5 Payee name Aristotle	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave SE  Washington DC 20003	
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)
	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 10/10/2015	5 Payee name Aristotle		
6 Amount (\$) 0.25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/10/2015	5 Payee name Aristotle	
6 Amount (\$) 1.25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/10/2015	5 Payee name Aristotle	
6 Amount (\$) 0.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle	
6 Amount (\$) 1.25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle	
6 Amount (\$) 10	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/12/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	5 Payee name Aristotle	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 15	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 250	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	5 Payee name Aristotle		
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	5 Payee name Aristotle	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	5 Payee name Aristotle	
6 Amount (\$) 12.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/13/2015	5 Payee name Aristotle	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 15	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 7.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 250	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	5 Payee name Aristotle		
6 Amount (\$) 12.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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

**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 10/15/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/15/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 7.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 75	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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"/> <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 10/16/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 37.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	5 Payee name Aristotle		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/16/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/17/2015	5 Payee name Aristotle	
6 Amount (\$) 15	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/17/2015	5 Payee name Aristotle	
6 Amount (\$) 15	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	5 Payee name Aristotle		
6 Amount (\$) 18.75	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	5 Payee name Aristotle		
6 Amount (\$) 1.25	7 Payee address;                      City;                      State;                      Zip Code 205 Pennsylvania Ave 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 10/19/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/19/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle	
6 Amount (\$) 0.05	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle	
6 Amount (\$) 15	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle	
6 Amount (\$) 30	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle	
6 Amount (\$) 100	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle	
6 Amount (\$) 12.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/20/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle	
6 Amount (\$) 3.75	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle		
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle		
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle	
6 Amount (\$) 12.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle	
6 Amount (\$) 75	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/21/2015	5 Payee name Aristotle	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/22/2015	5 Payee name Aristotle		
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/22/2015	5 Payee name Aristotle	
6 Amount (\$) 10	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/22/2015	5 Payee name Aristotle	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/22/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/22/2015	5 Payee name Aristotle		
6 Amount (\$) 10	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 50	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 0.05	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 0.05	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	5 Payee name Aristotle		
6 Amount (\$) 10	7 Payee address;      City;      State;      Zip Code 205 Pennsylvania Ave 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 10/23/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 15	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	<b>5</b> Payee name Aristotle	
<b>6</b> Amount (\$) 100	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	5 Payee name Aristotle		
6 Amount (\$) 7.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	5 Payee name Aristotle	
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/23/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle	
6 Amount (\$) 5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle	
6 Amount (\$) 10	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle	
6 Amount (\$) 2.5	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 10	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 10	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle		
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle	
6 Amount (\$) 0.05	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	5 Payee name Aristotle		
6 Amount (\$) 15	7 Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 150	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 1.25	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 2.5	<b>7</b> Payee address; City; State; Zip Code 205 Pennsylvania Ave 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.

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

<b>4</b> Date 10/24/2015	<b>5</b> Payee name Aristotle		
<b>6</b> Amount (\$) 25	<b>7</b> Payee address;            City;            State;            Zip Code 205 Pennsylvania Ave SE  Washington DC 20003		
<b>8</b> 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	
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

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