



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 63

13 C / OH NAME McVey, Marty	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

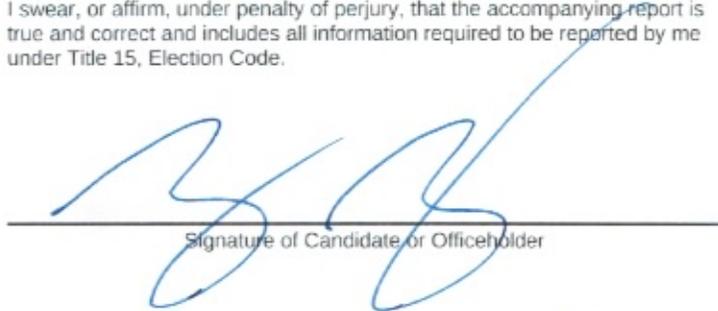
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	60,197.25
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	5,925.23
	4.	TOTAL POLITICAL EXPENDITURES	\$	129,185.34
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,071,585.40
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,075,000.00

17 AFFADAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me by the said Marty McVey, this the 15<sup>th</sup> day of July, 20 15, to certify which, witness my hand and seal of office.

  
 \_\_\_\_\_  
 Signature of officer administering

Kenneth D Stewart  
 \_\_\_\_\_  
 Printed name of officer administering

N.S.A.  
 \_\_\_\_\_  
 Title of officer administering oath

# SUBTOTALS - C/OH

<b>18 FILER NAME</b> McVey, Marty		<b>19 Filer ID</b>	
<b>20 SCHEDULE SUBTOTALS</b>			<b>SUBTOTAL AMOUNT</b>
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	43,927.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	16,270.25
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	1,075,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	47,341.60
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	70,671.92
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	11,171.82
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/10 Rpt: 4/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 05/05/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Azad, Marjaneh (Dr.)  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77006	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Dentist		<b>9</b> Employer (See Instructions) Angel Smile Dental Clinic
Date 03/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banerjee, Sam (Mr.)  Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Sami's, Inc.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bender, Sheila (Ms.)  Contributor address; City; State; Zip Code  Raleigh, NC 37604	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) N/A
Date 04/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertini, Catherine (The Honorable)  Contributor address; City; State; Zip Code  Homer, NY 13077	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Syracuse University
Date 03/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhandara, Zubin (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Property Mgr		Employer (See Instructions) Ardenwood Grp LLC

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A1: Sch: 2/10 Rpt: 5/63</p>
<p><b>2</b> FILER NAME McVey, Marty</p>		<p><b>3</b> Filer ID</p>
<p><b>4</b> Date 05/07/2015</p>	<p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhandara, Zubin (Mr.)</p> <p><b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77057</p>	<p><b>7</b> Amount of Contribution (\$)  \$1.00</p>
<p><b>8</b> Principal occupation / Job title (See Instructions) Property Mgr</p>		<p><b>9</b> Employer (See Instructions) Ardenwood Grp LLC</p>
<p>Date 05/27/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolettieri, Dorothy (Ms.)</p> <p>Contributor address; City; State; Zip Code  Spring, TX 77379</p>	<p>Amount of Contribution (\$)  \$250.00</p>
<p>Principal occupation / Job title (See Instructions) Director</p>		<p>Employer (See Instructions) Medical Bridges, Inc.</p>
<p>Date 05/05/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castleman, Ryan (Mr.)</p> <p>Contributor address; City; State; Zip Code  Houston, TX 77056</p>	<p>Amount of Contribution (\$)  \$1,000.00</p>
<p>Principal occupation / Job title (See Instructions) Principal</p>		<p>Employer (See Instructions) Castleman Power Sys</p>
<p>Date 06/30/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Yan</p> <p>Contributor address; City; State; Zip Code  Sugar Land, TX 77479</p>	<p>Amount of Contribution (\$)  \$100.00</p>
<p>Principal occupation / Job title (See Instructions) President</p>		<p>Employer (See Instructions) Regal Global, Inc.</p>
<p>Date 06/30/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen, Jessica (Ms.)</p> <p>Contributor address; City; State; Zip Code  Houston, TX 77036</p>	<p>Amount of Contribution (\$)  \$2,500.00</p>
<p>Principal occupation / Job title (See Instructions) Principal</p>		<p>Employer (See Instructions) Law Offices of Chen &amp; Assocs</p>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/10 Rpt: 6/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 06/17/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clinical Trial Network LLC  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77074	<b>7</b> Amount of Contribution (\$) \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Medical Researchers		<b>9</b> Employer (See Instructions) Clinical Trial Network LLC
Date 05/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conde, Dulce (Mr.) Contributor address; City; State; Zip Code  McAllen, TX 78502	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Logos Global Corp
Date 04/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruickshank, Rick (Mr.) Contributor address; City; State; Zip Code  Lyndhurst, OH 44124	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Skoda Minotti
Date 04/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dang, Hoang Yen (The Honorable) Contributor address; City; State; Zip Code  Houston, TX 77082	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) US Global Institute
Date 05/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dazey, John (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Salesman		Employer (See Instructions) McCoy-Rockford

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<p><b>The Instruction Guide explains how to complete this form.</b></p>		<p><b>1</b> Total pages Schedule A1: Sch: 4/10 Rpt: 7/63</p>
<p><b>2</b> FILER NAME McVey, Marty</p>		<p><b>3</b> Filer ID</p>
<p><b>4</b> Date 05/23/2015</p>	<p><b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dolan, Tom (Mr.)</p> <p><b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77083</p>	<p><b>7</b> Amount of Contribution (\$) \$250.00</p>
<p><b>8</b> Principal occupation / Job title (See Instructions) Retired</p>		<p><b>9</b> Employer (See Instructions) Retired</p>
<p>Date 04/13/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durante, Edward (Mr.)</p> <p>Contributor address; City; State; Zip Code  Spring, TX 77379</p>	<p>Amount of Contribution (\$) \$2,500.00</p>
<p>Principal occupation / Job title (See Instructions) President</p>		<p>Employer (See Instructions) TIEC, Inc.</p>
<p>Date 04/28/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazio, Elizabeth (Ms.)</p> <p>Contributor address; City; State; Zip Code  Austin, TX 78703</p>	<p>Amount of Contribution (\$) \$50.00</p>
<p>Principal occupation / Job title (See Instructions) Dir TX House of Reps</p>		<p>Employer (See Instructions) State of TX</p>
<p>Date 04/02/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Kathleen (Ms.)</p> <p>Contributor address; City; State; Zip Code  Houston, TX 77025</p>	<p>Amount of Contribution (\$) \$250.00</p>
<p>Principal occupation / Job title (See Instructions) Volunteer</p>		<p>Employer (See Instructions) Volunteer</p>
<p>Date 06/30/2015</p>	<p>Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, John (Mr.)</p> <p>Contributor address; City; State; Zip Code  Verona, NJ 07044</p>	<p>Amount of Contribution (\$) \$2,500.00</p>
<p>Principal occupation / Job title (See Instructions) CEO</p>		<p>Employer (See Instructions) Fairview Ins Assocs</p>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/10 Rpt: 8/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 04/24/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hac Nguyen, MD Family Practice PLLC  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77379	<b>7</b> Amount of Contribution (\$) \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Physicians		<b>9</b> Employer (See Instructions) Hac Nguyen, MD Family Practice PLLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hofmeister, John (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77019	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) JKH Grp LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hwang, Paul (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self-Employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Grace (Ms.)  Contributor address; City; State; Zip Code  The Woodlands, TX 77382	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Jacobson Hospitality, Inc.
Date 05/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Layman, Doug (Mr.)  Contributor address; City; State; Zip Code  Arlington, VA 22201	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Arve Capital LLC

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/10 Rpt: 9/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 06/30/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luo, Ling (Ms.)  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77084	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Principal		<b>9</b> Employer (See Instructions) Hana Media Global, Inc.
Date 04/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luong, Jason (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77063	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 04/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maghareh, Karim (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77289	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BestCare Laboratory Svcs
Date 05/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maghareh, Karim (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77289	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BestCare Laboratory Svcs
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maghareh, Karim (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77289	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BestCare Laboratory Svcs

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/10 Rpt: 10/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 05/01/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLeod, William (Mr.)  <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self-Employed
Date 03/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Carole (Ms.)  Contributor address; City; State; Zip Code  Houston, TX 77020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) BakerBotts LLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neufer, Xiaoxia (Ms.)  Contributor address; City; State; Zip Code  Houston, TX 77094	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) East West Bank
Date 03/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noriega, Melissa (The Honorable)  Contributor address; City; State; Zip Code  Houston, TX 77023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed
Date 04/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olive, Kenneth (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77081	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/10 Rpt: 11/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 03/15/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pirali, Shiraz (Dr.) <b>6</b> Contributor address; City; State; Zip Code  Sugar Land, TX 77479	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Physician		<b>9</b> Employer (See Instructions) Self-Employed
Date 03/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roopani, Firozali (Mr.) Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Prince Plastics
Date 03/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rupani, Natasha (Ms.) Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) TashaR LLC
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salti, Raed (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Pepperoni's Pizza
Date 04/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Jon (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77055	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) General Contractor		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/10 Rpt: 12/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 06/30/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Roy (Mr.)  <b>6</b> Contributor address; City; State; Zip Code  Raleigh, NC 27601	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Parker Poe Adams & Bernstein LLP
Date 04/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varner, Mark (Mr.)  Contributor address; City; State; Zip Code  New Carrollton, MD 20784	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) APLU
Date 03/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virani, Saeed (Mr.)  Contributor address; City; State; Zip Code  Sugar Land, TX 77479	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Viranski-USA, Inc.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wang, RuiQi (Ms.)  Contributor address; City; State; Zip Code  Spring, TX 77388	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Wang's Asian Fusion
Date 05/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellington, Manfred (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77088	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Glory Infrastructure, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/10 Rpt: 13/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> Date 05/28/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmore, Joseph (Mr.)  <b>6</b> Contributor address; City; State; Zip Code  Reston, VA 20190	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Contractor		<b>9</b> Employer (See Instructions) Talino Technology
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wu, Welling  Contributor address; City; State; Zip Code  Sugar Land, TX 77382	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) None
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xing, Yu  Contributor address; City; State; Zip Code  Spring, TX 77382	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) None
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xu, Gufeng  Contributor address; City; State; Zip Code  Houston, TX 77099	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) R Bros Consulting Grp
Date 05/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zhang, Hugh (Mr.)  Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions) Managing Dir		Employer (See Instructions) Interstitial Alloys LLC

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/5 Rpt: 14/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>
<b>5</b> Date 03/01/2015	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardenwood Grp LLC <b>7</b> Contributor address; City; State; Zip Code  Houston, TX 77057	<b>8</b> Amount of contribution (\$) <b>9</b> In-kind contribution description \$500.00 Office Furnishings  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 03/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhandara, Feroze (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of contribution (\$) In-kind contribution description \$3,500.00 Office Space Rent  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Property Mgr		Employer (FOR NON-JUDICIAL) (See instructions) Ardenwood Grp LLC
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 03/05/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chopra, Lucky (Mr.) Contributor address; City; State; Zip Code  Cypress, TX 77433	Amount of contribution (\$) In-kind contribution description \$5,000.00 Announcement Venue/F & B  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Principal		Employer (FOR NON-JUDICIAL) (See instructions) Landmark Houston Hospitality Grp
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 2/5 Rpt: 15/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>
<b>5</b> Date 04/21/2015	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dazey, John (Mr.) <b>7</b> Contributor address; City; State; Zip Code  Houston, TX 77006	<b>8</b> Amount of contribution (\$) <b>9</b> In-kind contribution description \$500.00 Fundraiser F & B  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Salesman		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) McCoy-Rockford
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 04/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Domestic Management Services Contributor address; City; State; Zip Code  Houston, TX 77004	Amount of contribution (\$) In-kind contribution description \$100.00 Office Supplies  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 04/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Joseph (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of contribution (\$) In-kind contribution description \$900.00 Concert Tickets  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Principal		Employer (FOR NON-JUDICIAL) (See instructions) Murjan Consulting
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 3/5 Rpt: 16/63
2 FILER NAME McVey, Marty		3 Filer ID
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$
5 Date 05/17/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Joseph (Mr.) 7 Contributor address; City; State; Zip Code  Houston, TX 77056	8 Amount of contribution (\$)      9 In-kind contribution description \$48.00 Concert Tickets  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Principal		11 Employer (FOR NON-JUDICIAL) (See instructions) Murjan Consulting
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 04/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Joseph (Mr.) Contributor address; City; State; Zip Code  Houston, TX 77056	Amount of contribution (\$)      In-kind contribution description \$122.25 Office Equipment  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Principal		Employer (FOR NON-JUDICIAL) (See instructions) Murjan Consulting
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Grace (Ms.) Contributor address; City; State; Zip Code  The Woodlands, TX 77382	Amount of contribution (\$)      In-kind contribution description \$80.00 Event F& B  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Principal		Employer (FOR NON-JUDICIAL) (See instructions) Jacobson Hospitality, Inc.
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 4/5 Rpt: 17/63	
2 FILER NAME McVey, Marty		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/24/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Chen Assocs 7 Contributor address; City; State; Zip Code  Houston, TX 77036	8 Amount of contribution (\$) \$120.00	9 In-kind contribution description Event Rm & Audio Rental
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayfair, Ashleigh (Ms.) Contributor address; City; State; Zip Code  NY, NY 10012	Amount of contribution (\$) \$2,100.00	In-kind contribution description Fundraiser F & B
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Film Director		Employer (FOR NON-JUDICIAL) (See instructions) NY Univ	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVey, Marty (The Honorable) Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of contribution (\$) \$250.00	In-kind contribution description Office Equipment
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		Employer (FOR NON-JUDICIAL) (See instructions) McVey & Assocs LLC	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 5/5 Rpt: 18/63	
2 FILER NAME McVey, Marty		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/15/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rupani, Nasrunddin (Mr.) 7 Contributor address; City; State; Zip Code  Houston, TX 77036	8 Amount of contribution (\$) \$1,900.00	9 In-kind contribution description Fundraiser F & B  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President		11 Employer (FOR NON-JUDICIAL) (See instructions) Low Cost Leader, Inc.	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Michelle (Ms.) Contributor address; City; State; Zip Code  Bellaire, TX 77401	Amount of contribution (\$) \$150.00	In-kind contribution description Volunteer F & B  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Journalist		Employer (FOR NON-JUDICIAL) (See instructions) Self-Employed	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Victoria (Ms.) Contributor address: City; State; Zip Code  Houston, TX 77005	Amount of contribution (\$) \$1,000.00	In-kind contribution description Office Furnishings & Equipment  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Retired		Employer (FOR NON-JUDICIAL) (See instructions) None	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 19/63
<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 06/30/2015	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) McVey, Marty (The Honorable)	<b>9</b> Loan Amount (\$) \$75,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 6060 Richmond Ave Ste 315  Houston, TX 77057	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) CEO		<b>13</b> Employer (See Instructions) McVey & Assocs LLC
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor  <b>18</b> Guarantor address; City; State; Zip Code	<b>19</b> Amount Guaranteed (\$)
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)
Date of loan 05/15/2015	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierpont Investment Capital LLC	Loan Amount (\$) \$1,000,000.00
Is lender a financial institution? Yes	Lender address; City; State; Zip Code 6060 Richmond Ave Ste 315 Houston, TX 77057	Interest Rate 5%
		Maturity Date 03/01/2016
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor  Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal occupation		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/32 Rpt: 20/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 06/27/2015		<b>5</b> Payee name \$0.99 Only Stores			
<b>6</b> Amount (\$) \$15.00		<b>7</b> Payee address; City; State; Zip Code 21981 Katy Fwy  Katy, TX 77345			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer F & B	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/18/2015		Payee name 59 Diner, The			
Amount (\$) \$15.97		Payee address; City; State; Zip Code 3801 Farnham  Houston, TX 77098			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor Coffee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/01/2015		Payee name 6363 Richmond LP			
Amount (\$) \$2,500.00		Payee address; City; State; Zip Code 6060 Richmond Ave Ste 380 Houston, TX 77057			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Deposit for Office Space	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/32 Rpt: 21/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 05/29/2015		5 Payee name AT&T			
6 Amount (\$) \$730.32		7 Payee address; City; State; Zip Code PO Box 105414  Atlanta, GA 30348			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Installation	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/26/2015		Payee name AT&T			
Amount (\$) \$908.35		Payee address; City; State; Zip Code PO Box 105414  Atlanta, GA 30348			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Svc	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/23/2015		Payee name AT&T			
Amount (\$) \$100.00		Payee address; City; State; Zip Code PO Box 105414  Atlanta, GA 30348			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/32 Rpt: 22/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 04/29/2015		5 Payee name Amazon.com LLC			
6 Amount (\$) \$34.88		7 Payee address; City; State; Zip Code 1200 12th St Ave South Ste 1200 Seattle, WA 98144			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/05/2015		Payee name Amazon.com LLC			
Amount (\$) \$139.96		Payee address; City; State; Zip Code 1200 12th St Ave South Ste 1200 Seattle, WA 98144			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/20/2015		Payee name Baker's Safe Lock Co, Inc.			
Amount (\$) \$262.51		Payee address; City; State; Zip Code PO Box 630129  Houston, TX 77263			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/32 Rpt: 23/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 04/30/2015		<b>5</b> Payee name Bank of America			
<b>6</b> Amount (\$) \$559.00		<b>7</b> Payee address; City; State; Zip Code PO Box 15284  Wilmington, DE 19850			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Svc Fees	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/30/2015		Payee name Bank of America			
Amount (\$) \$140.00		Payee address; City; State; Zip Code PO Box 15284  Wilmington, DE 19850			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Svc Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/02/2015		Payee name Bank of America			
Amount (\$) \$52.33		Payee address; City; State; Zip Code PO Box 15284  Wilmington, DE 19850			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wire & Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/32 Rpt: 24/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 05/29/2015		5 Payee name Barry's Pizza			
6 Amount (\$) \$76.58		7 Payee address; City; State; Zip Code 6003 Richmond Ave  Houston, TX 77057			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Retreat	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/18/2015		Payee name Bering's 2			
Amount (\$) \$9.06		Payee address; City; State; Zip Code 3900 Bissonnet  Houston, TX 77005			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/02/2015		Payee name Best Western Plus Hobby Airport Inn & Suites			
Amount (\$) \$163.00		Payee address; City; State; Zip Code 8778 Airport Blvd  Houston, TX 77061			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant R & B	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/32 Rpt: 25/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 03/27/2015		5 Payee name Brasserie 19			
6 Amount (\$) \$67.38		7 Payee address; City; State; Zip Code 1962 West Gray  Houston, TX 77019			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Host Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/30/2015		Payee name CVS			
Amount (\$) \$125.97		Payee address; City; State; Zip Code 5204 Richmond Ave  Houston, TX 77056			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/02/2015		Payee name Cafe Express			
Amount (\$) \$132.11		Payee address; City; State; Zip Code 5 E Greenway Plz Ste C-620 Houston, TX 77046			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/32 Rpt: 26/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/23/2015		5 Payee name Cartridge World			
6 Amount (\$) \$145.92		7 Payee address; City; State; Zip Code 2055 Westheimer Rd Ste 165 Houston, TX 77098			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/20/2015		Payee name City of Houston Secretary			
Amount (\$) \$1.00		Payee address; City; State; Zip Code 900 Bagby St 1st FL Houston, TX 77002			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Record Retrieval	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/29/2015		Payee name Comcast Web			
Amount (\$) \$186.10		Payee address; City; State; Zip Code 11210 Bellaire Blvd Ste 143 Houston, TX 77072			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/32 Rpt: 27/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/01/2015		5 Payee name Deck on Fountain View, The			
6 Amount (\$) \$39.75		7 Payee address; City; State; Zip Code 6002 Fairdale Ln  Houston, TX 77057			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Community Organizer Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/01/2015		Payee name Democracy Engine LLC - Non Profit			
Amount (\$) \$0.23		Payee address; City; State; Zip Code 2125 14th St NW  Washington, DC 20009			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/08/2015		Payee name Democracy Engine LLC - Non Profit			
Amount (\$) \$14.65		Payee address; City; State; Zip Code 2125 14th St NW  Washington, DC 20009			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/32 Rpt: 28/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 04/15/2015		5 Payee name Democracy Engine LLC - Non Profit			
6 Amount (\$) \$47.27		7 Payee address; City; State; Zip Code 2125 14th St NW  Washington, DC 20009			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/22/2015		Payee name Democracy Engine LLC - Non Profit			
Amount (\$) \$141.22		Payee address; City; State; Zip Code 2125 14th St NW  Washington, DC 20009			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/06/2015		Payee name Democracy Engine LLC - Non Profit			
Amount (\$) \$4.14		Payee address; City; State; Zip Code 2125 14th St NW  Washington, DC 20009			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/32 Rpt: 29/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 05/13/2015		5 Payee name Democracy Engine LLC - Non Profit			
6 Amount (\$) \$113.50		7 Payee address; City; State; Zip Code 2125 14th St NW  Washington, DC 20009			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/15/2015		Payee name Domestic Management Services			
Amount (\$) \$7,000.00		Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Staff	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/27/2015		Payee name Domino's Pizza			
Amount (\$) \$87.80		Payee address; City; State; Zip Code 3507 Elgin St  Houston, TX 77004			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer F & B	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/32 Rpt: 30/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
<b>4</b> Date 06/30/2015	<b>5</b> Payee name Donation Pages, Inc.	
<b>6</b> Amount (\$) \$291.45	<b>7</b> Payee address; City; State; Zip Code 20 F St NW Ste 700 Washington , DC 20001	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2015	Payee name Donation Pages, Inc.	
Amount (\$) \$807.55	Payee address; City; State; Zip Code 20 F St NW Ste 700 Washington , DC 20001	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees & Commissions
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name El Tiempo Cantina	
Amount (\$) \$92.00	Payee address; City; State; Zip Code 2814 Navigation Blvd  Houston, TX 77003	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Debrief (2/2)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/32 Rpt: 31/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/01/2015		5 Payee name FastSigns			
6 Amount (\$) \$44.38		7 Payee address; City; State; Zip Code 6115 Westheimer Rd  Houston, TX 77057			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Placards	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/09/2015		Payee name FastSigns			
Amount (\$) \$233.82		Payee address; City; State; Zip Code 6115 Westheimer Rd  Houston, TX 77057			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Banner & Placard	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/23/2015		Payee name Firetruck Frenzy			
Amount (\$) \$525.00		Payee address; City; State; Zip Code 2006 N Fry Rd  Katy, TX 77084			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parade Vehicle	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/32 Rpt: 32/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 03/30/2015		5 Payee name Flat Rate Phone			
6 Amount (\$) \$11.85		7 Payee address; City; State; Zip Code 21 Union St  Barre, MA 01005			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Answering Svc	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/26/2015		Payee name FoVidi			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 11203 Crayford Ct  Houston, TX 77065			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Design	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/05/2015		Payee name Fry's			
Amount (\$) \$28.13		Payee address; City; State; Zip Code 11565 SW Fwy  Houston, TX 77031			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/32 Rpt: 33/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 03/30/2015		5 Payee name Gusto Gourmet			
6 Amount (\$) \$39.02		7 Payee address; City; State; Zip Code 3306 S Shepherd Dr  Houston, TX 77098			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Organizing Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/21/2015		Payee name HEB			
Amount (\$) \$29.72		Payee address; City; State; Zip Code 1701 W Alabama St  Houston, TX 77098			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Event Host Gift	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/27/2015		Payee name Harris County Democratic Party			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 1445 N Loop W  Houston, TX 77008			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials 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 Donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/32 Rpt: 34/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/29/2015		5 Payee name Hilton Americas - Houston			
6 Amount (\$) \$17.00		7 Payee address; City; State; Zip Code 1600 Lamar St  Houston, TX 77010			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/26/2015		Payee name Home Depot, The			
Amount (\$) \$6.42		Payee address; City; State; Zip Code 5445 W Loop S  Houston, TX 77081			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/27/2015		Payee name Home Depot, The			
Amount (\$) \$8.54		Payee address; City; State; Zip Code 5445 W Loop S  Houston, TX 77081			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/32 Rpt: 35/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 04/30/2015		5 Payee name Houston GLBT Political Caucus			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code PO Box 66664  Houston, TX 77266			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/25/2015		Payee name JW Marroitt			
Amount (\$) \$18.00		Payee address; City; State; Zip Code 806 Main St  Houston, TX 77002			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/26/2015		Payee name JW Marroitt			
Amount (\$) \$18.00		Payee address; City; State; Zip Code 806 Main St  Houston, TX 77002			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/32 Rpt: 36/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/25/2015		5 Payee name Jamail's			
6 Amount (\$) \$1,037.10		7 Payee address; City; State; Zip Code 10710 Flaxman St  Houston, TX 77029			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-Shirts	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/30/2015		Payee name Jimmy John's			
Amount (\$) \$32.75		Payee address; City; State; Zip Code 5106 Bissonnet St  Bellaire, TX 77401			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/03/2015		Payee name Katz's Deli			
Amount (\$) \$164.86		Payee address; City; State; Zip Code 616 Westheimer Rd  Houston, TX 77006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Debrief	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/32 Rpt: 37/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/15/2015		5 Payee name Kenneth, Olive (Mr.)			
6 Amount (\$) \$10,000.00		7 Payee address; City; State; Zip Code 5522 Sylmar  Houston, TX 77081			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Staff	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/20/2015		Payee name Kiran's Restaurant & Bar			
Amount (\$) \$125.00		Payee address; City; State; Zip Code 4100 Westheimer Rd  Houston, TX 77027			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant Dinner	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/29/2015		Payee name LULAC			
Amount (\$) \$175.00		Payee address; City; State; Zip Code 6200 Gulf Fwy Ste 410 Houston, TX 77023			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Entry	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/32 Rpt: 38/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 05/17/2015		<b>5</b> Payee name Lazarus House			
<b>6</b> Amount (\$) \$80.00		<b>7</b> Payee address; City; State; Zip Code 4106 Austin St  Houston, TX 77004			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Tickets	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/21/2015		Payee name Lights Camera Action - Houston			
Amount (\$) \$500.00		Payee address; City; State; Zip Code PO Box 70081  Houston, TX 77270			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Show Tickets	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/30/2015		Payee name Luby's Cafe			
Amount (\$) \$24.85		Payee address; City; State; Zip Code 13111 NW Freeway ste 600  Houston, TX 77040			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Organizing Meeting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/32 Rpt: 39/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 04/22/2015		5 Payee name Malekifar, M (Mr.)			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 7731 Skyline Dr  Houston, TX 77063			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Furnishings	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/02/2015		Payee name McDonald's			
Amount (\$) \$22.70		Payee address; City; State; Zip Code 6000 Richmind Ave  Houston, TX 77057			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/27/2015		Payee name McDonald's			
Amount (\$) \$20.00		Payee address; City; State; Zip Code 6000 Richmind Ave  Houston, TX 77057			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer & Parade Driver Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/32 Rpt: 40/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
<b>4</b> Date 06/27/2015	<b>5</b> Payee name McKinney Place Garage	
<b>6</b> Amount (\$) \$18.00	<b>7</b> Payee address; City; State; Zip Code 930 Main St  Houston, TX 77002	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/27/2015	Payee name Mendez, Mark (Mr.)	
Amount (\$) \$80.00	Payee address; City; State; Zip Code 2006 N Fry Rd  Katy, TX 77084	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Driver Gratuity
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/27/2015	Payee name Mike Sullivan, Harris County Tax Assessor-Collector & Voter Registrar	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1001 Preston St Rm 200 Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Maps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 22/32 Rpt: 41/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 06/30/2015		<b>5</b> Payee name My Fit Foods			
<b>6</b> Amount (\$) \$21.04		<b>7</b> Payee address; City; State; Zip Code 1413 S Voss Rd Ste C Houston, TX 77057			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consultant Lunch	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/26/2015		Payee name Nationbuilder			
Amount (\$) \$38.00		Payee address; City; State; Zip Code 520 S Grand Ave 2  Los Angeles, CA 90071			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web Hosting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/23/2015		Payee name Nguyen, Danny (Mr.)			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 9909 Bellaire Blvd  Houston, TX 77036			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refugee Event Donation	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/32 Rpt: 42/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/30/2015		5 Payee name Noriega, Melissa (The Honorable)			
6 Amount (\$) \$8,000.00		7 Payee address; City; State; Zip Code 4430 Pease St  Houston, TX 77023			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Staff	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/01/2015		Payee name Office Depot/Office Max			
Amount (\$) \$148.29		Payee address; City; State; Zip Code 7519 Westheimer Rd  Houston, TX 77063			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/12/2015		Payee name Office Depot/Office Max			
Amount (\$) \$21.07		Payee address; City; State; Zip Code 270 Meyerland Plz Dr  Houston, TX 77096			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 24/32 Rpt: 43/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 06/05/2015		<b>5</b> Payee name Office Depot/Office Max			
<b>6</b> Amount (\$) \$43.73		<b>7</b> Payee address; City; State; Zip Code 270 Meyerland Plz Dr  Houston, TX 77096			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/20/2015		Payee name Office Depot/Office Max			
Amount (\$) \$18.19		Payee address; City; State; Zip Code 270 Meyerland Plz Dr  Houston, TX 77096			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/13/2015		Payee name Office Depot/Office Max			
Amount (\$) \$56.80		Payee address; City; State; Zip Code 3343 Kirby Dr  Houston, TX 77098			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 25/32 Rpt: 44/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 06/30/2015		<b>5</b> Payee name Office Depot/Office Max			
<b>6</b> Amount (\$) \$55.49		<b>7</b> Payee address; City; State; Zip Code 7519 Westheimer Rd  Houston, TX 77063			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/29/2015		Payee name Original Ninfa's on Navigation			
Amount (\$) \$120.00		Payee address; City; State; Zip Code 2704 Navigation Blvd  Houston, TX 77003			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Debrief	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/12/2015		Payee name Randall's			
Amount (\$) \$64.97		Payee address; City; State; Zip Code 5130 Bellaire Blvd  Bellaire, TX 77401			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer F & B	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributors/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 26/32 Rpt: 45/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> Date 06/01/2015	<b>5</b> Payee name Riverside United Methodist Church
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<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 4920 Cullen Blvd  Houston, TX 77004
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bulletin Ad
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/05/2015	Payee name Sam's Club
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Amount (\$) \$41.15	Payee address; City; State; Zip Code 5310 S Rice Ave  Houston, TX 77081
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer F & B
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/24/2015	Payee name Sam's Club
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Amount (\$) \$40.91	Payee address; City; State; Zip Code 5310 S Rice Ave  Houston, TX 77081
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer F & B
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 27/32 Rpt: 46/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/22/2015		5 Payee name Sam's Club			
6 Amount (\$) \$73.00		7 Payee address; City; State; Zip Code 5310 S Rice Ave  Houston, TX 77081			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/31/2015		Payee name Sam's Club			
Amount (\$) \$37.45		Payee address; City; State; Zip Code 1615 S Loop W  Houston, TX 77054			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/15/2015		Payee name Shawarma King			
Amount (\$) \$59.05		Payee address; City; State; Zip Code 3121 Hillcroft  Houston, TX 77057			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 28/32 Rpt: 47/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 06/15/2015		<b>5</b> Payee name Smith, Michelle (Ms.)			
<b>6</b> Amount (\$) \$2,000.00		<b>7</b> Payee address; City; State; Zip Code 14 Alpine Ct  Bellaire, TX 77401			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/14/2015		Payee name Staples			
Amount (\$) \$216.48		Payee address; City; State; Zip Code 1919 Taylor St  Houston, TX 77007			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/21/2015		Payee name Subway			
Amount (\$) \$66.57		Payee address; City; State; Zip Code 1101 Holman St  Houston, TX 77004			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 29/32 Rpt: 48/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 06/15/2015		5 Payee name Taco Bell			
6 Amount (\$) \$21.98		7 Payee address; City; State; Zip Code 5818 Richmond Ave  Houston, TX 77057			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/14/2015		Payee name Target			
Amount (\$) \$33.15		Payee address; City; State; Zip Code 2580 Shearn St  Houston, TX 77007			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Equipment	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/27/2015		Payee name Timewise #845			
Amount (\$) \$20.00		Payee address; City; State; Zip Code 9322 Bissonnet St  Houston, TX 77074			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer F & B	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 30/32 Rpt: 49/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 03/31/2015		<b>5</b> Payee name USPS			
<b>6</b> Amount (\$) \$116.00		<b>7</b> Payee address; City; State; Zip Code 7110 Mykawa  Houston, TX 77033			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</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 expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/04/2015		Payee name University of Houston			
Amount (\$) \$3.00		Payee address; City; State; Zip Code 126 University Dr  Houston, TX 77004			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/26/2015		Payee name Verizon Wireless			
Amount (\$) \$249.18		Payee address; City; State; Zip Code 1 Verizon Way  Basking Ridge, NJ 07920			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/32 Rpt: 50/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 05/31/2015		5 Payee name VistaPrint Corp			
6 Amount (\$) \$51.47		7 Payee address; City; State; Zip Code Hedsonweg 8  Venlo 5928 Netherlands			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/12/2015		Payee name VistaPrint Corp			
Amount (\$) \$48.97		Payee address; City; State; Zip Code Hedsonweg 8  Venlo 5928 Netherlands			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/26/2015		Payee name Walker @ Main Parking Garage			
Amount (\$) \$18.00		Payee address; City; State; Zip Code 820 Main St  Houston, TX 77002			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 32/32 Rpt: 51/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 04/30/2015		<b>5</b> Payee name Walmart			
<b>6</b> Amount (\$) \$26.41		<b>7</b> Payee address; City; State; Zip Code 5501 Hwy 6  Missouri City, TX 77469			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</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 Equipment	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/21/2015		Payee name Wells Fargo Bank			
Amount (\$) \$3.00		Payee address; City; State; Zip Code 2824 Hillcroft  Houston, TX 77057			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ATM	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/30/2015		Payee name Whataburger			
Amount (\$) \$12.88		Payee address; City; State; Zip Code 6520 SW Fwy  Houston, TX 77074			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Lunch	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 1/8 Rpt: 52/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 06/25/2015	<b>6</b> Payee name AT&T
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<b>7</b> Amount (\$)  \$327.56	<b>8</b> Payee address; City; State; Zip Code PO Box 105414  Atlanta, GA 30348
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Phone Bill
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2015	Payee name Domestic Management Services
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Amount (\$)  \$3,500.00	Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 2/8 Rpt: 53/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$</b>
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<b>5</b> Date 06/01/2015	<b>6</b> Payee name Domestic Management Services
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<b>7</b> Amount (\$) \$3,500.00	<b>8</b> Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 04/01/2015	<b>Payee name</b> Domestic Management Services
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<b>Amount (\$)</b> \$2,500.00	<b>Payee address; City; State; Zip Code</b> 3510 Ruth St  Houston, TX 77004
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<b>TYPE OF EXPENDITURE</b>	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Guarrantied Commissions
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 3/8 Rpt: 54/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$</b>
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<b>5</b> Date 05/01/2015	<b>6</b> Payee name Domestic Management Services
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<b>7</b> Amount (\$) \$2,500.00	<b>8</b> Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Guaranteed Commissions
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2015	Payee name Domestic Management Services
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Guaranteed Commissions
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

## EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gifts/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 4/8 Rpt: 55/63	2 FILER NAME McVey, Marty	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 06/23/2015	6 Payee name Donation Pages, Inc.
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7 Amount (\$) \$4,000.00	8 Payee address; City; State; Zip Code 20 F St NW Ste 700 Washington , DC 20001
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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: Digital Media
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2015	Payee name Fletcher Rowley
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1720 West End Ave Ste 630 Nashville , TN 37203
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense: General Consultant
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

## EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributors/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 5/8 Rpt: 56/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 06/16/2015	<b>6</b> Payee name Lincoln Park Strategies
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<b>7</b> Amount (\$) \$29,705.00	<b>8</b> Payee address; City; State; Zip Code 611 Pennsylvania Ave SE Ste 112 Washington, DC 20003
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<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Polling Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense: Baseline Poll
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<b>11</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/15/2015	Payee name Noriega, Melissa
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Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 4430 Pease St Houston, TX 77023
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense: Staff
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 6/8 Rpt: 57/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$</b>
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<b>5</b> Date 04/01/2015	<b>6</b> Payee name Noriega, Melissa (The Honorable)
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<b>7</b> Amount (\$) \$4,000.00	<b>8</b> Payee address; City; State; Zip Code 4430 Pease St Houston, TX 77023
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2015	Payee name Noriega, Melissa (The Honorable)
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Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 4430 Pease St Houston, TX 77023
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 7/8 Rpt: 58/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	<b>\$</b>
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<b>5</b> Date 06/01/2015	<b>6</b> Payee name Noriega, Melissa (The Honorable)
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<b>7</b> Amount (\$) \$4,000.00	<b>8</b> Payee address; City; State; Zip Code 4430 Pease St  Houston, TX 77023
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense: Staff
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2015	Payee name Olive, Kenneth (Mr.)
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 5522 Sylmar Rd  Houston, TX 77081
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense: Staff
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2: Sch: 8/8 Rpt: 59/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
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<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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<b>5</b> Date 06/15/2015	<b>6</b> Payee name Smith, Michelle (Ms.)
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<b>7</b> Amount (\$) \$500.00	<b>8</b> Payee address; City; State; Zip Code 14 Alpine Ct  Bellaire, TX 77401
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<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff
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<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/23/2015	Payee name U-verse
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Amount (\$) \$139.36	Payee address; City; State; Zip Code PO Box 5014  Carol Stream, IL 60197
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/4 Rpt: 60/63		2 FILER NAME McVey, Marty		3 Filer ID	
4 Date 04/01/2015		5 Payee name 6363 Richmond LP			
6 Amount (\$) \$3,500.00 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 6060 Richmond Ave Ste 380 Houston, TX 77057			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Space	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/01/2015		Payee name 6363 Richmond LP			
Amount (\$) \$3,500.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 6060 Richmond Ave Ste 380 Houston, TX 77057			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Space	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/01/2015		Payee name 6363 Richmond LP			
Amount (\$) \$3,500.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 6060 Richmond Ave Ste 380 Houston, TX 77057			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Space	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/4 Rpt: 61/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID
<b>4</b> Date 06/28/2015	<b>5</b> Payee name Cafe 101	
<b>6</b> Amount (\$) \$44.12  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 9889 Bellaire Blvd Ste 101 Houston, TX 77036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting with Staff & Community Coordinators
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/04/2015	Payee name El Tiempo Cantina	
Amount (\$) \$200.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2814 Navigation Blvd  Houston, TX 77003	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Debrief (1/2)
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/26/2015	Payee name FastSigns	
Amount (\$) \$321.50  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 6115 Westheimer Rd  Houston, TX 77057	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Banners
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 3/4 Rpt: 62/63	<b>2</b> FILER NAME McVey, Marty	<b>3</b> Filer ID		
<b>4</b> Date 06/27/2015	<b>5</b> Payee name Phoenix Paper/PartyBoy			
<b>6</b> Amount (\$) \$49.72  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 1515 Studemont  Houston, TX 77007			
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Supplies		
	<table style="width:100%; border:none;"> <tr> <td style="width:60%; border:none;">Candidate/Officeholder name</td> <td style="width:20%; border:none; text-align:center;">Office sought</td> <td style="width:20%; border:none; text-align:center;">Office held</td> </tr> </table>		Candidate/Officeholder name	Office sought
Candidate/Officeholder name	Office sought	Office held		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH				
Date 05/27/2015	Payee name Stan Stanart, Harris County Clerk			
Amount (\$) \$1.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 201 Caroline  Houston, TX 77002			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Record Retrieval		
	<table style="width:100%; border:none;"> <tr> <td style="width:60%; border:none;">Candidate/Officeholder name</td> <td style="width:20%; border:none; text-align:center;">Office sought</td> <td style="width:20%; border:none; text-align:center;">Office held</td> </tr> </table>		Candidate/Officeholder name	Office sought
Candidate/Officeholder name	Office sought	Office held		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH				
Date 05/19/2015	Payee name Taco Bell			
Amount (\$) \$28.12  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 518 Richmond Ave  Houston, TX 77057			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting		
	<table style="width:100%; border:none;"> <tr> <td style="width:60%; border:none;">Candidate/Officeholder name</td> <td style="width:20%; border:none; text-align:center;">Office sought</td> <td style="width:20%; border:none; text-align:center;">Office held</td> </tr> </table>		Candidate/Officeholder name	Office sought
Candidate/Officeholder name	Office sought	Office held		
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH				

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 4/4 Rpt: 63/63		<b>2</b> FILER NAME McVey, Marty		<b>3</b> Filer ID	
<b>4</b> Date 06/05/2015		<b>5</b> Payee name Taco Bell			
<b>6</b> Amount (\$) \$25.96  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address; City; State; Zip Code 5818 Richmond Ave  Houston, TX 77057			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought                      Office held	
Date 06/03/2015		Payee name Walgreens			
Amount (\$) \$1.40  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 3210 Hillcroft St  Houston, TX 77057			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought                      Office held	