

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form		1 Filer ID(Ethics Commission filers)	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI
	Mr	Carroll	G
	NICKNAME	LAST	SUFFIX
		Robinson	
OFFICE USE ONLY			
Date Received			
10/5/2015			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY; STATE; ZIP CODE
	PO Box 8325		Houston Texas 77288
Date Hand-delivered or Date Postmarked			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(832)	863-8092	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
	Mr	Victor	L
	NICKNAME	LAST	SUFFIX
		Cardenas	Jr.
Receipt #		Amount	
Date Processed			
Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Business)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY; STATE; ZIP CODE
	3900 Essex Ln Suite 700 Houston Texas 77027		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(832)	715-0607	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)		
10 PERIOD COVERED	Month	Day	Year
		7/1/2015	THROUGH
	Month	Day	Year
			9/24/2015
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	11/3/2015	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)
	N/A		

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

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

14 FILER NAME **Carroll G Robinson** 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

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

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$14,050.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$17,556.16
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$1,527.14
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT

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

Justin R. Jordan

Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

SUBTOTALS - COH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME Carroll G Robinson		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	
3	SCHEDULE B: PLEDGED CONTRIBUTIONS	
4	SCHEDULE E: LOANS	
5	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
6	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
9	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
10	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
11	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Carroll G Robinson		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	6/23/2015		Frank Motley
	6 Contributor address; City; State; Zip Code		7
	Bloomington Indiana 47408		Amount of contributions (\$)
			\$50.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Attorney		
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	7/26/2015		James M Douglas
	6 Contributor address; City; State; Zip Code		7
	Houston Texas 77021		Amount of contributions (\$)
			\$1,000.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
			Texas Southern University
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	7/24/2015		Kessler Topaz Meltzer & Check, LLP
	6 Contributor address; City; State; Zip Code		7
	Radnor PA 19087		Amount of contributions (\$)
			\$2,500.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	8/25/2015		Taft L Foley
	6 Contributor address; City; State; Zip Code		7
	Houston Texas 77002		Amount of contributions (\$)
			\$1,500.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)
	Across The Track PAC	
8/25/2015	6 Contributor address; City; State; Zip Code Houston Texas 77021	1,000.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)
	Davetta & Ray M. Daniels	
8/27/2015	6 Contributor address; City; State; Zip Code Houston Texas 77004	25.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)
	Vickie L McBride	
8/27/2015	6 Contributor address; City; State; Zip Code Missouri City Texas 77489	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$)
	Cheryl Sterling	
8/27/2015	6 Contributor address; City; State; Zip Code Missouri City Texas 77489	100.00

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

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Carroll G Robinson		3 Filer ID (Ethics Commission filers)	
8/27/2015	Michael Adams ----- 6 Contributor address; City; State; Zip Code Houston Texas 77004	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/28/2015	Darryl B Carter ----- 6 Contributor address; City; State; Zip Code Houston Texas 77019	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/28/2015	Jonathan P Smith ----- 6 Contributor address; City; State; Zip Code Houston Texas 77057	7	Amount of contributions (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/27/2015	Thomas E Glenn ----- 6 Contributor address; City; State; Zip Code Humble Texas 77346	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
	Zeb F Poindexter ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) 100.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Carroll G Robinson		3	Filer ID (Ethics Commission filers)
8/27/2015	6 Contributor address; City; State; Zip Code Houston Texas 77051		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 8/27/2015	5 Full name of contributor Patricia M Frazier	<input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$) 100.00
	6 Contributor address; City; State; Zip Code Houston Texas 77045		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 8/21/2015	5 Full name of contributor Angela W Wells	<input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$) 100.00
	6 Contributor address; City; State; Zip Code Charlotte N.C 28214		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 8/18/2015	5 Full name of contributor Andrea Young	<input type="checkbox"/> out of state PAC(ID#)	7 Amount of contributions (\$) 1,000.00
	6 Contributor address; City; State; Zip Code Houston Texas 77019		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Carroll G Robinson		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/16/2015		Gusta Booker
		6	Contributor address; City; State; Zip Code
			Houston Texas 77004
		7	Amount of contributions (\$)
			100.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	8/28/2015		Francis Cook
		6	Contributor address; City; State; Zip Code
			Houston Texas 77021
		7	Amount of contributions (\$)
			250.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/10/2015		Communication Workers of America PAC
		6	Contributor address; City; State; Zip Code
			Washington D.C 20001
		7	Amount of contributions (\$)
			3,000.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/19/2015		Beverly & Dinsdale W Ford
		6	Contributor address; City; State; Zip Code
			Sugar Land Texas 77478
		7	Amount of contributions (\$)
			600.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Carroll G Robinson		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	7/8/2015		Lucy Bremond
		6	Contributor address; City; State; Zip Code
			Sugar Land Texas 77478
		7	Amount of contributions (\$)
			50.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	8/21/2015		Kelly Allen Gray
		6	Contributor address; City; State; Zip Code
			Fort Worth Texas 76101
		7	Amount of contributions (\$)
			250.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	8/22/2015		Kimberly McCleod
		6	Contributor address; City; State; Zip Code
			Spring Texas 77379
		7	Amount of contributions (\$)
			250.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	8/27/2015		Marcia Johnson
		6	Contributor address; City; State; Zip Code
			Houston Texas 77021
		7	Amount of contributions (\$)
			250.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date 7/8/2015	5 Payee name Piryx	
6 Amount (\$) 2.25	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category 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
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/21/2015	5 Payee name Piryx	
6 Amount (\$) 11.25	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category 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
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/22/2015	5 Payee name Piryx	
6 Amount (\$) 11.25	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

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

4 Date 8/27/2015	5 Payee name Piryx		
6 Amount (\$) 11.25	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Solicitation/Fundraising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date 9/1/2015	5 Payee name Piryx	
6 Amount (\$) 9.00	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category 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
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/3/2015	5 Payee name Piryx	
6 Amount (\$) 1.13	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category 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
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/10/2015	5 Payee name Piryx	
6 Amount (\$) 6.75	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

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

4 Date 9/16/2015	5 Payee name Piryx		
6 Amount (\$) 22.50	7 Payee address; City; State; Zip Code 649 Mission Street Suite 204 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Solicitation/Fundraising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date 7/2/2015	5 Payee name Tejano Democrats	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 3715 North Main St Houston Texas 77009	
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/13/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 6,000.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category Polling 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
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/15/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 2,000.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

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

4 Date 7/17/2015	5 Payee name Harris County Democratic Party		
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 1445 N. Loop West Suite 110 Houston Texas 77008		

8 PURPOSE OF EXPENDITURE	(a) Category OTHER (enter a category not listed above)	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Membership
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date 7/28/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 750.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook Ads
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/6/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Advertisement
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/18/2015	5 Payee name Caribbean Chamber of Commerce	
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 11110 Bellaire Blvd Suite 216 Houston Texas 77001	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson		3 Filer ID (Ethics Commission filers)
	OTHER (enter a category not listed above)	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
Membership			

4 Date 8/28/2015	5 Payee name Patriot Group Strategies		
6 Amount (\$) 1,500.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Radio/Mail
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date 8/31/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 2,400.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Advertisement/Mailer
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/4/2015	5 Payee name Worldpay	
6 Amount (\$) 55.89	7 Payee address; City; State; Zip Code 600 Morgan Falls Rd Suite 260 Atlanta GA 30350	
8 PURPOSE OF EXPENDITURE	(a) Category 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
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/10/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

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

4 Date 7/7/2015	5 Payee name Worldpay		
6 Amount (\$) 34.89	7 Payee address; City; State; Zip Code 600 Morgan Falls Rd Suite 260 Atlanta GA 30350		
8 PURPOSE OF EXPENDITURE	(a) Category Solicitation/Fundraising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date 9/22/2015	5 Payee name Patriot Group Strategies	
6 Amount (\$) 600.00	7 Payee address; City; State; Zip Code 11115 Sagevalley Dr Houston Texas 77089	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Social Media/Radio
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/18/2015	5 Payee name Carroll G Robinson	
6 Amount (\$) 400.00	7 Payee address; City; State; Zip Code 3401 Prospect Houston Texas 77004	
8 PURPOSE OF EXPENDITURE	(a) Category Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of Payment to ATT Wireless
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$	
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$\$1,970.00	
5 Date 7/14/2015	6 Payee name Kroger	
7 Amount (\$) 22.72	8 Payee address; City; State; Zip Code 1505 Wirt Road Houston Texas 77055	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Card and Flowers for Senior Citizen

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 7/17/2015	6 Payee name Monarch/Hotel ZaZa		
7 Amount (\$) 48.00	8 Payee address; City; State; Zip Code 5701 Main Street Houston Texas 77005		

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) 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 Meeting with staff
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11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held
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5 Date 7/18/2015	6 Payee name Crowne Plaza Hotel		
7 Amount (\$) 6.00	8 Payee address; City; State; Zip Code 1700 Smith Street Houston Texas 77002		

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking - Antioch Scholarship Breakfast
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11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
5 Date 7/20/2015	6 Payee name Skinny Rita's Grille	
7 Amount (\$) 144.00	8 Payee address; City; State; Zip Code 4002 N. Main St Houston Texas 77009	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting with supporters and staff
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 7/23/2015	6 Payee name Star Stop #60	
7 Amount (\$) 28.52	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 7/25/2015	6 Payee name Stripes	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$1,970.00
30.00	2329 Southmore Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 7/26/2015	6 Payee name Wingarita		
7 Amount (\$) 20.02	8 Payee address; City; State; Zip Code 736 University Drive Prairie View Texas 77446		
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 7/28/2015	6 Payee name Stripes		
7 Amount (\$) 50.00	8 Payee address; City; State; Zip Code 2329 Southmore Houston Texas 77004		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$1,970.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 7/30/2015	6 Payee name Star Stop #60		
7 Amount (\$) 36.94	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held	

5 Date 8/5/2015	6 Payee name Star Stop #60		
7 Amount (\$) 35.00	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$\$1,970.00
	Travel in District	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/5/2015	6 Payee name Barnaby's Café
7 Amount (\$) 34.00	8 Payee address; City; State; Zip Code 1801 Binz St Suite 110 Houston Texas 77004

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Food/Beverage Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dinner with Volunteer Driver

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
5 Date 8/6/2015	6 Payee name Aunt Bea's	
7 Amount (\$) 245.00	8 Payee address; City; State; Zip Code 5422 North Freeway Houston Texas 77076	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Breakfast
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/6/2015	6 Payee name Houston's This Is It	
7 Amount (\$) 90.12	8 Payee address; City; State; Zip Code 2712 Blodgett Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteers luncheon
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/7/2015	6 Payee name Monarch/Hotel ZaZa	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$1,970.00
45.00	5701 Main Street Houston Texas 77005	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteers luncheon
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/11/2015	6 Payee name Star Stop #60		
7 Amount (\$) 32.17	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held	

5 Date 8/15/2015	6 Payee name Monarch/Hotel ZaZa		
7 Amount (\$) 207.77	8 Payee address; City; State; Zip Code 5701 Main Street Houston Texas 77005		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$1,970.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Luncheon
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/17/2015	6 Payee name Fed Ex		
7 Amount (\$) 120.00	8 Payee address;	City;	State; Zip Code
		801 Louisiana St Suite 101 Houston Texas 77002	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photocopies	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held	

5 Date 8/18/2015	6 Payee name Star Stop #60		
7 Amount (\$) 40.44	8 Payee address;	City;	State; Zip Code
		2111 Southmore Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$\$1,970.00
	Travel in District	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/19/2015	6 Payee name Houston Forward Times
7 Amount (\$) 42.00	8 Payee address; City; State; Zip Code PO Box 8346 Houston Texas 77288

9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OTHER (enter a category not listed above)	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper Subscription

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
5 Date 8/21/2015	6 Payee name Barnaby's Café	
7 Amount (\$) 36.00	8 Payee address; City; State; Zip Code 1801 Binz St Suite 110 Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input checked="" type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with Campaign Manager
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/22/2015	6 Payee name Star Stop #60	
7 Amount (\$) 36.46	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/24/2015	6 Payee name Samurai Noodle Houston	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$1,970.00
34.00	1801 Durham Suite 2 Houston Texas 77007	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with Campaign Manager and donor
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/27/2015	6 Payee name Shell		
7 Amount (\$) 40.00	8 Payee address; City; State; Zip Code 4102 Alameda Rd Houston Texas 77004		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 8/28/2015	6 Payee name Monarch/Hotel ZaZa		
7 Amount (\$) 65.00	8 Payee address; City; State; Zip Code 5701 Main Street Houston Texas 77002		

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ \$1,970.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Donor Meeting
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 8/31/2015	6 Payee name Double Tree Downtown		
7 Amount (\$) 73.00	8 Payee address; City; State; Zip Code 400 Dallas Street Houston Texas 77002		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with Campaign Manager and donor	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 9/2/2015	6 Payee name Café Express		
7 Amount (\$) 33.24	8 Payee address; City; State; Zip Code 210 Meyerland Plaza Mall Houston Texas 77096		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$1,970.00
	Food/Beverage Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with volunteer
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 9/3/2015	6 Payee name Monarch/Hotel ZaZa
7 Amount (\$) 42.00	8 Payee address; City; State; Zip Code 5701 Main Street Houston Texas 77002

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)	(b) Description
	Food/Beverage Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with volunteer

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
5 Date 9/3/2015	6 Payee name Star Stop #60	
7 Amount (\$) 38.67	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 9/5/2015	6 Payee name Star Stop #60	
7 Amount (\$) 43.00	8 Payee address; City; State; Zip Code 2111 Southmore Houston Texas 77004	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 9/6/2015	6 Payee name Corner Bakery	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
16.31	2615 Southwest Freeway Houston Texas 77098	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast with Supporter
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date	6 Payee name
9/9/2015	Barnaby's Café
7 Amount (\$)	8 Payee address; City; State; Zip Code
40.00	1801 Binz St Suite 110 Houston Texas 77004
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense
	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast with Supporter
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held

5 Date	6 Payee name
9/11/2015	Stripes
7 Amount (\$)	8 Payee address; City; State; Zip Code
31.50	2329 Southmore Houston Texas 77004

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$\\$1,970.00
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas for Volunteer Driver
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 9/11/2015	6 Payee name Chili's		
7 Amount (\$) 38.12	8 Payee address; City; State; Zip Code 7408 S. Sam Houston Parkway West Houston Texas 77085		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with donor	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

5 Date 9/15/2015	6 Payee name Pappasito's		
7 Amount (\$) 70.00	8 Payee address; City; State; Zip Code 1600 Lamar Street Houston Texas 77010		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$1,970.00
	Food/Beverage Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with donors
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 9/16/2015	6 Payee name Monarch/Hotel ZaZa
7 Amount (\$) 30.00	8 Payee address; City; State; Zip Code 5701 Main Street Houston Texas 77002

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)	(b) Description
	Food/Beverage Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Volunteer Meeting

11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$1,970.00	
5 Date 9/25/2015	6 Payee name Monarch/Hotel ZaZa	
7 Amount (\$) 25.00	8 Payee address; City; State; Zip Code 5701 Main Street Houston Texas 77002	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with policy team
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 9/18/2015	6 Payee name	
7 Amount (\$) 25.00	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch with policy team
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	2 FILER NAME Carroll G Robinson	3 FilerID (Ethics Commission filers)
4 Date	5 Payee name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee Address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**PAYMENT FROM POLITICAL CONTRIBUTIONS
TO A BUSINESS OF C/OH**

SCHEDULE H

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule H:	2 FILER NAME Carroll G Robinson	3 Filer ID (Ethics Commission filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
		<input type="checkbox"/> Check if Austin, TX, office holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule I:	2 FILER NAME Carroll G Robinson	3 ACCOUNT # (Ethics Commission filers)		
4 Date 7/28/2015	5 Payee name Texas Conference of Lay Ministry			
6 Amount (\$) 100.00	7 Payee address; 8315 Bending Branch Lane	City; Cypress	State; Texas	Zip Code 77433
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required) Donation		
4 Date 7/30/2015	5 Payee name Coalition of Black Trade Unionist			
6 Amount (\$) 100.00	7 Payee address; 2000 North Loop West Suite 132	City; Houston	State; Texas	Zip Code 77018
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required) Scholarship Donation		
4 Date 9/1/2015	5 Payee name Jack Yates National Alumni Association			
6 Amount (\$) 75.00	7 Payee address; P.O Box 88284	City; Houston	State; Texas	Zip Code 77288
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required) Back To School Supplies		
4 Date 9/2/2015	5 Payee name Jack Yates Fabulous Alumni Association			
6 Amount (\$) 50.00	7 Payee address; P.O Box 8249	City; Houston	State; Texas	Zip Code 77288
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description (See instructions regarding type of information required) Scholarship Donation		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED