		E / OFFICEHO I FINANCE RE				FORM C/OH COVER SHEET PG 1
TI	ne C/OH Instruction (Guide explains how to co	omplete this form.	1 Filer ID		2 Total pages filed: 128
3	CANDIDATE /	MSXMRS MR	FIRST		MI	OFFICE USE ONLY
	OFFICEHOLDER NAME		Ellen			Date Received
						ATTION OF
		NICKNAME	LAST	······································	SUFFIX	3 T
			Cohen			RECEIVED 1
4	CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT / SUITE #; C	ITY;	ZIP CODE	Hand-delivered on Data Thanked
	MAILING ADDRESS	P.O. Box 22734				RECORD CITY SECREDUM RY
	Change of Address	Houston, TX 77227				The state of the s
						Date Processes
						Date Imaged
5	CAMPAIGN (MS (MRS) MR	FIRST		MI	
	TREASURER NAME		1 .			
		MS.	Vackin	e		
		NICKNAME	LAST		SUFFIX	
		/	Martin	\		
6	CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE)	, AP	T / SUITE #; CITY;	STATE; ZIP CODE
	TREASURER ADDRESS	423 W	est mace	land	House	ton TX Max
	(Residence or Business)	10)	- /		11007	101 1/100
7	CAMPAIGN TREASURER	AREA CODE P	HONE NUMBER	EXTENSION		
	PHONE	1/13	960	()E)	44	
8	REPORT			1	10	
	TYPE	January 15	30th day befo	re election	Runoff	15th day after campaign treasurer appointment (officeholder only)
		X July 15	8th day before	e election	Exceeded \$500 limit	Final Report (Attach C/OH-FR)
_						
9	PERIOD COVERED	Month Day Ye 01/01/2015		HROUGH	Month Day 06/30/2015	Year
		02022013		11100011	00/30/2013	
1.0	ELECTION	ELECTION DATE			ELECTION TYPE	
		Month Day Ye	ar 🔲	Primary	Runoff	Other
		11/03/2015	X	General	Special	
	OFFICE	OFFICE (IEI E III			Tan over an annual	
11	OFFICE	OFFICE HELD (if any) Houston City Council I	District C		12 OFFICE SOUGHT (Houston City Cou	
						TON DIGITION O
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			GO	TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 128

					Z 01 1Z8	
13 C / OH NAME	Cohen, Ellen		14 Filer ID			
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or POLITICAL consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.					
Additional Pages	Additional Pages COMMITTEE TYPE COMMITTEE NAME			nder alle de la companya de la comp		
	GENERAL COMMITTEE ADDRESS			990 Caroll 43 Call (1905) Call Call (1906)		
	SPECIFIC					
	The state of the s	COMMITTEE CAMPAIGN TREASURER NAME	nementalist standards error avertach für des de mannen kunn av deze englise glasse des deserve			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	mercurvial meteors dan verbalah kephan granu		
1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN P LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		THAN PLEDGES,	\$	0.00		
		ICAL CONTRIBUTIONS N PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	131,450.00	
EXPENDITURE TOTALS			ITEMIZED	\$	0.00	
	4. TOTAL POLITICA	AL EXPENDITURES	A FARRICA (A PRINCIPAL METAL	\$	24,479.73	
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	167,474.05	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$	0.00	
17 AFFADAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	of perjury, that the according to the following of the following the fol	mpanying pe reporter	report is d by me	
		Signature of	Candidate or Officeholde	месене асубивација и при пред се		
AFFIX NOT.	ARY STAMP / SEAL ABO	VE				
	ibed before me, by the sai	dtify which, witness my hand and seal of office.	, this the		day	
Signature of office		Printed name of officer administering	Title of officer ac	I ministerir	ng oath	
					Solves	

SUBTOTALS - C/OH FORM C/OH **COVER SHEET PG 3** 3 of 128 18 FILER NAME 19 Filer ID Cohen, Ellen **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS X 131,450.00 \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE E: LOANS \$ X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 24,479.73 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 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 FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 11. TO FILER

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/41 Rpt: 4/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/27/2015 **ACEC Houston PAC** \$2,500.00 6 Contributor address; City; State; Zip Code Houston, TX 77018 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/23/2015 Akbari, Christopher (Mr.) \$250.00 Contributor address: Citv: State; Zip Code Nederland, TX 77627 Principal occupation / Job title (See Instructions) Employer (See Instructions) President Itex Group Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/15/2015 Aldrich, Melissa (Ms.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Assistant Professor **UTHealth** Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Alexander, Amelia Ann (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/20/2015 Alexander, Joan (Ms.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Community Activist Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/41 Rpt: 5/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/30/2015 Almoney, Stanley (Mr.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/26/2015 Antene, Gary (Mr.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Technician Marathon Oil Company Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/21/2015 Appel, Madeleine (Ms.) \$150.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Administrator City of Houston Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/10/2015 Amold, Daniel (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/11/2015 Arnold, Shellye (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Executive Director** Memorial Park Conservancy

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/41 Rpt: 6/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/03/2015 Atlas, Scott (Mr.) \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77208 Principal occupation / Job title (See Instructions) Employer (See Instructions) legal consultant self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/13/2015 Bartos, John (Mr.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Attorney Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/19/2015 **Bellaire Towing** \$500.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 04/13/2015 Bischoff Barlow, Susan (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** marketing self Full name of contributor out-of-state PAC (ID#: Date Amount of Contribution (\$) 06/30/2015 Bischoff Barlow, Susan (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) marketing self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/41 Rpt: 7/128 Filer ID FILER NAME Cohen, Ellen 5 Full name of contributor Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$1,000.00 03/15/2015 Blanton, Leslie (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) Nicklos Drilling Co. Executive Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$100.00 03/20/2015 Blanton, Virginia (Ms.) Contributor address; City; State; Zip Code Houston, TX 77019 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$150.00 02/23/2015 Blum, Jerry (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) Heritage Texas Properties Realtor Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 06/10/2015 Bohan, Kenneth (Mr.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** The Liberty Group President Out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$250.00 03/27/2015 Booker, Nana (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Art-Dealer Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/41 Rpt: 8/128 Filer ID FILER NAME Cohen, Ellen 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) Date \$250.00 06/29/2015 Boswell, Edward L. "Peck" (Mr.) 6 Contributor address; City; State; Zip Code JERSEY VILLAGE, TX 77040 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) BRH-Garver Construction, L.P. **Utility Construction** Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date \$1,000.00 Bracewell & Giuliani, LLP 03/23/2015 Contributor address; City; State; Zip Code Houston, TX 77002 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$25.00 02/26/2015 Brayshaw, Joellen (Ms.) Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date 03/26/2015 Brayshaw, Joellen (Ms.) \$25.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$25,00 04/27/2015 Brayshaw, Joellen (Ms.) Contributor address; City; State; Zip Code Houston, TX 77006 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/41 Rpt: 9/128 3 Filer ID FILER NAME Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) \$250.00 06/29/2015 Brewster, Jamie (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) President and Ex. Director **Upper Kirby District** Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$250.00 03/24/2015 Bricker, Alan (Mr.) Contributor address; City; State; Zip Code Houston, TX 77071 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 06/10/2015 Britt, Thomas (Mr.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77008 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 02/17/2015 Brockway, Michelle (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77018 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Amegy Bank NA Lawyer Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$100.00 03/19/2015 Brodsky, Ruth (Ms.) Contributor address; City; State; Zip Code Houston, TX 77056 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/41 Rpt: 10/128 3 Filer ID FILER NAME Cohen, Ellen 5 Full name of contributor 7 Amount of Contribution (\$) Date out-of-state PAC (ID#: \$200.00 03/28/2015 Brown, Peter (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Architect Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$500.00 03/08/2015 Bryan, Sandy (Ms.) Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Small business owner Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$500.00 06/09/2015 Bryan, Sandy (Ms.) Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Small business owner Amount of Contribution (\$) Full name of contributor Out-of-state PAC (ID#: Date \$250.00 06/29/2015 Bryan, Sandy (Ms.) Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Small business owner out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$250.00 06/14/2015 Buck, Larry (Mr.) Contributor address; City; State; Zip Code Houston, TX 77024 Employer (See Instructions) Principal occupation / Job title (See Instructions) Larry W. Buck & Associates Risk Management Consultant

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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/41 Rpt: 11/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#; 7 Amount of Contribution (\$) 02/06/2015 Burress, Bob (Mr.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Physician Allergy & Asthma Associates Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/06/2015 Cannon, Deborah (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) President Houston Zoo Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/27/2015 Carroll, Tony (Mr.) \$500.00 Contributor address: City: State: Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Therapist** Self Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 02/07/2015 Carter, Darryl (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Law Office of Darryl Carter Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/05/2015 Casademont, Clare (Ms.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Social Worker Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/41 Rpt: 12/128 FILER NAME 3 Filer ID Cohen, Ellen 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 03/24/2015 Chambers, David (Mr.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77004 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Fundraiser **Houston Symphony** Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 03/08/2015 Chan, Waynette A (Ms.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 02/19/2015 Coleman, Garnet (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77288 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Full name of contributor Amount of Contribution (\$) Date Out-of-state PAC (ID#: \$100.00 04/24/2015 Combs, Tom (Mr.) Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) President Tom Combs&Associates Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/27/2015 \$500.00 Contributor address; City; State; Zip Code Houston, TX 77040 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/41 Rpt: 13/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/09/2015 Cominsky, Terry (Mr.) \$50.00 6 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Realtor Martha Turner out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 04/01/2015 Connally IV, John B. (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Vinson & Elkins LLP Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/24/2015 Conner, Cecil (Mr.) \$150.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Managing Director** Houston Ballet Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/21/2015 Cordell, Tom (Mr.) \$500.00 Contributor addrage: City State: Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Attorney Haynes & Boone LLP Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/20/2015 Crosswell, Emily (Ms.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Investments Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 11/41 Rpt: 14/128 3 Filer ID FILER NAME Cohen, Ellen 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) Date \$50.00 06/29/2015 Cuellar, Delia (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77006 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Retired Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$25.00 04/21/2015 Cunningham, Beth (Ms.) Contributor address; City; State; Zip Code Houston, IX / /UUb **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$18.00 06/29/2015 DANTE, MORRIS (Mr.) Contributor address; City; State; Zip Code Houston, TX 77096 Employer (See Instructions) Principal occupation / Job title (See Instructions) RETIRED RETIRED Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor 03/24/2015 \$1,000.00 Dannenbaum, James (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Dannenbaum Engineering Corp. Engineer out-of-state PAC (ID#:_ Amount of Contribution (\$) Date Full name of contributor \$100.00 02/09/2015 Davis, Mark (Mr.) Contributor address; City; State; Zip Code Houston, TX 77006 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Real Estate **Davis Commercial**

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ne of contributor		J, Inc.	\$500.00
ter III, Truman (Mr.)	Pegasus International		\$500.00
ter III, Truman (Mr.)		Amount of Contribution (\$)	\$500.00
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title (See Instructions)	Employer (See Instruction		
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and (acc mannenes)	Houston Federation	of Teachers	
	on, TX 77006 title (See Instructions) ne of contributor	title (See Instructions) Employer (See Instructions) Retired ne of contributor	title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Gayle (Ms.) utor address; City; State; Zip Code

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/41 Rpt: 16/128 3 Filer ID FILER NAME Cohen, Ellen 7 Amount of Contribution (\$) Date 5 Full name of contributor Out-of-state PAC (ID#: 04/27/2015 Farrell, John (Mr.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77005 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Self Attorney Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$1,000.00 03/13/2015 Fein, Martin (Mr.) Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Martin Fein Interests, Ltd. Real Estate Developer Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) Date \$250.00 03/24/2015 Feldman, David (Mr.) Contributor address; City; State; Zip Code Houston, TX 77046 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) feldman and feldman Attorney Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 04/19/2015 Feldman, Theba (Ms.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$500.00 03/22/2015 Fiorito, Deborah (Ms.) Contributor address; City; State; Zip Code Houston, TX 77006 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/41 Rpt: 17/128 FILER NAME Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/12/2015 Foster, Harriet (Ms.) \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Community Volunteer Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/22/2015 Fowler, Michael (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Business** Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/17/2015 Friedman, J. Kent (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77010 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Haynes & Boone, LLP Full name of contributor Date Out-of-state PAC (ID#: Amount of Contribution (\$) 03/20/2015 Fulbright & Jaworski \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77010 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/28/2015 GALBRAITH, WILLIAM (Mr.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** BUSINESSMAN SELF

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/41 Rpt: 18/128 FILER NAME 3 Filer ID Cohen, Ellen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 03/14/2015 Gardner, Pamela (Ms.) \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77005 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Houston Astros President Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/11/2015 Garver, C.M. (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Contractor **BRH-Garver Inc** Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) Date 06/30/2015 \$100.00 George, Karen (Ms.) Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Ralph S. O'Connor & Associates Finance Amount of Contribution (\$) Date Full name of contributor Out-of-state PAC (ID#:_ \$1,000.00 02/08/2015 Gilliam, Lance (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Waterman Steele Real Estate Advisors Real Estate Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 06/19/2015 Giraldo, Zita (Ms.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77027 Employer (See Instructions) Principal occupation / Job title (See Instructions) artist self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/41 Rpt: 19/128 FILER NAME 3 Filer ID Cohen, Ellen Date Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 04/27/2015 Goldfield, Barbara (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) CEO Nathan Segal and Company Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/07/2015 Goodfriend, Barry (Mr.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) physician **Baylor College of Medicine** Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/13/2015 Goodman, Barry (Mr.) \$1,000.00 Contributor address: City: State: Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Professional The Goodman Corporation Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/09/2015 Goodman, Gayle (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Psychotherapist** Psychotherapy Associates, PLLC Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/04/2015 Graham, Adelma (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/41 Rpt: 20/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/12/2015 Graubart, Miriam (Ms.) \$200.00 6 Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Owner Graubart & Co Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/20/2015 HAA Better Government Fund \$2,000.00 Contributor address; City; State; Zip Code Houston, TX 77041 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 06/26/2015 HILDEBRAND, JEFFERY (Mr.) \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77251 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Founder and CEO Hilcorp Energy Company out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 03/04/2015 Haynes & Boone PAC \$1,000.00 Contributor address; City; State; Zip Code Richardson, TX 75082 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date Out-of-state PAC (ID#: Amount of Contribution (\$) 03/12/2015 Helfman, Alan (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 70024 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Owner Helfman Dodge

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/41 Rpt: 21/128 FILER NAME 3 Filer ID Cohen, Ellen Date out-of-state PAC (ID#: Full name of contributor 7 Amount of Contribution (\$) 04/23/2015 Hildebrand, Melinda (Ms.) \$2,400.00 6 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) President/Owner Self Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 04/23/2015 Hildebrand, Melinda (Ms.) \$2,600.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) President/Owner Self Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Hixon, Nancy (Ms.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/30/2015 **Houston Police Officers Union** \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 06/24/2015 Houston Police Officers' Union \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/41 Rpt: 22/128 FILER NAME 3 Filer ID Cohen, Ellen Date Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/24/2015 Hovendick, Mitchell (Mr.) \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Director **EnCap Investments** Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 05/13/2015 Hughes, Debbie (Ms.) \$25.00 Contributor address; City; State; Zip Code Kingwood, TX 77345 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Analyst** AIG Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Hunsaker, Linda (Ms.) \$150.00 Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Community Volunteer Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Husmann, Kristie (Ms.) \$20.00 Contributor address: Citv: State: Zip Code Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 04/28/2015 Joiner, Patricia (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Knudson LP

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 20/41 Rpt: 23/128 3 Filer ID FILER NAME Cohen, Ellen 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 4 Date \$100.00 04/27/2015 Kahn, Alfred (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77030 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) U of H - Clear Lake Psychologist out-of-state PAC (ID#:_ Amount of Contribution (\$) Full name of contributor Date \$1,000.00 03/20/2015 Kaufman, Stephen (Mr.) Contributor address; City; State; Zip Code Houston, TX 77056 Employer (See Instructions) Principal occupation / Job title (See Instructions) Comiskey Kaufman Consulting, LLC Consultant Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$100.00 03/05/2015 Keahey, kirby (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Out-of-state PAC (ID#: Full name of contributor Date \$500.00 03/05/2015 Keefe, Susan (Ms.) Contributor address: City: State: Zip Code Houston, TX 77098 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$500.00 03/24/2015 Keeton, Richard (Mr.) Contributor address; City; State; Zip Code Houston, TX 77002 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) **McGuireWoods** Attorney

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/41 Rpt: 24/128 FILER NAME Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/26/2015 Kelley, David (Mr.) \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Vice President Operations **CDI** Corporation Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/03/2015 Kelsey, Mavis (Ms.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) **RE Broker** self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/17/2015 Kempner, Harris L. (Mr.) \$500.00 Contributor address; City; State; Zip Code Galveston, TX 77553 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Investment Advisor Kempner Capital Management, Inc. Full name of contributor Out-of-state PAC (ID#: Date Amount of Contribution (\$) 02/23/2015 Kennedy, Nathelyne (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77036 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Nathelyne A. Kennedy & Associates Date Full name of contributor Out-of-state PAC (ID#:_ Amount of Contribution (\$) 02/06/2015 Knobil, Julane H (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 22/41 Rpt: 25/128 FILER NAME 3 Filer ID Cohen, Ellen Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/09/2015 Krentz, David (Mr.) \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) retired retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/24/2015 Kripke, Margaret (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Research Scientist Cancer Prev &Res Inst of Texas Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/23/2015 LL&C 96 \$500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 06/24/2015 LOCKE LORD, LLP \$1,000.00 Contributor address; City; State; Zip Code Dallas, TX 75201 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/16/2015 Lamboley, Catherine (Ms.) \$1,000.00 Contributor address: City: State: Zin Code Houston, TX 77027 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 23/41 Rpt: 26/128 FILER NAME Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Langston, Don (Mr.) \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Owner Always In Season Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/27/2015 Lapin, Herman (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/20/2015 Lapin, Robert (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Lapin & Landa, LLP Attorney out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 03/13/2015 Lapin, Susan (Ms.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Housewife Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/09/2015 \$250.00 Latimer, Truett (Mr.) Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** President Houston Museum of Natural Science

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 24/41 Rpt: 27/128 FILER NAME Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/21/2015 Lawler, Margaret (Ms.) \$25.00 6 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Director of Development** Da Camera Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/17/2015 Lents, Ann (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77046 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/27/2015 Lerner, Steve (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) real estate development TRC Ventures, LP Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/12/2015 Lewis, Barry (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Real Estate Investor Goldeneye Inc Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/15/2015 Linebarger, Goggan, Blair & Sampson, LLP \$1,000.00 Contributor address; City; State; Zip Code Austin, TX 78760 Principal occupation / Job title (See Instructions) **Employer (See Instructions)**

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 25/41 Rpt: 28/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/29/2015 Lipper, Miryam (Ms.) \$50.00 6 Contributor address; City; State; Zip Code WASHINGTON, DC 20009 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Deputy National Press Secretary Democratic National Committee** Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/05/2015 Loveland, Mark (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consulting Sapient Corporation Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/24/2015 Mandel, Barry (Mr.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77010 Principal occupation / Job title (See Instructions) Employer (See Instructions) President Discovery Green Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/05/2015 Manne, Neal (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Susman Godfrev LLP Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/12/2015 Margolis, Barry (Mr.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) **CPA** McGladrey LLP

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 26/41 Rpt: 29/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/29/2015 \$100.00 Marsh, J Kent (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77008 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Marsh Darcy Partners, Inc. Urban Planner Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:_ \$250.00 04/27/2015 Martin, Jacqueline (Ms.) Contributor address: Citv: State: Zip Code Houston, TX 77006 Employer (See Instructions) Principal occupation / Job title (See Instructions) President J.S. Martin Associates, LP Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 03/05/2015 Massad, Stephen (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Baker Botts LLP Lawyer Amount of Contribution (\$) Full name of contributor Out-of-state PAC (ID#: Date 03/28/2015 \$1,000,00 Matthiesen, David (Mr.) Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$25.00 02/06/2015 McCarthy, Alice (Ms.) Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Writer Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 27/41 Rpt: 30/128 FILER NAME Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 05/13/2015 McStay, Rosie (Ms.) \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Government Relations and Community Benefits Texas Children's Hospital Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/19/2015 Mendelsohn, Anne (Ms.) \$500.00 Contributor address: City: State: Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/20/2015 Merfish, Sherry (Ms.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/22/2015 Miller, William (Mr.) \$5,000.00 Contributor address; City; State; Zip Code Austin, TX 78703 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Consultant HillCo Partners Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 04/14/2015 Mitchell, Alison (Ms.) \$25.00 Contributor address; City; State; Zip Code Houston, TX 77035 Principal occupation / Job title (See Instructions) **Employer (See Instructions) Nurse Practitioner** Houston Methodist Hospital

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 28/41 Rpt: 31/128 FILER NAME Filer ID Cohen, Ellen 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/01/2015 Mitchmore, Randy (Mr.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) LifeSmiles Dentist Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 04/01/2015 Musemeche, Mark (Mr.) \$5,000.00 Contributor address; City; State; Zip Code Bellaire, TX 77401 Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer Self Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/11/2015 \$500.00 Naegeli, Betty (Ms.) Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/30/2015 Nasir, Emily (Ms.) \$25.00 Contributor address; City; State; Zip Code Syracuse, NY 13210 Principal occupation / Job title (See Instructions) Employer (See Instructions) Syracuse University **Graduate Assistant** out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 04/01/2015 \$2,000.00 Nau, Barbara (Ms.) Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Corporate Secretary Self

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 29/41 Rpt: 32/128 Filer ID FILER NAME Cohen, Ellen 7 Amount of Contribution (\$) 5 Full name of contributor Out-of-state PAC (ID#: Date \$500.00 03/24/2015 Newton, Stephen (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77019 Employer (See Instructions) Principal occupation / Job title (See Instructions) Russell Reynolds Associates Area Manager Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$1,000.00 05/07/2015 Nichols, Michael (Mr.) Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Principal occupation / Job title (See Instructions) Nichols Consulting attorney Amount of Contribution (\$) Out-of-state PAC (ID#: Date Full name of contributor \$500.00 03/22/2015 Papadopoulos, Imogen (Ms.) Contributor address; City; State; Zip Code Houston, TX 77024 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Attorney Amount of Contribution (\$) Date Full name of contributor Out-of-state PAC (ID#: \$250.00 06/30/2015 Peeks, JoAnn (Ms.) Contributor address; City; State; Zip Code Houston, TX 77025 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$50.00 03/16/2015 Pennington, Paul (Mr.) Contributor address; City; State; Zip Code Houston, TX 77204 **Employer (See Instructions)** Principal occupation / Job title (See Instructions) University of Houston professor

i ne instru	ıction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 30/41 Rpt: 33/128
! FILER NAME			3 Filer ID
Cohen, Elle	n		A contract of the contract of
Date 06/09/2015	***************************************		
	6 Contributor address: Citv: State: 7ip Code		
	Houston, TX 77005		
Principal occu retired	upation / Job title (See Instructions)	9 Employer (See Instr	ructions)
Date	Full name of contributor out-of-state PAC (ID#		
02/18/2015	Postl, James (Mr.)	1分别的数据表现的现在分词 医阿拉拉氏试验检试验 医阿拉克氏试验检试验检试验检尿病 医多种性原因 计多数数据 化二甲基苯酚 医克里克氏试验检尿病 医克里克氏试验检尿病 医多种性原因 化二甲基苯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	\$5,000.0
	Contributor address; City; State; Zip Code		
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Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instri	uctions)
		Retired	
Date 06/16/2015	Full name of contributor out-of-state PAC (ID#: Pozmantier, Paula (Ms.)) Amount of Contribution (\$)
	Contributor address; City; State; Zip Code	TVM#AGG bVkGAGagagagagagagagagagagagagagagagagagaga	\$500.0
	Houston, TX 77056		
Principal occu	pation / Job title (See Instructions)	Employer (See Instru	uctions)
retired		retired	,
Date	Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
05/26/2015	Provost, Celinda (Ms.)	ovost, Celinda (Ms.)	
**Adjointiful America ground g	Contributor address; City; State; Zip Code		76 d a b by g days a
	Seattle, WA 98107		
Principal occup	pation / Job title (See Instructions)	Employer (See Instru	uctions)
Consultant		Net Victories	
Date	Full name of contributor ut-of-state PAC (ID#:_		
03/16/2015	Rabinow, Richard (Mr.)		\$200.00
	Contributor address; City; State; Zip Code	\$	4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
disense de la constante de la	Houston, TX 77027		
CONTRACTOR OF THE PARTY OF THE	ation / Job title (See Instructions)	Employer (See Instru	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 31/41 Rpt: 34/128 Filer ID FILER NAME Cohen, Ellen 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: Date \$25.00 04/13/2015 Radoff, Henry (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney Court Receiver Henry V. Radoff PC Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 04/28/2015 \$500.00 Reaves, Richard (Mr.) Contributor address; City; State; Zip Code Houston, TX 77008 Employer (See Instructions) Principal occupation / Job title (See Instructions) REAVCO INC Director Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$25.00 02/06/2015 Redeker, Janet (Ms.) Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$25.00 Reiner, Martin (Mr.) 06/29/2015 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$10.00 Reingold, Maxine (Ms.) 06/30/2015 Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 32/41 Rpt: 35/128 FILER NAME Filer ID Cohen, Ellen Date 5 Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Rhodes, George (Mr.) \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney Fred Rhodes & Associates. PC Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 02/06/2015 Riley, Traci (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Stay at home mom Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 01/20/2015 \$100.00 Rippner, Elaine (Ms.) Contributor address; City; State; Zip Code Tucson, AZ 85715 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/16/2015 Rippner, Louis (Mr.) \$200.00 Contributor address; City; State; Zip Code Delray Beach, FL 33446 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/16/2015 \$5,000.00 Roane, Gay (Ms.) Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Investor

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 33/41 Rpt: 36/128 FILER NAME Filer ID Cohen, Ellen Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$1,000.00 03/25/2015 Robertson, Wilhelmina (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77002 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID# \$1,000.00 03/09/2015 Rogers, Regina (Ms.) Contributor address; City; State; Zip Code Beaumont, TX 77706 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Employed Attorney Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 02/11/2015 \$25.00 Rothschild, George (Mr.) Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired Full name of contributor Amount of Contribution (\$) Date Out-of-state PAC (ID#: \$100.00 04/27/2015 Rumsey, Edwin (Mr.) Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Amount of Contribution (\$) Date Full name of contributor Out-of-state PAC (ID#: 03/30/2015 Samuels, J. Victor (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Victory Packaging Inc Chairman

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 34/41 Rpt: 37/128 FILER NAME 3 Filer ID Cohen, Ellen 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 05/23/2015 Sander, D.W. (Mr.) \$50.00 6 Contributor address; City; State; Zip Code Houston, TX 77042 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) President Sander Engineering Corporation Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/29/2015 Santamaria, Joseph W (Mr.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/14/2015 Sawallisch, Sharon (Ms.) \$25.00 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Houston Chronicle Publishing Secretary Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/29/2015 Seymour, Thomas (Mr.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Project Manager ExxonMobil Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 04/28/2015 \$100.00 Shamban, Eric (Mr.) Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retail Candywrappers, LLC

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 35/41 Rpt: 38/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 03/24/2015 Shumway, Nicolas (Mr.) \$200.00 6 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Dean of Humanities Rice University Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/23/2015 Sklar, Barbara (Ms.) \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Non Profit Administrator Sklar Family Foundation Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/19/2015 Smith, Gary (Mr.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Associate Dean Rice University Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 03/04/2015 Steely, Robert (Mr.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 06/23/2015 Stern, Carter (Mr.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Johnson, Trent, West, & Taylor

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 36/41 Rpt: 39/128 Filer ID FILER NAME Cohen, Ellen 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: Date \$25.00 02/06/2015 Stern, Roanne (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 04/21/2015 Stern, Roanne (Ms.) Contributor address; City; State; Zip Code Houston, TX 77004 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$250.00 05/06/2015 Stinson, Cassie (Ms.) Contributor address; City; State; Zip Code Houston, TX 77002 Employer (See Instructions) Principal occupation / Job title (See Instructions) BoyarMiller attorney Out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$50.00 06/09/2015 Stone, Lisa (Ms.) Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) **Employer (See Instructions) MDAnderson Cancer Center** researcher Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$100.00 06/15/2015 Terry, Paul (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) retired retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 37/41 Rpt: 40/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/01/2015 Texas Assn of Realtors \$10,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/09/2015 Thomason, Phyllis (Ms.) \$250.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Thorpe, Larry W (Mr.) \$25.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/18/2015 Todd, Emily (Ms.) \$150.00 Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Self arts administrator out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 03/11/2015 Truesdell, Carolyn (Ms.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 38/41 Rpt: 41/128 Filer ID 2 FILER NAME Cohen, Ellen Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: Date \$200.00 05/07/2015 Verveer, Chaja (Ms.) 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546 Employer (See Instructions) Principal occupation / Job title (See Instructions) retired retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 06/29/2015 Wagner, Jane (Ms.) Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Principal occupation / Job title (See Instructions) self business owner Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$72.00 06/30/2015 Waldman, Syd (Mr.) Contributor address; City; State; Zip Code Houston, TX 77096 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Funeral Director, Owner Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) Date \$250.00 03/24/2015 Wallace, Barron (Mr.) Contributor address; City; State; Zip Code Houston, TX 77021 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bracewell & Giuliani, LLP Attorney Amount of Contribution (\$) Out-of-state PAC (ID#: Full name of contributor Date \$250.00 Wallace, Tammi (Ms.) 04/27/2015 Contributor address; City; State; Zip Code Houston, TX 77006 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Consultant

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 39/41 Rpt: 42/128 FILER NAME Filer ID Cohen, Ellen Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/09/2015 Wayt, Dariene (Ms.) \$25.00 6 Contributor address; City; State; Zip Code Houston, TX 77008 Employer (See Instructions) Principal occupation / Job title (See Instructions) MKP Consulting Administrative Assistant Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/17/2015 Weekley, Richard (Mr.) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77055 Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer Weekley Properties Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/09/2015 Weiner, Ede (Ms.) \$200.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$500.00 03/06/2015 Winston, Barbara (Ms.) Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$500.00 03/03/2015 Wolff, Melvyn (Mr.) Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Chairman Star Furniture

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 40/41 Rpt: 43/128 Filer ID FILER NAME Cohen, Ellen Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: \$50.00 06/09/2015 Worst, Mary J (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77098 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) retired retired Amount of Contribution (\$) Full name of contributor Date Out-of-state PAC (ID#: \$1,000.00 03/18/2015 Wulfe, Edmund (Mr.) Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Wulfe & Company President Amount of Contribution (\$) Full name of contributor Out-of-state PAC (ID#: Date \$500.00 03/24/2015 Wynn, Claude (Mr.) Contributor address; City; State; Zip Code Houston, TX 77265 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Claude Wynn Interest Real Estate Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$100.00 06/23/2015 Zammito, John (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Rice University Professor Out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$5,000.00 02/19/2015 Zlotnik, Bob (Mr.) Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Retired Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 41/41 Rpt: 44/128 FILER NAME 3 Filer ID Cohen, Ellen Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/19/2015 Zlotnik, Marcie (Ms.) \$5,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 03/24/2015 george, pamela (Ms.) \$100.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Law Professor South Texas College of Law Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 06/29/2015 glosserman, patricia (Ms.) \$50.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/04/2015 modesett, david (Mr.) \$200.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** president vega energy partners, Itd out-of-state PAC (ID#:_ Date Full name of contributor Amount of Contribution (\$) 06/09/2015 \$50.00 speer selber, sara (Ms.) Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** consultant self

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica	at Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 1/84 Rpt: 45/128	Cohen, Ellen	
4	Date	5 Payee name	
	02/27/2015	100 CLUB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	5555 San Felipe St	
		Houston, TX 77056	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		Financial Gift	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	01/08/2015	ADOBE SYSTEMS	
MARKON ST	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.64	345 Park Ave.	
	4		
		San Jose, CA 95110	
Substantions			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expense	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Computer Software	9
	Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	02/09/2015	ADOBE SYSTEMS	
eneroceion.		Payee address; City; State; Zip Code	
	Amount (\$) \$21.64	345 Park Ave.	
	D 21.04	J4J F QIR MYC.	
		San Jose, CA 95110	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	2
		Check if Austin, TX, officeholder living expense Computer Software	
		Computer Software	
	and the second s	Candidate/Officeholder name Office sought Office held	
	Complete <u>QNLY</u> if direct expenditure to benefit C/OI	0	
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID	
	Sch: 2/84 Rpt: 46/128		Cohen, Ellen			
4	Date	5	Payee name			
	03/09/2015		ADOBE SYSTEMS			
6	Amount (\$)	7	Payee address; City; State; Zip Co	de		
	\$21.64		345 Park Ave.			
parciowalities		on the same of the	San Jose, CA 95110			
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description	
Second and a second	OF EXPENDITURE	The contract of the contract o	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
spenieskość.	EXPENDITURE				Computer Software	
MATCH SECTION S		*Optional State of the State of			and the second s	
-	Complete ONLY if direct	<u></u>	Candidate/Officeholder name Office sou	ght	Office held	
9	expenditure to benefit C/OI			~ .		
	Date	T	Dayon name	ere anno anno anno anno anno anno anno ann		
BODO CODE BODO	Date 04/08/2015	0.0000000000000000000000000000000000000	Payee name ADOBE SYSTEMS			
		-		nde		
Yapana	Amount (\$) \$21.64	opposite and a second	Payee address; City; State; Zip Co 345 Park Ave.	-wii		
NO SERVICE DE LA CONTRACTOR DE LA CONTRA	\$21.64	Separate Control on	J+J Fair AVC.			
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			San Jose, CA 95110	/£.\		
NAME OF THE OWNER,	PURPOSE OF	(a	Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.		
Wilderson State	EXPENDITURE	vydypolotichian.	Office Overhead/Rental Expense	or designation of the last of	Check if Austin, TX, officeholder living expense	
ACCORDANCE.		and company.		NAME OF TAXABLE PROPERTY.	Computer Software	
Waterstein		unand skides (wilder)				
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ight	Office held	
dynamics and	expenditure to benefit C/O	H				
	Date		Payee name			
NOTICE MANAGEMENT OF THE PARTY	05/08/2015	0.0000000000000000000000000000000000000	ADOBE SYSTEMS	matoka		
	Amount (\$)	Ť	Payee address; City; State; Zip Co	ode		
NAMES OF TAXABLE PARTY.	\$21.64	exicatelessiste	345 Park Ave.			
estations (in		departments.				
NA STATEMENT STA		Name of the local division of the local divi	San Jose, CA 95110			(national literate) in the literature in the
New York	PURPOSE	1(6	Category (See Categories listed at the top of this schedule)	(b)	Description	
ADDRESS OF THE PARTY OF THE PAR	OF EXPENDITURE		Office Overhead/Rental Expense	National States	Check if travel outside of Texas. Complete Schedule T.	
NAME OF TAXABLE PARTY O	EAFERMIUKE	*Applicate philade		socialistics:	Check if Austin, TX, officeholder living expense Computer Software	
National States		varosentestati		specialisadas	wittpater weither	
Company and a second		(Company)	Candidate/Officeholder name Office so	Inh+	Office held	
Contemporaries	Complete <u>ONLY</u> if direct expenditure to benefit C/C)H	CandidaterOnicendide frame Onice so	ى ئادى بىلى سىلىدىكى سىلىدىكى بىلىدىكى بىلىدىكى بىلىدىكى بىلىدىكى بىلىدىكى بىلىدىكى بىلىدىكى بىلىدىكى بىلىدىك ئىلىدىكى بىلىدىكى بى		
		passojostsi				
Nacional Services						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By - Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense
Printing Expense
Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/84 Rpt: 47/128 Cohen, Ellen

EXPENDITURE CATEGORIES FOR BOX 8(a)

4	Date 06/08/2015	5 Payee name ADOBE SYSTEMS
Ø	Amount (\$) \$21.64	7 Payee address; City; State; Zip Code 345 Park Ave. San Jose, CA 95110
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 01/21/2015	Payee name AMAZON
A CONTRACTOR OF THE PARTY OF TH	Amount (\$) \$15.63	Payee address; City; State; Zip Code 1516 2nd Ave Seattle, WA 98101
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/12/2015	Payee name AMAZON
	Amount (\$) \$32.69	Payee address; City; State; Zip Code 1516 2nd Ave Seattle, WA 98101
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

· ·	Candidate/Officeholder/Politics	al Committee Legal Services Salaries The Instruction Guide explains how to c	/Wages/Contract Labor OTHER (enter a category not listed above) complete this form.
1	Total pages Schedule F1: Sch: 4/84 Rpt: 48/128	2 FILER NAME Cohen, Ellen	3 Filer ID
4	Date 05/08/2015	5 Payee name AMAZON	
	Amount (\$) \$31.54	7 Payee address; City; State; Zip C 1516 2nd Ave Seattle, WA 98101	ode
3	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sor	ught Office held
	Date 05/11/2015	Payee name AMAZON	
	Amount (\$) \$37.28	Payee address; City; State; Zip Co 1516 2nd Ave Seattle, WA 98101	ode
ARGUMENTO:	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
		Office Overhead/Rental Expense Candidate/Officeholder name Office sou	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
	EXPENDITURE Complete ONLY if direct	Office Overhead/Rental Expense Candidate/Officeholder name Office sou	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office south Payee name AMAZON Payee address; City; State; Zip Co. 1516 2nd Ave	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies Ught Office held
	Complete ONLY if direct expenditure to benefit C/OFDate 05/11/2015 Amount (\$) \$88.36	Candidate/Officeholder name Office south Payee name AMAZON Payee address; City; State; Zip Co	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies Ught Office held
	Complete ONLY if direct expenditure to benefit C/OFDate 05/11/2015 Amount (\$) \$88.36	Candidate/Officeholder name Office south Payee name AMAZON Payee address; City; State; Zip Co. 1516 2nd Ave	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies Ught Office held
	Complete ONLY if direct expenditure to benefit C/OFDate 05/11/2015 Amount (\$) \$88.36	Candidate/Officeholder name Office south Payee name AMAZON Payee address; City; State; Zip Co. 1516 2nd Ave Seattle, WA 98101 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Office sou	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies Office held Ode (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

8	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME	-	3 Filer ID	
al estentions	Sch: 5/84 Rpt: 49/128	Cohen, Ellen			
4	Date	5 Payee name			Винестропал
	05/20/2015	AMAZON			
6	Amount (\$)	7 Payee address; City; State; Zip C	ode		Reinfallespess
	\$69.99	1516 2nd Ave			
STATE OF THE PROPERTY OF THE P		The second secon			
		Seattle, WA 98101			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	resistance
ATTERNESS CONTRACTOR	OF EXPENDITURE	Office Overhead/Rental Expense	and Designation	Check if travel outside of Texas. Complete Schedule T.	
		Orași Cara de		Check if Austin, TX, officeholder living expense Supplies	
				Supplies	
9	Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u>	Office held	esentaiones
	expenditure to benefit C/O		- 8	Shide Hold	
=	Date	Payee name			Religionale de entre de la companya del companya del la companya del companya de la companya de la companya de la companya del companya de la companya del compan
	06/23/2015	AMAZON			
	Amount (\$)	Payee address; City; State; Zip Ci	ode		(CORPORATION)
	\$68.82	1516 2nd Ave	000		
		Seattle, WA 98101			
*********	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description	ACCORDINATE OF THE PERSON NAMED IN
	OF		1 4	Check if travel outside of Texas. Complete Schedule T.	
		Office Overhead/Rental Expense	Name of the last	Check it have outside of Texas. Cumplete Schedule 1.	
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense	
		Office Overhead/Rental Expense		leaned	
Managara	EXPENDITURE			Check if Austin, TX, officeholder living expense Supplies	файланный
		Candidate/Officeholder name Office sou		Check if Austin, TX, officeholder living expense	прайозначания
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou		Check if Austin, TX, officeholder living expense Supplies	agilintanandasansi Bhonesidali (1886)
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soul		Check if Austin, TX, officeholder living expense Supplies	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015	Candidate/Officeholder name Office sou Payee name AMERICAN LEADERSHIP F	ught	Check if Austin, TX, officeholder living expense Supplies	
Managah Najari Managah Najari Managah Managah Managah Managah	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$)	Candidate/Officeholder name Office soul Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Co	ught	Check if Austin, TX, officeholder living expense Supplies	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015	Candidate/Officeholder name Office soul Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Co	ught	Check if Austin, TX, officeholder living expense Supplies	A SQUAREST AND A SQUA
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$)	Candidate/Officeholder name Office south Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Co. 3101 Richmond Ave #140	ught	Check if Austin, TX, officeholder living expense Supplies	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) \$100.00	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Cot 3101 Richmond Ave #140 Houston, TX 77098	ight	Check if Austin, TX, officeholder living expense Supplies Office held	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) \$100.00	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Co. 3101 Richmond Ave #140 Houston, TX 77098 (a) Category (See Categories listed at the top of this schedule)	ight	Check if Austin, TX, officeholder living expense Office held Description	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) \$100.00	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Cot 3101 Richmond Ave #140 Houston, TX 77098	ight	Check if Austin, TX, officeholder living expense Supplies Office held	Appellinentensen
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) \$100.00	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Co. 3101 Richmond Ave #140 Houston, TX 77098 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	ght ode	Check if Austin, TX, officeholder living expense Supplies Office held Description Check if travel outside of Texas. Complete Schedule T.	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Cot 3101 Richmond Ave #140 Houston, TX 77098 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	ght de (b)	Check if Austin, TX, officeholder living expense Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Cot 3101 Richmond Ave #140 Houston, TX 77098 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sould	ght (b)	Check if Austin, TX, officeholder living expense Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Cot 3101 Richmond Ave #140 Houston, TX 77098 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sould	ght (b)	Check if Austin, TX, officeholder living expense Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership	
	Complete ONLY if direct expenditure to benefit C/OI Date 01/30/2015 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sould Payee name AMERICAN LEADERSHIP F Payee address; City; State; Zip Cot 3101 Richmond Ave #140 Houston, TX 77098 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sould	ght (b)	Check if Austin, TX, officeholder living expense Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica		al Services e Instruction Guide explains		ges/Contract Labor	OTHER (enter a category not listed above)	
1	Total pages Schedule F1: Sch: 6/84 Rpt: 50/128	2 FILER NAME Cohen, Ellen		од организация под открытительного под открыти	3	Filer ID	
4	Date 04/27/2015		LING REGENCY				NANOHOLOGO
6	Amount (\$) \$9.00	7 Payee address; 611 Clay St Houston, TX 7		e; Zip Code			
8	PURPOSE OF EXPENDITURE	(a) Category (see c Travel Out of E	ategories listed at the top of this sch District	nedule) (Received.	side of Texas. Complete Schedule T. , officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeh	older name	Office sough		Office held	
	Date 04/16/2015	Payee name ARTISTA					
	Amount (\$) \$50.53	Payee address; 800 Bagby St Houston, TX 7		; Zip Code			
	PURPOSE OF EXPENDITURE	(a) Category (See C Food/Beverage	ategories listed at the top of this sch e Expense	nedule) (k	lowed	side of Texas. Complete Schedule T. K, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeh	older name (Office sough	t	Office held	
	Date 06/15/2015	Payee name BARNABY'S C	AFE				
	Amount (\$) \$114.27	Payee address; 414 W Gray St Houston, TX 7	•	; Zip Code			
	PURPOSE OF EXPENDITURE		stegories listed at the top of this sch	redule) (b	Bossel	ide of Texas. Complete Schedule T. , officeholder living expense	audition in
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeh	older name (Office sough		Office held	
							ALL PROPERTY OF THE PERSONS NAMED IN

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID
	Sch: 7/84 Rpt: 51/128		Cohen, Ellen		
4	Date	5	Payee name	unga kayaran katalan kanan	
	03/30/2015		BLACK WALNUT CAFE		
6	Amount (\$)	7	Payee address; City; State; Zip	Code	
	\$17.27		5510 Morningside Dr		
			Houston, TX 77005		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	,	Food/Beverage Expense	and the same of th	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Take on Assista	Check if Austin, TX, officeholder living expense
				Adaption	Meeting
and parents in		L		<u></u>	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name Office s	sought	Office held
	CAPCINGTO TO DOTTON OF C.				
	Date		Payee name		
	02/18/2015		BRC HOUSTON		
	Amount (\$)		Payee address; City; State; Zip	Code	
	\$153.06	-	519 Shepherd Dr		
		rice contract of the contract			
			Houston, TX 77007		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b	Description
	OF EXPENDITURE		Food/Beverage Expense	- Constitution	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
and discontinued				**************************************	Meeting
				SCHOOLSE	
-	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office s	sought	Office held
	expenditure to benefit C/OI				
	Date	ľ	Payee name		
	01/05/2015	Della Company	BULLSEYE STORAGE		
-		<u> </u>	Payee address; City; State; Zip	Code	
	Amount (\$) \$434.00	e de la company	3200 W. Dallas	0000	
	\$404.00	Servenses.	Jeor vv. sumus		
		Name and Associated Street, Total Street, To	Houston, TX 77019		
<u> </u>		L.		Tax	
	PURPOSE OF	[(a)	Category (See Categories listed at the top of this schedule)	[(0)	Description Check if travel outside of Texas. Complete Schedule T.
internation	EXPENDITURE	0	Office Overhead/Rental Expense	WOODS WAS A STATE OF THE STATE	Check if Austin, TX, officeholder living expense
				SOCIEDAN	Storage
		PROPERTY AND ADDRESS OF THE PROPERTY A		Assetzencial passa.	
	Complete ONLY if direct		Candidate/Officeholder name Office :	sought	Office held
	expenditure to benefit C/OI	H			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

L	The Instruction Guide explains how to complete this form.						
44	Total pages Schedule F1:			3 Filer ID			
and the second	Sch: 8/84 Rpt: 52/128	Cohen, Ellen		NA ANALASA ANA			
4	Date	5 Payee name	å et e er gallander og er		of the Control of the		
	02/03/2015	BULLSEYE STORAGE	BULLSEYE STORAGE				
6	Amount (\$)	7 Payee address; City; State; Zip C	ode				
	\$434.00	3200 W. Dallas					
		Houston, TX 77019					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	T _(b)	Description	MARINE SERVICE		
	OF EXPENDITURE	Office Overhead/Rental Expense	7.0	Check if travel outside of Texas. Complete Schedule T.			
	LATELIANI ONE	The state of the s	anticon Malicons	Check if Austin, TX, officeholder living expense			
		of extensions	Distribution (Storage			
diam'r.			<u> </u>				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soil	ught	Office held			
	Date	Payee name	MANAGEMENT CONTRA		William Control Control		
penéssypon	03/04/2015	BULLSEYE STORAGE					
	Amount (\$)	Payee address; City; State; Zip Co	ode				
	\$434.00	3200 W. Dallas					
		Houston, TX 77019					
	DISCORP		warmen and the same of				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T.			
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	OUTVILLIANCE DAMAGE	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	OF	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	DEFECTION DESCRIPTION	Check if travel outside of Texas. Complete Schedule T.			
ènsebou	OF EXPENDITURE	Office Overhead/Rental Expense	Made and the construction of the construction	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage	internative de		
	OF	Office Overhead/Rental Expense Candidate/Officeholder name Office sou	Made and the construction of the construction	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Office Overhead/Rental Expense Candidate/Officeholder name Office sou	Made and the construction of the construction	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Office Overhead/Rental Expense Candidate/Officeholder name Office sou Payee name	Made and the construction of the construction	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015	Office Overhead/Rental Expense Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE	Made and the construction of the construction	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015 Amount (\$)	Office Overhead/Rental Expense Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015	Office Overhead/Rental Expense Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015 Amount (\$)	Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015 Amount (\$)	Office Overhead/Rental Expense Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Or Date 04/02/2015 Amount (\$) \$434.00	Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Of Date 04/02/2015 Amount (\$) \$434.00	Candidate/Officeholder name Office south Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019	ght	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage Office held Description Check if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 04/02/2015 Amount (\$) \$434.00 PURPOSE OF	Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019 (a) Category (See Categories listed at the top of this schedule)	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/Ol Date 04/02/2015 Amount (\$) \$434.00 PURPOSE OF	Candidate/Officeholder name Office sou Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019 (a) Category (See Categories listed at the top of this schedule)	ght de	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage Office held Description Check if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015 Amount (\$) \$434.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office soul Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019 (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	ght (b) [Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
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	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015 Amount (\$) \$434.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office sour Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Office sour	ght (b) [Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 04/02/2015 Amount (\$) \$434.00 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office sour Payee name BULLSEYE STORAGE Payee address; City; State; Zip Co 3200 W. Dallas Houston, TX 77019 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Office sour	ght (b) [Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage Office held Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense is Made By Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 9/84 Rpt: 53/128	Cohen, Ellen
4	Date	5 Payee name
	05/04/2015	BULLSEYE STORAGE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$434.00	3200 W. Dallas
		Houston, TX 77019
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI LIMITORE	Check if Austin, TX, officeholder living expense Storage
		Storage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/OI	Caradata Cinconstant Inchis
	Date	Payee name
	06/03/2015	BULLSEYE STORAGE
SALES CONTRACTOR OF THE PARTY O	Amount (\$)	Payee address; City; State; Zip Code
	\$434.00	3200 W. Dallas
	4.0	
		Houston, TX 77019
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Storage
***********	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
ominiments on more according	Date	Payee name
	01/16/2015	Bluehost
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.00	560 Timpanogos Pkwy
		Orem, UT 84097
end publica	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	The state of the s	Website Hosting
		TO THE STATE OF TH
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
a page a service		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Political						
		The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID					
	Sch: 10/84 Rpt:	Cohen, Ellen					
4	Date	5 Payee name					
District of the Control of the Contr	06/22/2015	Boyett, Brooke (Ms.)					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,000.00	1609 Castle Ct.					
		#2					
		Houston, TX 77006					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
)	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
***************************************		Campaign Services					
_		Candidate/Officeholder name Office sought Office held					
9	Complete ONLY if direct expenditure to benefit C/OI	Cardidate Office food: There					
L							
	Date	Payee name					
	05/15/2015	CAFE GINGER					
	Amount (\$)	Payee address; City; State; Zip Code					
A CONTRACTOR OF THE PARTY OF TH	\$68.16	1952 W Gray St					
escontainos.	:						
TACCAS TO SECURITY OF THE SECU		Houston, TX 77019					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.					
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que seignifica a		Meeting					
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 11/84 Rpt: Cohen, Ellen

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4	Date 01/05/2015	5 Payee name CLEAR
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8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Internet Service
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Loan Repayment/Reimbu
Office Overhead/Rental E

Food/Beverage Expense Polling
Gift/Awards/Memorials Expense Printing
Legal Services Salarie

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

		The Instruction Guide explains how to complete this form.
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-	03/18/2015	5 Payee name CREATESEND.COM
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SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense

Food/Beverage Expense Polling Expense
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Legal Services Salaries/Wages/Contract Labor

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		Houston, TX 77091	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
all and the second	mone, a x anno e x store x a service p roter		Check if Austin, TX, officeholder living expense
			Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
7	expenditure to benefit C/O		Office field
F	Date		
	04/17/2015	Payee name DON JOSE MEXICAN RESTAURANT	
ļ			
	Amount (\$)	Payee address; City; State; Zip Code	
The second secon	\$39.92	5305 Antoine Dr	
		Houston, TX 77091	
	PURPOSE OF		Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	03/17/2015	FADIS MEDITERRANEAN	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.88	8383 Westheimer	
	April 2 to provide	4400 440001011101	
		Houston, TX 77063	
Nikippanna-	**************************************		
	PURPOSE OF		Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder fiving expense
		EN CONTRACTOR CONTRACT	Meeting
		COLUMN TO THE CO	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbur 1998

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

COMPONENTS		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 20/84 Rpt:	Cohen, Ellen
4	Date	5 Payee name
	06/29/2015	FEDEX
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$97.43	2455 Rice Blvd
-		Houston, TX 77005
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Mailing/Postage
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
NO CONTRACTOR OF THE PARTY OF T	experionale to benefit C/O	
	Date	Payee name
essentation of	06/30/2015	FLOWERS.COM
	Amount (\$)	Payee address; City; State; Zip Code
	\$61.68	One Old Country Road
		Suite 500
sevence		Carle Place, NY 11514
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Event Appreciation
-		
	Complete ONLY if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
	Date	Payee name
Sorocca	06/11/2015	HOLOCAUST MUSEUM
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	5401 Caroline St
hasiquu		Houston, TX 77004
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	salaminaday	Financial Gift
2NAMOORS INC.		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
SI-State (spa	CAPCIFIED TO DESIGN COP	
ninger-		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 21/84 Rpt:	2 FILER NAME Cohen, Ellen 3 Filer ID
4	Date 06/29/2015	5 Payee name HOME DEPOT
6	Amount (\$) \$96.10	7 Payee address; City; State; Zip Code 10111 Broadway Pearland, TX 77584
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 01/12/2015	Payee name HOOTSUITE MEDIA
	Amount (\$) \$5.99	Payee address; City; State; Zip Code 5 East 8th Avenue Vancouver V5T1R6 Canada
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Communications
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Aprilo (des	Date 02/11/2015	Payee name HOOTSUITE MEDIA
***************************************	Amount (\$) \$6.36	Payee address; City; State; Zip Code 5 East 8th Avenue Vancouver V5T1R6 Canada
	* 1	Payee address; City; State; Zip Code 5 East 8th Avenue
michickinou 500xiii/obo	\$6.36 PURPOSE OF	Payee address; City; State; Zip Code 5 East 8th Avenue Vancouver V5T1R6 Canada (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Cardinate/Oniteriologi/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 22/84 Rpt:	Cohen, Ellen
4	Date	5 Payee name
	03/11/2015	HOOTSUITE MEDIA
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6.36	5 East 8th Avenue
		Vancouver V5T1R6 Canada
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Digital Communications
		Digital Communications
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/OI	
	Date	Payee name
	04/13/2015	HOOTSUITE MEDIA
odnictive.	Amount (\$)	Payee address; City; State; Zip Code
	\$6.36	5 East 8th Avenue
	•	
		Vancouver V5T1R6 Canada
gio co lo meno	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Digital Communications
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	83 - 4 -	
	Date 06/11/2015	Payee name
Nijomajimo)		HOOTSUITE MEDIA
	Amount (\$)	Payee address; City; State; Zip Code
	# n n n l	F F and Path Avenue
	\$6.36	5 East 8th Avenue
	\$6.36	
NYSVAIN KAN		Vancouver V5T1R6 Canada
************	PURPOSE	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) (b) Description
		Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	PURPOSE OF	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) (b) Description
	PURPOSE OF	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Communications Candidate/Officeholder name Office sought Office held
	PURPOSE OF EXPENDITURE	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Communications Candidate/Officeholder name Office sought Office held
	PURPOSE OF EXPENDITURE Complete ONLY if direct	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Communications Candidate/Officeholder name Office sought Office held
	PURPOSE OF EXPENDITURE Complete ONLY if direct	Vancouver V5T1R6 Canada (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Communications Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

		The Instruction Guide	explains how to co	mplete this form.		
1	Total pages Schedule F1:	2 FILER NAME			3 Filer ID	**************************************
	Sch: 23/84 Rpt;	Cohen, Ellen			1000000	
4	Date	5 Payee name				
	05/12/2015	HOOTSUITE MEDIA				
6	Amount (\$)	7 Payee address; City;	State; Zip Co	de	Professional and a state of the	
	\$6.36	5 East 8th Avenue				
		POLICE PROPERTY AND A STATE OF THE POLICE PROPERTY AND A STATE PROPERTY AND A STATE OF THE POLICE PROPERTY AND A STATE OF				
		Vancouver V5T1R6 Canada				
8	PURPOSE	(a) Category (See Categories listed at the top	of this school do	(b) Description	Moderatives in control with principles and extended infrastructural control participation and whether respective principles are controlled in the control participation and the control pa	Alexa Antonio de Successiones
	OF EXPENDITURE	Office Overhead/Rental Expens	e l		el outside of Texas. Complete Schedule T.	
	LAPLIVATIONE	·		SACREMENTS.	in, TX, officeholder living expense	
			e de la companya de l	Digital Com	munications	
SOSTAMULION .						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght	Office held	
	Date	Payee name				
90000000	04/13/2015	HOUSE OF COFFEE BEANS				
	Amount (\$)	Payee address; City;	State; Zip Co	le	And reference of the control of the	
	\$45.50	2348 Bissonnet				
		Houston, TX 77005				
	form of the sale and the sale	f = 1				MATERIAL CONTRACTOR
	PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top- Food/Beverage Expense	of this schedule)	Check if trave	outside of Texas. Complete Schedule T.	
	OF		of this schedule)	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
	OF		of this schedule)	Check if trave		
	OF EXPENDITURE	Food/Beverage Expense		Check if trave Check if Austi Meeting	n, TX, officeholder living expense	
	OF	Food/Beverage Expense Candidate/Officeholder name	of this schedule) Office soug	Check if trave Check if Austi Meeting		
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Food/Beverage Expense Candidate/Officeholder name		Check if trave Check if Austi Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF	Food/Beverage Expense Candidate/Officeholder name Payee name		Check if trave Check if Austi Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS	Office soug	Check if Aust Check if Aust Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$)	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City;		Check if Aust Check if Aust Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS	Office soug	Check if Aust Check if Aust Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$)	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet	Office soug	Check if Aust Check if Aust Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City;	Office soug	Check if Aust Check if Aust Meeting	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13	Candidate/Officeholder name Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of the company of the	Office soug	Check if trave Check if Aust Meeting tht b) Description	n, TX, officeholder living expense Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005	Office soug	Check if travel Check if Aust Meeting tht Check if Laravel Check if travel	n, TX, officeholder living expense Office held outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13	Candidate/Officeholder name Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of the company of the	Office soug	Check if travel Check if Austi Meeting The Check if Austi Check if Austi Check if Austi Check if Austi	n, TX, officeholder living expense Office held	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13	Candidate/Officeholder name Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of the company of the	Office soug	Check if travel Check if Aust Meeting tht Check if Laravel Check if travel	n, TX, officeholder living expense Office held outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OF Date 01/26/2015 Amount (\$) \$39.13 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of the company of the	Office soug	Check if travel Check if Austi Meeting The Check if Lausti Check if Lausti Meeting Check if Lausti Meeting	Office held Office held outside of Texas. Complete Schedule T. h, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of Food/Beverage Expense	Office soug	Check if travel Check if Austi Meeting The Check if Lausti Check if Lausti Meeting Check if Lausti Meeting	n, TX, officeholder living expense Office held outside of Texas. Complete Schedule T.	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of Food/Beverage Expense	Office soug	Check if travel Check if Austi Meeting The Check if Lausti Check if Lausti Meeting Check if Lausti Meeting	Office held Office held outside of Texas. Complete Schedule T. h, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 01/26/2015 Amount (\$) \$39.13 PURPOSE OF EXPENDITURE	Candidate/Officeholder name Payee name HOUSE OF COFFEE BEANS Payee address; City; 2348 Bissonnet Houston, TX 77005 (a) Category (See Categories listed at the top of Food/Beverage Expense	Office soug	Check if travel Check if Austi Meeting The Check if Lausti Check if Lausti Meeting Check if Lausti Meeting	Office held Office held outside of Texas. Complete Schedule T. h, TX, officeholder living expense	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 24/84 Rpt:	Cohen, Ellen
4	Date	5 Payee name
	06/10/2015	HOUSTON ASSOC OF REALTORS
6	Amount (\$) \$45.00	7 Payee address; City; State; Zip Code 3693 Southwest Fwy
		Houston, TX 77027
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Financial Gift
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
etalisimoter Manyiamota	Date	Payee name
	01/21/2015	KROGER
Dispension to	Amount (\$)	Payee address; City; State; Zip Code
	\$21.98	11003 Shadow Creek Pkwy
nesousias,		Pearland, TX 77584
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies
eneronia.		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorare to benefit C/Or	
	Date	Payee name
insvergrouts	03/24/2015	KROGER
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.12	1938 W Gray St
	The state of the s	
na n		Houston, TX 77019
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense
		Supplies
	Associations	
	Complete QNLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	
	anto est distributiva di Pari di Sono est constituti del la giali giali di minimo de confere de la delevizione di sofo est conferencia con incomi con inco	
Parish parish		

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officenoider/Politic	,			
	Total pages Calendale F1	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1: Sch: 25/84 Rpt:	2 FILER NAME Cohen, Ellen 3 Filer ID			
4	Date 03/04/2015	5 Payee name KROGER			
6	Amount (\$) \$55.81	7 Payee address; City; State; Zip Code 440 Studemont St Houston, TX 77007			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
nina andron	Date 06/08/2015	Payee name MAI'S			
	Amount (\$) \$33.65	Payee address; City; State; Zip Code 3403 Milam St Houston, TX 77002			
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	Date 04/29/2015	Payee name MIAS TABLE			
	Amount (\$) \$329.83	Payee address; City; State; Zip Code 31.31 Argonne St Houston, TX 77098			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID					
	Sch: 26/84 Rpt:	Cohen, Ellen		oo doo doo doo doo doo doo doo doo doo					
4	Date	5 Payee name							
	04/22/2015	MIAS TABLE							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$31.39	3131 Argonne St							
		Velocities and the second seco							
		Houston, TX 77098							
8	PURPOSE	(a) Category (See Categories listed at the top of	(this schedule) () Description					
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.					
	EXCERNITORE		ell-granitation	Check if Austin, TX, officeholder living expense					
			siadogenra)	Meeting					
etioniyasiis									
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sough	t Office held					
	Date	Рауее пате							
	05/15/2015	MSFT OFFICE							
	Amount (\$)	Payee address; City;	State; Zip Code						
	\$108.24	OneMicrosoft Way							
		The state of the s							
		Redmond, WA 98052							
personalisa	PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Description					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.					
	OF	S		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	OF	S		Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software					
	OF	Office Overhead/Rental Expense Candidate/Officeholder name		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Office Overhead/Rental Expense Candidate/Officeholder name		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O+Date	Office Overhead/Rental Expense Candidate/Officeholder name Payee name		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/02/2015	Office Overhead/Rental Expense Candidate/Officeholder name Payee name NINO'S	Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software t Office held					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O+ Date 03/02/2015 Amount (\$)	Candidate/Officeholder name Payee name NINO'S Payee address; City;		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software t Office held					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/02/2015	Office Overhead/Rental Expense Candidate/Officeholder name Payee name NINO'S	Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software t Office held					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O+ Date 03/02/2015 Amount (\$)	Candidate/Officeholder name Payee name NINO'S Payee address; City; 2817 W Dallas St	Office sough	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software t Office held					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/02/2015 Amount (\$) \$68.02	Candidate/Officeholder name Payee name NINO'S Payee address; City; 2817 W Dallas St Houston, TX 77019	Office sough State; Zip Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software Office held					
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OFDate 03/02/2015 Amount (\$) \$68.02	Candidate/Officeholder name Payee name NINO'S Payee address; City; 2817 W Dallas St Houston, TX 77019 (a) Category (See Categories listed at the top of	Office sough State; Zip Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Computer Software Office held Description					
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu.
Fees Office Overhead/Rental E

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
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4	Sch: 27/84 Rpt:	Cohen, Ellen						
49	06/23/2015	5 Payee name Nasir, Emily (Ms.)						
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		Bellaire, TX 77401						
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Committee		Legal Services The Instruction Guid	Legal Services Salaries/Wages/Contract Labor OTHER (enter a cate The Instruction Guide explains how to complete this form.					
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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politic		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Printing Expense Printing Expense Salaries/Wages/Contract Labor				Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense

Loan Repayment/Reimbur

Office Overbead/Remote

Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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4	Date 02/06/2015	5 Payee name Net Victories
6	Amount (\$) \$700.00	7 Payee address; City; State; Zip Code PO Box 5013 Austin, TX 78763
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Communications
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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4	Date	5 Payee name
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		San Francisco, CA 94105
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Loan Repayment/Reimbu
Office Overhead/Rental E
Pond/Reverage Expense

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER Content of Content

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 37/84 Rpt: Cohen, Ellen 4 Date Payee name 02/06/2015 Piryx Amount (\$) Payee address; City: State; Zip Code \$5.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/06/2015 Piryx Amount (\$) Payee address; City; State; Zip Code \$2.88 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/07/2015 Piryx Amount (\$) Payee address; City; State; Zip Code \$28.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Conditions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

Advertising Expense
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Consulting Expense
Contributions/ Donations Made By Contributions/ Diffice/buller/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbur Fees Office Overhead/Rental E

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

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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Contributions/ Donations Made By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica	
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1	Total pages Schedule F1: Sch: 46/84 Rpt:	2 FILER NAME Cohen, Ellen 3 Filer ID
4	Date	5 Payee name
	03/08/2015	Piryx
6	Amount (\$)	7 Payee address; City; State; Zip Code
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8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

estappensonici.	Candidate/Officenolder//-ointics	al Committee Legal Services SalanesA The Instruction Guide explains how to co	oTHER (enter a category not listed above) complete this form.
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Conditional Office Adversarial Committee

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	Amount (\$)	Payee address; City; State; Zip Code
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		San Francisco, CA 94103
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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			San Francis	co, CA 94103					
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Contributions/ Diffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice/Indiffice

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
OTHER (enter a category not listed shows)

Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 50/84 Rpt: Cohen, Ellen Date Payee name 03/22/2015 Piryx Amount (\$) Payee address; City; State; Zip Code \$28.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2015 Piryx Amount (\$) Payee address; State; Zip Code City; \$28.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2015 Pirvx City; Amount (\$) Payee address; State; Zip Code \$28.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memonals Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online Fundraising
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wanes/Contract Lahor

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gilt/Awards/Memoriais Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 54/84 Rpt: Cohen, Ellen Date Payee name 04/01/2015 Piryx 6 Amount (\$) Payee address; City; State; Zip Code \$57.50 901 Mission Street San Francisco, CA 94103 **PURPOSE** 2 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete **ONLY** if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/01/2015 Piryx Amount (\$) Payee address; City; State; Zip Code \$287.50 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/13/2015 Piryx Amount (\$) Payee address; City; State; Zip Code \$1.44 901 Mission Street San Francisco, CA 94103 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 56/84 Rpt: Cohen, Ellen Date 5 Payee name 04/21/2015 Piryx Payee address; State; Zip Code Amount (\$) City; \$5.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name 04/21/2015 Piryx Payee address; City; State; Zip Code Amount (\$) \$28.75 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/21/2015 Piryx Amount (\$) Payee address: City; State; Zip Code \$2.88 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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Loan Repayment/Reimbursement Office Overhead/Rental Expense

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SCHEDULE F1

Advertising Expense Accounting/Benking Consulting Expense
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Loan Repayment/Reimbursement Office Overhead/Rental Expense

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

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SCHEDULE F1

Advertising Expense Accounting/Banking ACCURATING SERVICES
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gill/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

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SCHEDULE F1

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

Travel Out of District OTHER (enter a category not listed above)

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Event Expense
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Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out of District
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gilt/Awards/Memoriais Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out of District

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	\$5.75	901 Mission Street
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
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SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Contributions/ Donations Made Committee

Event Expense
Fees
Food/Beverage Expense
Gill/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 Cistrict
OTHER (enter a category and listed physics)

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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gild/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 68/84 Rpt: Cohen, Ellen 4 Date Payee name 06/29/2015 Piryx Amount (\$) Payee address; City; State: Zip Code \$2.88 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Complete **ONLY** if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/29/2015 Piryx Amount (\$) Payee address: State; Zip Code City; \$1.04 901 Mission Street San Francisco, CA 94103 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 06/29/2015 Piryx Payee address; Amount (\$) City; State; Zip Code \$14.38 901 Mission Street San Francisco, CA 94103 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online Fundraising Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

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 Out of District
OTHER (enter a category not listed above)

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1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID
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8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
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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 Gilf/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing 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)

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Polling Expense
Git/Awards/Memorials Expense Printing Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out of District

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Benking Consulting Expense Fees Office Overhead/F
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Calculate Memorials Expense Contributions/ Donations Made By -

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salanes/Wages/Contract Labor

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

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4	Date	5 Payee name					
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8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online Fundraising					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
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	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online Fundraising					
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a cate

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8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
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onecos:		San Francisco, CA 94103
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	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
enstan	expenditure to benefit C/OF	

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 Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhaad/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 con	oplete this form.		
1	Total pages Schedule F1:			3 Filer ID	
	Sch: 76/84 Rpt:	Cohen, Ellen			
4	Date 06/17/2015	5 Payee name RANDALLS STORE			
	Amount (\$)	7 Payee address; City; State; Zip Co.	la .		
0	\$71.95	2075 Westheimer Rd.			
	The state of the s	aviv istaliumini itu.			
	, A.,	Houston, TX 77098			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description		
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	e daye.		Supplies		- 145 - 1
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9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sou	IR	Onice neid	
5 ± 27	Date	Payee name			
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	Amount (\$)	Payee address; City; State; Zip Co	le		
	\$171.88	2075 Westheimer Rd.			
	1	Houston, TX 77098			- 1
		1005011, 1 \ 1 / 090			
pilotta Sangal (sa	PURPOSE		b) Description		
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	OF	(a) Category (see Categories listed at the top of this schedule)	Check if trave		
	OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if trave Check if Austi Supplies	n, TX, officeholder living expense	
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Pees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel Out of District

Gilt/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 77/84 Rpt: Cohen, Ellen 4 Date Payee name 01/21/2015 RANDALLS STORE Amount (\$) Pavee address: City: State: Zip Code \$162.74 2075 Westheimer Rd. Houston, TX 77098 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 05/18/2015 ST BENEDICT CATHOLIC CHURCH Payee address; Amount (\$) State; Zip Code City: \$50,00 4025 Grapevine St Houston, TX 77045 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Memorial Gift Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/04/2015 **STAPLES** Payee address; State; Zip Code Amount (\$) City; \$8.42 1919 Taylor St Houston, TX 77007 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 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:	·			
-Ah	Sch: 78/84 Rpt:	Cohen, Ellen			
4	Date 03/05/2015	5 Payee name STAR PIZZA			
6	Amount (\$) \$38.39	7 Payee address; City; State; Zip Code 77 Harvard Houston, TX 77007			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meeting			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
O	Date 03/16/2015	Payee name Scarborough, Richard (Mr.)			
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 616 Memorial Heights Dr #10313 Houston, TX 77007			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Technology Services			
ement.	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date 04/27/2015	Payee name Square Inc			
	Amount (\$) \$0.49	Payee address; City; State; Zip Code 1455 Market Street San Francisco, CA 94103			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online Fundraising			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Git/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.

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	03/04/2015	8	TARGET				
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6	Amount (\$)	Ĭ	Payee address; City;	State; Zip Co	xue		
	\$62.72		2580 Shearn St				
			Houston, TX 77007				
8	PURPOSE	(a)	Category (See Categories listed at the to	on of this schedule)	(b)	Description	P30777-W-F-P01000-00300
	OF		Office Overhead/Rental Exper			Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE		•			Check if Austin, TX, officeholder living expense	
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9	Complete ONLY if direct		andidate/Officeholder name	Office sou	ght	Office held	ANTENNA DE PRESENTA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE
	expenditure to benefit C/OH	nego.					
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			Austin, TX 78767				
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	PURPOSE	(31)	Category (See Categories listed at the to	in of this schedule)	(D)	Description	
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 80/84 Rpt:	Cohen, Ellen
4	Date	5 Payee name
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6	Amount (\$)	7 Payee address; City; State; Zip Code
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		Houston, TX 77027
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8	PURPOSE OF	The state of Town of Town Complete Cabadida T
	EXPENDITURE	Food/Beverage Expense Check if Travel outside of Texas. Complete Scriedule 1. Check if Austin, TX, officeholder living expense
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9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
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	Date	Payee name
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	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	800 Market St
		San Francisco, CA 94102
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Transportation
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		San Francisco, CA 94102
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
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	expenditure to benefit C/OI	
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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:	2 FILER NAME 3 Filer ID
	Sch: 81/84 Rpt:	Cohen, Ellen
4	Date	5 Payee name
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		Con Francisco CA 04402
		San Francisco, CA 94102
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) Travel In District Check if travel outside of Texas. Complete Schedule T.
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L	03/02/2015	UBER TECHNOLOGIES
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	\$7.96	800 Market St
		San Francisco, CA 94102
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
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		Transportation
_		Office hold
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH		
L	onportance to benefit 6/6/	
Γ	Date	Payee name
	06/26/2015	UBER TECHNOLOGIES
T	Amount (\$)	Payee address; City; State; Zip Code
	\$8.33	800 Market St
		San Francisco, CA 94102
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel Out of District Travel Out of District Travel Out of District
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Transportation
T	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
H		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a care

O5/28/2015 UBER TECHNOLOGIES Amount (\$) Payee address; City; State; Zip Code \$13.63 San Francisco, CA 94102 San Francisco, CA 94102 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation	Sch: 82/84 Rpt: 4 Date 05/28/2015 6 Amount (\$) 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH Date 05/21/2015 Amount (\$) \$44.33 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 01/14/2015 Amount (\$) \$57.46	FILER NAME Cohen, Ellen Payee name UBER TECHNOLOGIES Payee address; City; State; Zip Code 800 Market St San Francisco, CA 94102 Category (See Categories listed at the top of this schedule) Travel Out of District Andidate/Officeholder name Office sought Payee name UNION KITCHEN Payee address; City; State; Zip Code	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation
Sch: 82/84 Rpt: Cohen, Ellen 5 Payee name USER TECHNOLOGIES 6 Amount (\$) 7 Payee address: City; State: Zip Code S00 Market San Francisco, CA 94102 8 PURPOSE OF EXPENDITURE (a) Category (see categories islent at the top of the schedule) Check of Austra, TX, officerbalde strate of Texas, Complete Schedule T. Transportation 9 Complete ONLY if direct expenditure to benefit C/OH Date OF EXPENDITURE (a) Category (see categories islent at the top of the schedule) Check of Austra, TX, officerbalde strate expenditure to benefit C/OH Date OF EXPENDITURE (b) Description Office held Office sought Office held Office held Office held Office held Office held Office held Office Sought Office held Office overhead/Rental Expense Office Sought Office held Offi	Sch: 82/84 Rpt: 4 Date 05/28/2015 6 Amount (\$) 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH Date 05/21/2015 Amount (\$) \$44.33 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 01/14/2015 Amount (\$) \$57.46	Cohen, Ellen Payee name UBER TECHNOLOGIES Payee address; City; State; Zip Code 800 Market St San Francisco, CA 94102 Category (See Categories listed at the top of this schedule) Travel Out of District andidate/Officeholder name Office sought Payee name UNION KITCHEN Payee address; City; State; Zip Code	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation
Date OS/28/2015 S Payee name UBER TECHNOLOGIES	4 Date 05/28/2015 6 Amount (\$) \$13.63 8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH Date 05/21/2015 Amount (\$) \$44.33 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 01/14/2015 Amount (\$) \$57.46	Payee name UBER TECHNOLOGIES Payee address; City; State; Zip Code 800 Market St San Francisco, CA 94102 Category (See Categories listed at the top of this schedule) Travel Out of District andidate/Officeholder name Office sought Payee name UNION KITCHEN Payee address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation
Date Payee name UNION KTCHEN Payee carderess; City; State; Zip Code Conglete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Candidate/Officeholder name Office held Candidate/Officeholder name Office sought Office held Candidate/Officeholder Candidate/Officeholder name Office sought Office held Candidate/Officeholder	9 Complete ONLY if direct expenditure to benefit C/OH PURPOSE OF EXPENDITURE PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O5/21/2015 Amount (\$) \$44.33 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O1/14/2015 Amount (\$) \$57.46	Payee address; City; State; Zip Code 800 Market St San Francisco, CA 94102 Category (See Categories listed at the top of this schedule) Travel Out of District Andidate/Officeholder name Office sought Payee name UNION KITCHEN Payee address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation
7 Payee address; City; State; Zip Code 8 PURPOSE OF EXPENDITURE (a) Category: Gase Categories listed at the top of this schedule) 9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office beld Payee name UNION KITCHEN Amount (\$) Payee address; City; State; Zip Code 12538 Memorial Dr Houston, TX 77024 PURPOSE OF EXPENDITURE (a) Category: Gase Categories listed at the top of this schedule) Food/Beverage Expense Candidate/Officeholder name Office sought Office beld Office held Office h	8 PURPOSE OF EXPENDITURE 9 Complete ONLY if direct expenditure to benefit C/OH Date O5/21/2015 Amount (\$) \$44.33 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O1/14/2015 Amount (\$) \$57.46	Payee address; City; State; Zip Code 800 Market St San Francisco, CA 94102 Category (See Categories listed at the top of this schedule) Travel Out of District andidate/Officeholder name Office sought Payee name UNION KITCHEN Payee address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation
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Date	expenditure to benefit C/OH Date 01/14/2015 Amount (\$) \$57.46		
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Amount (\$) Payee address; City; State; Zip Code \$57.46	Amount (\$) \$57.46 PURPOSE (a)	Payee name	
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PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	PURPOSE (a)	2802 Timmons Ln	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	PURPOSE (a)		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	PURPOSE (a)	Houston, TX 77027	
OF EXPENDITURE Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	0.5		Description
Check if Austin, TX, officeholder living expense		3 , (550 541)	
Mailing/Postage	EXPENDITURE	Office Overhead/Rental Expense	<u></u>
		Office Overhead/Rental Expense	NAOHIOGII IOCTOGO
		Office Overhead/Rental Expense	maing/Pustage
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
experience to benefit GOT	experiunure to benefit C/On		

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made 8 Candidate/Officeholder/Politica	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)				
	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
Sch: 83/84 Rpt:	Cohen, Ellen				
4 Date	5 Payee name				
01/16/2015	USPS				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$128.00	2802 Timmons Ln				
Φ120.00	2002 Hillinons Cit				
	Houston, TX 77027				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
Name and Associated a	Check if Austin, TX, officeholder living expense				
	Mailing/Postage				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/17/2015	USPS				
Amount (\$)	Payee address; City; State; Zip Code				
\$120.00	2802 Timmons Ln				
Ψ120.00	2002 Millions Er				
	Houston, TX 77027				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
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Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/26/2015	VIETOPIA				
Amount (\$)	Payee address; City; State; Zip Code				
\$37.33	5176 Buffalo Speedway				
	Houston, TX 77005				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense Meeting				
	weeting				
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a cate

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID			
	Sch: 84/84 Rpt:	Cohen, Ellen			
4	Date	5 Payee name			
	05/19/2015	WALTRIP RAM BAND			
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1900 W 34th St Houston, TX 77018			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Financial Gift			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	05/08/2015	WESTIN GALLERIA			
	Amount (\$) \$25.00	Payee address; City; State; Zip Code 5011 Westheimer Rd - Houston, TX 77056			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date 01/23/2015	Payee name WESTIN GALLERIA			
	Amount (\$) \$17.00	Payee address; City; State; Zip Code 5011 Westheimer Rd Houston, TX 77056			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking			
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			