



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

**14** C/OH NAME Justin Henry **15** Filer ID (Ethics Commission Filers)

**16** NOTICE FROM POLITICAL COMMITTEE(S) THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

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

<b>17</b> CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29,025.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,917.96.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 14,627.04
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18** AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

Justin Henry  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Milka Reyna Justin Henry, this the 11th day of January, 20 18, to certify which, witness my hand and seal of office.

M Reyna Milka Reyna 4:39  
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

# SUBTOTALS - C/OH

**FORM C/OH  
COVER SHEET PG 3**

**19 FILER NAME**

Justin Henry

**20 Filer ID (Ethics Commission Filers)**

**21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE**

**SUBTOTAL  
AMOUNT**

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 19,025.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 10,000.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 9,917.96
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Justin Henry (Please see attachments)

3 Filer ID (Ethics Commission Filers)

4 Date

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:

2 FILER NAME  
Justin Henry

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 10,000.00

5 Date  
Ongoing

6 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Buck Choate

7 Contributor address; City; State; Zip Code

250 Page Street, San Francisco, CA 94102

8 Amount of Contribution \$  
10,000.00

9 In-kind contribution description  
Media Consultant

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)  
Creative Director

11 Employer (FOR NON-JUDICIAL) (See Instructions)  
Swirl

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of Contribution \$

In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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

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

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$

5 Date

6 Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

8 Amount of Pledge \$

9 In-kind contribution description

7 Pledgor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

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

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E:
<b>2</b> FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial Institution?  Y    N	<b>8</b> Lender address;                      City;        State;        Zip Code	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral  <input type="checkbox"/> none		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address;                      City;        State;        Zip Code	
<b>20</b> Principal Occupation (See Instructions)		<b>21</b> Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial Institution?  Y    N	Lender address;                      City;        State;        Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral  <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address;                      City;        State;        Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
**If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.**





# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F2:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
-----------------------------------	---------------------	--

<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
--	----

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
----------------------------------	---	--

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

--	--

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

# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

6 Address of person from whom investment is purchased; City; State; Zip Code

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

Address of person from whom investment is purchased; City; State; Zip Code

Description of investment

Amount of investment (\$)

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

# EXPENDITURES MADE BY CREDIT CARD

## SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date	<b>6</b> Payee name	
<b>7</b> Amount (\$)	<b>8</b> Payee address; City: State; Zip Code	
<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule H:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)		
<b>4</b> Date	<b>5</b> Business name			
<b>6</b> Amount (\$)	<b>7</b> Business address; City; State; Zip Code			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date	Business name			
Amount (\$)	Business address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date	Business name			
Amount (\$)	Business address; City; State; Zip Code			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
	<table style="width:100%; border:none;"> <tr> <td style="width:50%; border:none;">Candidate / Officeholder name</td> <td style="width:25%; border:none;">Office sought</td> <td style="width:25%; border:none;">Office held</td> </tr> </table>		Candidate / Officeholder name	Office sought
Candidate / Officeholder name	Office sought	Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date	<b>5</b> Payee name	
<b>6</b> Amount (\$)	<b>7</b> Payee address;           City;   State;   Zip Code	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories.)	<b>(b)</b> Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address;           City;   State;   Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address;           City;   State;   Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address;           City;   State;   Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

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

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

## SCHEDULE K

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule K:

**2** FILER NAME

**3** Filer ID (Ethics Commission Filers)

**4** Date

**5** Name of person from whom amount is received

**8** Amount (\$)

**6** Address of person from whom amount is received; City; State; Zip Code

**7** Purpose for which amount is received

Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Check if political contribution returned to filer

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

# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

## SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:

2 FILER NAME

3 Filer ID (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
  Schedule F4   
  Schedule G   
  Schedule H   
  Schedule COH-UC   
  Schedule B-SS

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
  Schedule F4   
  Schedule G   
  Schedule H   
  Schedule COH-UC   
  Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- Schedule A2   
  Schedule B   
  Schedule B(J)   
  Schedule C2   
  Schedule D   
  Schedule F1  
 Schedule F2   
  Schedule F4   
  Schedule G   
  Schedule H   
  Schedule COH-UC   
  Schedule B-SS

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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



# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.  
.. Complete only if "Report Type" on page 1 is marked "Final Report" ..

1 C/OH NAME

2 Filer ID (Ethics Commission Filers)

### 3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.

\_\_\_\_\_  
Signature of Candidate / Officeholder

### 4 FILER WHO IS NOT AN OFFICEHOLDER

.. Complete A & B below *only* if you are not an officeholder. ..

#### A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

#### B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

\_\_\_\_\_  
Signature of Candidate

### 5 OFFICEHOLDER

.. Complete this section *only* if you are an officeholder ..

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

\_\_\_\_\_  
Signature of Officeholder

Date	Card Name	Address	City	Stat	Zip Code	Amount	
1/12/18 21:32	Bryan Hynson	2841 Mission Tejas Dr	Pflugerville	TX	78660	100	Marketing Manager
1/12/18 20:44	Peter C Goudeau III	4 Chelsea Blvd	Houston	TX	77006	150	Wealth Advisor
1/12/18 20:16	Brian G Knowles	2228 Wabash Way	Plano	TX	75074	100	Artist
1/11/18 1:40	Russell Herman	1211 N. Tyler St.	Dallas	TX	75208	100	Attorney
1/11/18 1:00	MEGAN WRIGHT	4025 HOLLAND AVE. #120	DALLAS	TX	75219	50	Account Manager
1/11/18 0:51	Edelmira Garcia	527 Farmers Market Way #2103	Dallas	TX	75201	100	
1/10/18 21:57	Rebecca Acuna	610 S. Cesar Chavez Blvd.	Dallas	TX	75201	250	Director
1/10/18 20:18	Mayrani Velazquez	99 Lamar Street	Terrell	TX	75160	50	
1/9/18 15:32	David B Beshear	5859 Royal Crest Drive	Dallas	TX	75230	250	
1/7/18 18:30	Cassandra Cuellar	808 Linden Loop	Driftwood	TX	78619	100	Attorney
1/6/18 22:48	David Wilner	6317 Goliad Ave	Dallas	TX	75214	100	Senior VP
1/6/18 16:37	Jon Killen	2050 Chevella Dr	Dallas	TX	75232	250	Sales Executive
1/4/18 4:21	Patricia Vela	10935 Royal Pine Dr.	Houston	TX	77023	50	Engineer
1/2/18 1:45	Michael Kwak	3151 S St	Sacramento	CA	95816	250	Pediatrician
12/31/17 20:07	Francis D Mendoza	5605 PONDEROSA ST	COLLEYVILLE	TX	76034	100	Marketing Manager
12/31/17 19:03	Mandisa Price	6303 Revere Place	Dallas	TX	75214	500	Attorney
12/31/17 3:15	Nigel Redmond	1202 regents park court	Desoto	TX	75115	150	
12/31/17 3:14	Richard Thomas	2170 Canton Street	Dallas	TX	75201	100	Business Executive
12/30/17 22:05	Samuel D Parson	5922 Hudson Street	Dallas	TX	75206	200	Attorney
12/30/17 15:29	Charles Arnone	1200 Barton Hills Drive 326	Austin	TX	78704	250	Attorney
12/30/17 14:24	Patricia Arvanitis	3727 princess Ln	Dallas	TX	75229	150	Executive Director
12/29/17 20:30	Yasmeen Belal	614 Delano St	Houston	TX	77003	50	N/A
12/27/17 23:15	Andrew P LeGrand	2120 Becky Lane	Cedar Hill	TX	75104	400	Attorney

12/25/17 18:38	Erin A Grant	5300 Antequera Rd	Albuquerque	NM	87120	500	Coach
12/24/17 16:25	Brent Chaney	700 Huntley Street	Dallas	TX	75214	100	Director
12/22/17 20:43	Eric Igwe	919 Vista Bend Dr.	Houston	TX	77073	100	Program Manager
12/22/17 4:21	Christopher Hollins	4396 Harvest Lane	Houston	TX	77004	500	Manager
12/22/17 2:29	Ernest McGowen	8201 Costin Dr	Richmond	VA	23229	200	Professor
12/22/17 2:27	Konavis Smith	PO BOX 303484	AUSTIN	TX	78703	100	Director
12/22/17 2:02	Shannon Stokes	4512 Center Street	Houston	TX	77007	100	Attorney
12/22/17 1:52	Kara Smith	4316 Roseneath Drive	Houston	TX	77021	40	N/A
12/22/17 1:17	Mewael Ghebremichael	4063 Aberdeen Way	Houston	TX	77025	250	Exec. VP
12/22/17 0:07	Derrick Sherrard	13222 Barkley Bend Lane	Houston	TX	77044	150	Mortgage Officer
12/21/17 23:41	Iheanacho Azuike	5735 Genoa Springs Ln	Sugar Land	TX	77479	500	COO
12/21/17 23:17	Marchris G. Robinson	Po Box 22521	Houston	TX	77227	150	N/A
12/21/17 0:00	Jai Collier	2609 Quiet Arbor Lane	Pearland	TX	77581	100	Attorney
12/21/17 0:00	Alexivent Clinical Solutions,	401 Louisiana St. Unit 601	Houston	TX	77002	200	Pharmacist
12/21/17 0:00	Rohanna J. Brooks-Sykes	18426 Bivens Bend	Spring	TX	77379	100	School Counselor
12/21/17 0:00	Justin Joseph Rogers	1101 Armstrong Lane	Pearland	TX	77584	1500	DJ/Music Producer
12/21/17 0:00	Lonnie R. Knowles	1001 Texas St. Suite 720	Houston	TX	77002	500	Attorney
12/21/17 0:00	Christopher Pramasionwu	11731 Green Colling Park Drive	Houston	TX	77047	300	Pharmacist
12/21/17 0:00	Gregory and Andria Labove	14326 Andrews Ridge Lane	Humble	TX	77396	100	Landman and Teacher
12/21/17 0:00	Kirsten and Rubin White	13723 Slate Mountain Lane	Houston	TX	77044	200	Attorney and HPD Officer
12/16/17 6:43	Ayanna Linton	3225 Woodland Park Dr	Houston	TX	77082	50	Accountant
12/15/17 14:28	Amos Olubunmi	4626 Willow St.	Houston	TX	77401	100	Attorney
12/15/17 14:01	Tanya R Cintron	1950 E. Tremont Avenue	Bronx	NY	10462	50	Manager

12/15/17 2:46	Obinna C Ihekweazu	2601 Gramercy St. #3103	Houston	TX	77030	50	N/A
12/15/17 2:30	Cristy Cross	34 Dakota Crescent	Singapore		399936	150	Attorney
12/14/17 21:07	Edbreion T Howard	105 Lee Trevino Cove	Round Rock	TX	78664	200	Analyst
12/13/17 3:46	Maria G Vega	1211 N. Tyler St.	Dallas	TX	75208	50	Attorney
12/9/17 2:47	Christian menefee	5163 oasis park	Houston	TX	77021	50	Attorney
11/28/17 0:04	Robert Little	3623 Princeton Avenue	Dallas	TX	75205	500	Partner
11/26/17 23:33	Warren Seay	100 Florida Ave NE	Washington	DC	20002	100	Attorney
11/25/17 14:06	Victor D. Vital	905 W. Pleasant Run Road	DeSoto	TX	75115	500	Partner
11/21/17 20:33	Christopher A Kelly	6009 Arbroath Drive	Clinton	MD	20735	100	N/A
11/21/17 20:09	Peter D Brundage	6613 Golf Dr	Dallas	TX	75205	500	Managing Director
11/21/17 20:05	Rick Lacher	100 Crescent Court	Dallas	TX	75201	500	Managing Director
11/18/17 20:54	Whitney Muse	7327 14th St NW	Washington	DC	20012	50	Analyst
11/17/17 0:30	Barbara R Barreno-Paschall	5526 S Blackstone Ave Unit 1	Chicago	IL	60637	50	Attorney
11/15/17 22:16	Amaechi Egwuagu	105 Country View	Garland	TX	75043	50	Teacher
11/15/17 14:50	Norma T Mendoza	1304 Pineridge Avenue	Houston	TX	78503	200	N/A
11/13/17 0:00	Olga Sepulveda	604 Mt. Auburn Ave.	Dallas	TX	75223	100	Custodian
11/13/17 16:22	Trisha Windham	606 Monssen Dr	DALLAS	TX	75224	1000	Exec. VP
11/7/17 22:54	Catherine Moran	70 E Briar Hollow Lane	Houston	TX	77027	50	Attorney
11/6/17 6:05	Malcolm E Brown	2950 Portage Bay West	Davis	CA	95616	100	Managing Director
11/5/17 12:12	Christian D Pulcini	1183 Putnam Boulevard	Wallingford	PA	19086	100	Pediatrician
11/3/17 0:00	Lonnie R. Knowles	1001 Texas St. Suite 720	Houston	TX	77002	500	Attorney
11/2/17 22:57	Derek B Kennedy	5950 Bowman Rd	E Syracuse	NY	13057	200	Doctor
10/30/17 21:54	Sasha M Moreno	4159 FLORENCE DRIVE	IRVING	TX	75038	75	Attorney
10/26/17 14:45	Steven A Drake	PO Pox 994	Magnolia	TX	77353	300	Project Manager
10/17/17 15:49	Tanya Makany	1510 New Urban Way	Houston	TX	77047	50	External Affairs
10/16/17 14:38	Joli A Robinson	P.O Box 397971	Dallas	TX	75339	100	Manager

10/16/17 0:49	Barry Howard	2107 Post Wood Lane	Arlington	TX	76018	150	N/A
10/15/17 10:39	Buck Choate	250 Page Street, Apt 1	San Francisco	CA	94102	5	Creative Director
10/9/17 20:44	Justin Henry	1006 Shadyside Lane	Dallas	TX	75223	25	Attorney
10/4/17 23:03	Keron A Wright	6915 Santa Monica Dr, Dallas	Dallas	TX	75223	150	Attorney
10/3/17 15:54	Dr. James Plinckney II	8222 Douglas Ave, Suite 700	Dallas	TX	75225	300	Doctor
10/1/17 15:51	Justin Henry	1006 Shadyside Lane	Dallas	TX	75223	25	Attorney
9/30/17 20:04	Ricksha L. Wilson	208 Brittany Farms Rd	New Britain	CT	6053	200	Pediatrician
9/27/17 14:44	Byron	3027 Southland	Dallas	TX	75215	25	N/A
9/22/17 16:50	Yvonne R Grant	7204 Forestburg Dr	Arlington	TX	76001	250	Loan Officer
9/19/17 15:50	Shannon D Smith	7109 Stone Villa Circle	North Richland Hills	TX	76182	100	IT Security Officer
9/12/17 18:16	Chiedozie E Okafor	5522 Maple Ave.	Dallas	TX	75235	100	Consultant
9/11/17 17:47	Matthew J Robinson	17349 SW Chris St	Beaverton	OR	97078	50	Manager
9/4/17 14:35	Jon Bailey	1720 grand ave pkwy 9101	Pflugerville	TX	78660	100	Principal
9/1/17 0:00	Russell Herman	1211 N. Tyler St.	Dallas	TX	75208	75	Attorney
9/1/17 0:00	Wilton J. Hollins	4512 Atlanta Drive	Plano	TX	75093	250	HR Leadership
8/31/17 16:15	Iman Fariior	5835 Indian Trl	Houston	TX	77057	250	Asset Manager
8/31/17 12:08	Jeana Foxman	1811 Tucker St	Dallas	TX	75214	100	Associate
8/30/17 20:26	Jeffrey A. Chapman	4851 Harry's Lane	Dallas	TX	75229	1000	Partner
8/27/17 3:50	Montserrat Garibay	1401 cripple creek	Austin	TX	78758	150	
8/26/17 2:20	Buck Choate	21 E Center, 203	Fayetteville	AR	72701	5	Creative Director
8/22/17 1:15	Andrew C Hill	1608 14th Street	Oakland	CA	94607	25	CEO
8/9/17 22:00	Abel Mulugheta	1139 Hidden Ridge Dr.	Mesquite	TX	75181	250	General Counsel
7/31/17 15:47	Richard Soto	3311 Rogers Rd #2104	Austin	TX	78758	100	CEO
7/28/17 2:42	Chasity W Henry	1006 Shadyside Ln	Dallas	TX	75223	25	Attorney



Filer Name	Date	Payee Name	Amount	Payee Address	Purpose of Expenditure
Justin Henry	9/22/17	Texas Democratic Party	\$640.00	1106 Lavaca Street, Austin Texas 78701	Fees
	9/28/17	Matthew Hall	\$500.00	6503 Buff Springs Road, Apt. 216, Austin, Texas 78744	Consulting Expense
	10/3/17	Bank of Texas	\$34.20	4262 Live Oak Street, Dallas, Texas 75204	Accounting/Banking
	10/10/17	Dallas County Elections Department	\$143.00	2377 N. Stemmons Fwy, Dallas, Texas 75207	Fees
	10/12/17	Trophies, Inc.	\$25.87	4321 Live Oak Street, Dallas, Texas 75204	Printing Expense
	10/16/17	K&R Screen Graphics	\$400.00	3915 Main Street	Printing Expense
	11/2/17	Matthew Hall	\$500.00	6503 Buff Springs Road, Apt. 216, Austin, Texas 78744	Consulting Expense
	11/3/17	MetroPCS	\$136.59	5509 E. Grand Avenue, Dallas, Texas 75223	Office Overhead
	12/5/17	Matthew Hall	\$500.00	6503 Buff Springs Road, Apt. 216, Austin, Texas 78744	Consulting Expense
	12/7/17	MetroPCS	\$59.00	5509 E. Grand Avenue, Dallas, Texas 75223	Office Overhead
	12/21/17	Matthew Hall	\$500.00	6503 Buff Springs Road, Apt. 216, Austin, Texas 78744	Consulting Expense
	12/28/17	Edwards and Patterson	\$1,403.13	203 S. Beltline Road, Irving, Texas 75060	Printing Expense
	1/8/18	Resources Assistant Corporation	\$4,000.00	N/A	Office Overhead/Rental Expense
	1/9/18	James Virden	\$240.00	3425 Hacienda Drive, Dallas, Texas 75233	
	1/9/18	Jazzere Jimerson	\$80.00	717 Beachwood Drive, DeSoto, Texas 75115	
	1/9/18	Vondrell Estell	\$80.00	717 Beachwood Drive, DeSoto, Texas 75115	

	7/17/17- 1/15/18	Stripe.com	\$676.17	N/A	Fees
		<b>Total</b>	<b>\$9,917.96</b>		