

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT


FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Justin Henry	15 Filer ID (Ethics Commission Filers)
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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"/> Additional Pages	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

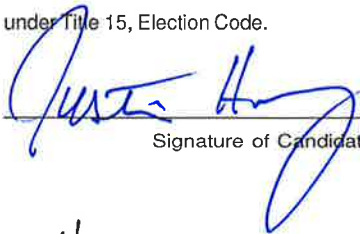
17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 75.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$5,125
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$202.28
	4. TOTAL POLITICAL EXPENDITURES	\$202.28
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$4922.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT



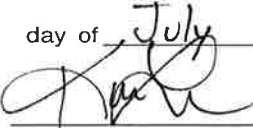
AFFIX NOTARY STAMP / SEAL ABOVE

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



 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Justin Henry, this the 17th day of July, 2017, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Kenncy Lagos

 Printed name of officer administering oath

Financial Advisor

 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 checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$
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 checked="" 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		3 Filer ID (Ethics Commission Filers)
4 Date 6/14/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chasity Henry 6 Contributor address; City; State; Zip Code 1006 Shadyside Lane, Dallas, Texas 75223	7 Amount of contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Senior Legal Counsel		9 Employer (See Instructions) Dr. Pepper/Snapple Group
Date 6/23/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wadell Henry Contributor address; City; State; Zip Code 1105 Bluebonnet Hills Drive, Ennis, Texas 75119	Amount of contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) N/A; Retired		Employer (See Instructions)
Date 7/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randall Clark Contributor address; City; State; Zip Code 68 Bradhurst Avenue, Apt. 8H, New York, NY 10039	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Gunderson Dettmer Stough Villeneuve Franklin & Hachigian, LLP
Date 7/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregory Labove Contributor address; City; State; Zip Code 14326 Andrews Ridge Lane, Humble, Texas 77396	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Landman		Employer (See Instructions) Fieldwood Energy LLC

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Justin Henry		3 Filer ID (Ethics Commission Filers)
4 Date 7/16/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tristan Boyd 6 Contributor address; City; State; Zip Code 399 Mara Lane, Red Oak, Texas 75154	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions)
Date 7/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawit Mulugheta Contributor address; City; State; Zip Code 3112 Tom Miller Street, Austin, Texas 78723	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Sports Agent		Employer (See Instructions) Athlete's First
Date 7/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) C.C. Melvin Ike Contributor address; City; State; Zip Code 146 West 57th Street, Unite 72E, New York, NY 10019	Amount of contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Third Point
Date 7/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yvonne Smith Contributor address; City; State; Zip Code 2103 Post Wood Lane, Arlington, Texas 76018	Amount of contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) N/A		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.

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:	2 FILER NAME Justin Henry	3 Filer ID (Ethics Commission Filers)
4 Date 04/20/2017	5 Payee name GoDaddy.com	
6 Amount (\$) \$181.34 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 14455 N. Hayden Road, #219 Scottsdale, AZ 85260	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 06/28/2017	Payee name GoDaddy.com	
Amount (\$) \$12.17 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14455 N. Hayden Road, #219 Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date Ongoing during reporting period	Payee name Stripe	
Amount (\$) \$202.28 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 185 Berry Street, Suite 550, San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Donation transaction fees <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED