CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

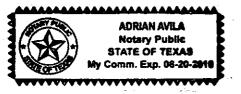
FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guil	be explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00067874	2 PAGE # 1 of 55				
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mr. Robert	MI	OFFICE USE ONLY Date Received ~				
, ww.	NICKNAME LAST Thomas	SUFFIX	AUST				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	P.O. Box 29233 Austin, TX 78755	CITY; STATE; ZIP CODE	AUSTIN CITY RECEIV 111				
Change of Address	Adsiii, 17.70733		Receipt # Amount				
5 CAMPAIGN	MS / MRS / MR FIRST		Date Processed				
TREASURER NAME	Mr. Richard	···					
NAME	NICKNAME LAST Mendoza	SUFFIX	Date Imaged				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT Richard Mendoza CPA 2512 IH 35 South, Ste. 340 Austin, TX 78704	/SUITE#; CITY; STATE;	ZIP CODE				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 708-1690	EXTENSION					
8 REPORT TYPE	January 15 30th day before	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 Year	Month Day	Year				
	03/10/2014	06/30/20	14 				
10 ELECTION	ELECTION DATE ELECTION Month Day Year Pr	IN TYPE imary Runoff X	General Special				
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) City Council District					
GO TO PAGE 2							

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 **CANDIDATE / OFFICEHOLDER REPORT:** FORM C/OH **SUPPORT & TOTALS** COVER SHEET PG 2 13 C/OH NAME Thomas, Robert (Mr.) 14 ACCOUNT # (Ethics Commission filers) 00067874

			0000,0,4	
15 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the car nout the candidate's or officeholder's knowledge or consent. Candidate by receive notice of such expenditures	ididate / officeholder. The s and officeholders are i	ese expenditures may required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
GENERAL		COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages	·		•	
_		COMMITTEE CAMPAIGN TREASURER ADDRESS		·
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	52,279.00
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$100 OF LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES		\$	12,246.86
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	* \$	51,879.00
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	100,000.00

17 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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before m	e, by the said Posent Thomas	, this the	10 ^M	dav
of July , 20 14	, to certify which, witness my hand and seal of office.			
Appen Black	Aloran Herler	lema	haveen	

Signature of officer administering oath

HOROW /MIL

Print name of officer administering oath

Title of officer administering oath

	The Instruction	on Guide explains how to com	plete this form.		1 PAGE# Schedule: 1/4	48 Report: 3/55
2	FILER NAME	Thomas, Robert (Mr.)		•	3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Allen, Dan	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/27/2014	6 Contributor address; 6808 Marbrys Ridge Cove Austin, TX 78731	City; State; Zip Code	•••	\$200.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup CFO	ation / Job title (See Instruction	ns)	10 Employer (See In Hunter Kelsey	structions)	
	Date	Full name of contributor Allen, Erick	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2014	Contributor address; 6802 Edgefield Dr Austin, TX 78731	City; State; Zip Code		\$350.00	1
	Principal again	ation / Job title (See Instruction		Employer/Con In		Texas, complete Schedule T)
	Medical Docto	· ·		Employer (See In Austin Anesthe:	,	
	Date	Full name of contributor Allen, Jodie	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2014	Contributor address; 6802 Edgefield Dr Austin, TX 78731	City; State; Zip Code		\$350.00]
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instruction	ns)	Employer (See In Homemaker	structions)	
	Date	Full name of contributor Allen, Susie	out-of-state PAC (ID#)	Amount of contribution (S)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; 6808 Marbrys Ridge Cove Austin, TX 78731	City; State; Zip Code		\$200.00	
			•		(If travel outside of	Texas, complete Schedule T)
•	Principal occup Mechanical E	ation / Job title (See Instruction ngineer	is)	Employer (See In Retired	structions)	
	Date	Full name of contributor Anthony, Brian	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; 4118 Balcones woods dr Austin, TX 78759	City; State; Zip Code		\$100.00	
	'Dringing occur	ation / Joh titla (Can Instruction	ic)	Employer (Con In	<u></u>	Texas, complete Schedule T)
	Engineer	ation / Job title (See Instruction	10)	Employer (See In Freescale	Su ucuons)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/4	48 Report: 4/55
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Arcediano, Paul	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/30/2014	6 Contributor address; City; State; Zip Code 1127 Old Bastrop Hwy Austin, TX 78742		\$350.00	[[[
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Transportatio	pation / Job title (See Instructions)	10 Employer (See In R&R Limousine		
Date	Full name of contributor ☐ out-of-state PAC (ID# Ashy, Kirk		Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 7210 Montana Norte Austin, TX 78731		\$350.00	
			<u> </u>	Texas, complete Schedule T)
Principal occup Insurance	pation / Job title (See Instructions)	Employer (See In: Shepard & Walt	structions) ton Llfe Insurance	Agency, Inc.
Date	Full name of contributor ut-of-state PAC (ID# Ashy, Kristin	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 7210 Montana Norte Austin, TX 78731		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Teacher	pation / Job title (See Instructions)	Employer (See In: First Presbyteria		
Date	Full name of contributor ut-of-state PAC (ID# Atkins, Sara (H.)	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/09/2014	Contributor address; City; State; Zip Code 4207 Farhills Dr Austin, TX 78731		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In: Self - Saunders	structions) , Norval, Pargama	an & Atkins, LLP
Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/24/2014	Contributor address; City; State; Zip Code 709 W. 14th St. Austin, TX 78701		\$350.00]
			(ld trought acceptable - 4)	Toyan complete Schodule To
Principal occurs	pation / Job title (See Instructions)	Employer (See In:	,	Texas, complete Schedule T)
investor	and the food mondation	Self Employed	on denotia)	

	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 3/4	48 Report: 5/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Barclay, Andy)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/04/2014	6 Contributor address; City; State; Zip Code 8400 Emerald Hill Drive Austin, TX 78759		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Insurance Ag	ation / Job title (See Instructions) ent	10 Employer (See In The John A. Ba	structions) rclay Agency Inc	-
	Date	Full name of contributor	+)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/30/2014	Contributor address; City; State; Zip Code 3914 Rockledge Dr Austin, TX 78731		\$200.00	
	Deinoinal annum	otion / Joh Hills (Con Januariana)		<u>1 `</u>	Texas, complete Schedule T)
	Engineer	ation / Job title (See Instructions)	Employer (See In Qualcomm, Inc.		
	Date	Full name of contributor ut-of-state PAC (ID# Beattie, Brenda)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 8402 Burkwood Cove Austin, TX 78735		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chief Financia	ation / Job title (See Instructions) al Officer	Employer (See In Austin Travis C	structions) ounty Integral Car	re
	Date	Full name of contributor ut-of-state PAC (ID# Beattie, Chester)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 8402 Burkwood Cove Austin, TX 78735		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Asst. General	ation / Job title (See Instructions) Counsel	Employer (See In Health and Hun	l '	
-	Date	Full name of contributor uut-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/03/2014	Contributor address; City; State; Zip Code 6400 Deer Hollow Austin, TX 78750		\$200.00]]
					· •
	Dringing ago:	ation / Joh title (See Jestrustians)	Employee (Car In		Texas, complete Schedule T)
	Retired	ation / Job title (See Instructions)	Employer (See In Retired	Suucions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/4	48 Report: 6/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Bell, Gayle)	7 Amount of contribution (\$)	l 8 In-kind contribution description (if applicable)			
	06/03/2014	6 Contributor address; City; State; Zip Code 6504 Winterberry Dr Austin, TX 78750		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/19/2014	Contributor address; City; State; Zip Code 10614 Double Spur Loop Austin, TX 78759		\$200.00	 			
		•		(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete schedule 1)			
٠	Attorney			avies, Sewell & C	Chavarria, LLP			
	Date	Full name of contributor ut-of-state PAC (ID# Bernard, Jim)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/29/2014	Contributor address; City; State; Zip Code 7140 Chimney Cors Austin, TX 78731		\$250.00	 			
			•	(If travel outside of	Texas, complete Schedule T)			
	Principal occup Chief Financia	ation / Job title (See Instructions) al Officer	Employer (See In: PSW Real Esta					
	Date	Full name of contributor ut-of-state PAC (ID# Betts, Charles)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/19/2014	Contributor address; City; State; Zip Code 14741 Arrowhead Volente, TX 78641		\$250.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Association	ation / Job title (See Instructions)	Employer (See In: Downtown Aust					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/07/2014	Contributor address; City; State; Zip Code 1705 Kinsmon Cove Marietta, GA 30062		\$100.00	! ! !			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup Catering	ation / Job title (See Instructions)	Employer (See In: Cajun Crawlers	• .	· · · · · · · · · · · · · · · · · · ·			

	The Instruction	Guide explains how to comp	olete this form.	· · · ·	1 PAGE # Schedule: 5/4	48 Report: 7/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Blake, Alan	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/18/2014	6 Contributor address; C P.O. Box 20295 Austin, TX 78720	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Owner	ation / Job title (See Instructions	5)	10 Employer (See In Glo-Fish	structions)	
	Date	Full name of contributor Blevins, Parker	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/24/2014	Contributor address; C 7709 Shadyrock Drive Austin, TX 78731	City; State; Zip Code		\$350.00	
					(if travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions	s)	Employer (See In Retired	structions)	
	Date	Full name of contributor Blomquist, Martha (L)	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; C 8609 Alverstone way Austin, TX 78759	City; State; Zip Code		\$100.00 ·	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired Teach	ation / Job title (See Instructions ner	s)	Employer (See In Retired Teache		
	Date	Full name of contributor Bodenman, David (C)	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/09/2014	Contributor address; (10821 Range View Dr Austin, TX 78730	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions	8)	Employer (See In Highland Resou		
	Date	Full name of contributor Borgelt, Roger	ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; C 106 Laurel Lane Austin, TX 78705	City; State; Zip Code		\$350.00	
		,			(If traval outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions	s) T	Employer (See In		reads, complete achequie 1)
	Attorney			Borgelt Law	-	

	The Instruction	ON GUIDE explains how to com	nplete this form.		1 PAGE# Schedule: 6/4	48 Report: 8/55		
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874 .	(Ethics Commission filers)		
4	Date	5 Full name of contributor Borow, Hilary (C.)	out-of-state PAC (ID#	†)	7 Amount of contribution (\$)	8		
	06/10/2014	6 Contributor address; 1501 Allston St. Houston, TX 77008	City; State; Zip Code	, , , , , , , , , , , , , , , , , , , ,	\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	pation / Job title (See Instruction	is)	10 Employer (See In: Winstead PC	structions)			
	Date	Full name of contributor Bouvier, Shirley	out-of-state PAC (ID#	<i>t</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; 8112 Asherton Cove Austin, TX 78750	City; State; Zip Code		\$250.00	 		
	<u> </u>				<u> </u>	Texas, complete Schedule T)		
	Principal occupa Home Design	pation / Job title (See Instruction	is)	Employer (See In: Jeff Watson Hor				
	Date	Full name of contributor Boyd, Darrin	☐ out-of-state PAC (ID#	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/06/2014	Contributor address; 5201 Rambling Range Austin, TX 78727	City; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occupa QA Engineer	pation / Job title (See Instruction	is)	Employer (See Ins GM	<u> </u>			
	Date	Full name of contributor Boyd, Monique	out-of-state PAC (ID#	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/06/2014	Contributor address; 5201 Rambling Range Austin, TX 78727	City; State; Zip Code		\$350.00	 - 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occupa Sr. Product M	pation / Job title (See Instruction lanager	is)	Employer (See Ins Ebay	structions)			
	Date	Full name of contributor Brendle, Virginia	out-of-state PAC (ID#	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/03/2014	Contributor address; 6501 Winterberry Drive Austin, TX 78750	City; State; Zip Code		\$100.00	! !		
	Dringing occur	pation / Job title (See Instruction		Frankrier (Soo In		Texas, complete Schedule T)		
	Retired	allott / oob title (See instruction	5)	Employer (See Ins Retired	structions)			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/4	48 Report: 9/55
2	FILER NAME	Thomas, Robert (Mr.)	* .	3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Brewer, Joel)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/19/2014	6 Contributor address; City; State; Zip Code 3514 Hillbrook Dr. Austin, TX 78731		\$300.00	[
				(If travel outside of	Texas, complete Schedule T)
9		ation / Job title (See Instructions) tion Security Specialist	10 Employer (See In Visa, Inc.	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 3514 Hillbrook Dr. Austin, TX 78731		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) Accessibility Consultant	Employer (See In Stacey Brewer	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 605 Rainbow Cove Austin, TX 78746		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Broaddus & Ass		
	Date	Full name of contributor ut-of-state PAC (ID# Broaddus, Kay)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 605 Rainbow Cove Austin, TX 78746		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Hornemaker	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Bruzzone, Joseph)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/03/2014	Contributor address; City; State; Zip Code 6209 Turtle Point Dr. Austin, TX 78746		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In: Retired	structions)	

	The Instruction	ON GUIDE explains how to complete this form.			1 PAGE # Schedule: 8/4	48 Report: 10/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state F Byrne, Daniel	PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/14/2014	6 Contributor address; City; State; Zip 98 San Jacinto Blvd. Ste 2000 Austin, TX 78701	p Code		\$150.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	pation / Job title (See Instructions)		10 Employer (See Ins FBH&H	structions)	
	Date	Full name of contributor	³AC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip 120 Highlander Cove Austin, TX 78734	p Code		\$100.00	1
	Disking again	2000			'	Texas, complete Schedule T)
	Principal occup	oation / Job title (See Instructions)		Employer (See Ins Onsupport Corp		
_	Date	Full name of contributor	PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/16/2014	Contributor address; City; State; Zip P.O. 585 Austin, TX 76950	o Code		\$200.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occupa Self Employed	pation / Job title (See Instructions) d		Employer (See Ins Self Employed	structions)	
	Date	Full name of contributor	PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/22/2014	Contributor address; City; State; Zip 3921 Edgerock Austin Austin, TX 78731	o Code		\$250.00	
		ĺ			(If travel outside of	Texas, complete Schedule T)
	Principal occupa Owner	ation / Job title (See Instructions)		Employer (See Ins USA Training Co		
	Date	Full name of contributor	PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip 6714 Mountain Tr Austin, TX 78731	o Code		\$250.00	
		ı			(If travel outside of	Texas, complete Schedule T)
		eation / Job title (See Instructions)	$\neg \neg$	Employer (See Ins	<u>'</u>	Texas, compare schedule 1)
	Broker			TicketCity		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/4	48 Report: 11/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDa Colbert, Joseph	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	06/07/2014	6 Contributor address; City; State; Zip Code 108 Vandenter Burnet, TX 78611		\$100.00	 -			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/29/2014	Contributor address; City; State; Zip Code P.O. Box 703 Bertram, TX 78605		\$350.00	 			
					Texas, complete Schedule T)			
	Principal occup Investor	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)				
	Date	Full name of contributor Unit out-of-state PAC (ID# Coopwood, Thomas (Dr.)	<i>t</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/04/2014	Contributor address; City; State; Zip Code 6717 Valburn Drive Austin, TX 78731		\$250.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/16/2014	Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Homemaker	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Crowley, Tim	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/16/2014	Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Banker	ation / Job title (See Instructions)	Employer (See In Frost Bank	structions)				

	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 10)/48 Report: 12/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Crownover, Joseph)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	06/06/2014	6 Contributor address; City; State; Zip Code 525 Torrey Pines Cibolo, TX 78108		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Manager	ation / Job title (See Instructions)	10 Employer (See In Public Servant	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Cummings, Bruce (A))	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/30/2014	Contributor address; City; State; Zip Code 2306 Masonwood Way Round Rock, TX 78681		\$250.00] [
	8:			<u> L.:.</u>	Texas, complete Schedule T)			
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In Gila	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Damrongcharoen, Phraejai)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/11/2014	Contributor address; City; State; Zip Code 15107 Oak Loft San Antonio, TX 78232 .		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See In EcoLab	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/09/2014	Contributor address; City; State; Zip Code 5501 Cedro Trail Austin, TX 78731	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Financial Adv	ation / Job title (See Instructions) isor	Employer (See In Southwest Sect					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/29/2014	Contributor address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735		\$250.00	i } 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In Travis County	I .	, 1			
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	The Instruction	GUIDE explains how to complete this form.			1 PAGE# Schedule: 11	/48 Report: 13/55		
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PA Davis, Brad	C (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/20/2014	6 Contributor address; City; State; Zip C 2904 Kinloch Dr Cedar Park, TX 78613	ode		\$150.00	 		
	•				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Investment A	ation / Job title (See Instructions) dvisor		10 Employer (See In Fidelity	structions)			
	Date	Full name of contributor	C (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/23/2014	Contributor address; City; State; Zip C 6800 Burnet Road Austin, TX 78757	ode		\$100.00	 		
						Texas, complete Schedule T)		
	Principal occup None	ation / Job title (See Instructions)		Employer (See In None	structions)			
	Date	Full name of contributor ut-of-stale PA	C (ID#	·	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip C 15 Eagleview Lane Schwenksville, PA 19473	ode		\$25.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup CEO	ation / Job title (See Instructions)		Employer (See In Cadista Pharma	,			
	Date	Full name of contributor ut-of-state PAI Dochen, Sandy	C (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip C 5010 North Rim Drive Austin, TX 78731	ode	•••••	\$350.00] 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Corporate Cit	ation / Job title (See Instructions) izenship Mgr.		Employer (See In: IBM				
	Date	Full name of contributor	C (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/04/2014	Contributor address; City; State; Zip C 4308 Bellvue Ave. Austin, TX 78756	ode		\$50.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Ī	Employer (See In:				
	Attorney	•		Texas RioGrand				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 12	2/48 Report: 14/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Edwards, Richard)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/23/2014	6 Contributor address; City; State; Zip Code 5528 Heron Dr Austin, TX 78759		\$125.00	
_				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See Ins Retired	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Edwards, Rosemary (Mrs.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/23/2014	Contributor address; City; State; Zip Code 6528 Heron Drive Austin, TX 78759		\$125.00]
	Priminal angus		Seedows (Oas In	1	Texas, complete Schedule T)
_	Principal occup	pation / Job title (See Instructions)	Employer (See Ins Retired	structions)	
<u> </u>	Date	Full name of contributor ut-of-state PAC (ID# Elenz, Doug (Dr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 1900 Elton Lane Austin, TX 78703		\$199.00	i i
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Physician	pation / Job title (See Instructions)	Employer (See Ins Austin Sports M		
	Date	Full name of contributor)	Amount of contribution (\$)	Ín-kind contribution description (if applicable)
	06/30/2014	Contributor address; City; State; Zip Code 7608 Valley Dale Dr Austin, TX 78731		\$50.00	
		1		(If travel outside of	Texas, complete Schedule T)
		pation / Job title (See Instructions) litor, Educational Instructor	Employer (See Ins Self Employed		<u>-</u>
	Date	Full name of contributor ut-of-state PAC (ID# Erben, Amy)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/26/2014	Contributor address; City; State; Zip Code 3310 River Rd. Austin, TX 78703		\$50.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa Homemaker	pation / Job title (See Instructions)	Employer (See Ins Homemaker	·	, ,

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	8/48 Report: 15/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Erben, Randy	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/26/2014	6 Contributor address; City; State; Zip Code 3310 River Rd. Austin, TX 78703		\$50.00	
					Texas, complete Schedule T)
9	Principal occup Lobbyist	pation / Job title (See Instructions)	10 Employer (See In: Self Emlployed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID: Field, Dianne (Cecile)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 7201 Spurlock Drive Austin, TX 78731		\$50.00	
		Austri, 1776731		(If travel outside of	Texas, complete Schedule T)
		pation / Job title (See Instructions)	Employer (See In:	structions)	*
	Business Mar		Field Analytics		
	Date ·	Full name of contributor ut-of-state PAC (ID: Flagg, Adam	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/28/2014	Contributor address; City; State; Zip Code 2400 Shire Ridge Drive Austin, TX 78732		\$150.00	
				/if travel outside of	Texas, complete Schedule T)
_	Principal occur	Deation / Job title (See Instructions)	Employer (See Ins	<u> </u>	Texas, complete concactor,
	Financial Adv		Upstream Inves		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/26/2014	Contributor address; City; State; Zip Code 3607 Highland View Drive Austin, TX 78731		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Self Employed	pation / Job title (See Instructions) d	Employer (See Ins Self Employed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 1910 West 35th street Austin, TX 78703		\$250.00	
		l		/If travel outside of	Texas, complete Schedule T)
_	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	<u> </u>	Texas, complete consider 1/
	Orthodontist	,	Franklin and Co		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 14	./48 Report: 16/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Frey, Jerry (M)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/24/2014	6 Contributor address; City; State; Zip Code 2101 Bindon Drive Cedar Park, TX 78613		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9		ation / Job title (See Instructions) Real Estate Professional	10 Employer (See In CBRE, Inc.	structions)			
	Date	Full name of contributor ut-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 7202 Running Rope Circle Austin, TX 78731		\$100.00	 		
					Texas, complete Schedule T)		
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Austin Skinny L				
	Date	Full name of contributor ut-of-state PAC (ID: Friedman, Jeff	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/16/2014	Contributor address; City; State; Zip Code 6334 Yaupon Drive Austin, TX 78759		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Business Ow	ation / Job title (See Instructions) ner	Employer (See In Capra & Cavelli				
	Date	Full name of contributor ut-of-state PAC (ID: Frye, David	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/07/2014	Contributor address; City; State; Zip Code 13648 CR 64 Greeley, CO 80631		\$100.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Senior Consu	ation / Job title (See Instructions) Iltant	Employer (See In Kirnberly Clark	structions)			
	Date	Full name of contributor ut-of-state PAC (ID) Fulton, Diane (S)	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/25/2014	Contributor address; City; State; Zip Code 6820 Cypress Point North Austin, TX 78746		\$50.00			
				//f tenuni autaida -4	Toyon complete Cabadula To		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	1_'	Texas, complete Schedule T)		
	Realtor	,	Self Employed	-,			

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	The Instruction	on Guide explains how to comp	olete this form.		1 PAGE# Schedule: 15	/48 Report: 17/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Galton, Eric	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/26/2014	6 Contributor address; (8132 Jester Blvd. Austin, TX 78750	City; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Mediator	ation / Job title (See Instructions	s)	10 Employer (See In: Lakeside Media		
	Date	Full name of contributor Galton, Kim Kovach	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; (8132 Jester Blvd Austin, TX 78750	City; State; Zip Code		\$100.00	
	Principal coour	otion / Joh title (Con Joshustine				Texas, complete Schedule T)
	Professor	ation / Job title (See Instructions	5)	Employer (See In South Texas So		
	Date	Full name of contributor Garrison, Nancy	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; (517 West 39th Street Austin, TX 78731	City; State; Zip Code		\$250.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Investment	ation / Job title (See Instructions	3)	Employer (See In: Scarbrough Ver	structions)	
-	Date	Full name of contributor Geller, Robert	□ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; (3713 Green Trails North Austin, TX 78731	City; State; Zip Code		\$50.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Sales Managi	ation / Job title (See Instructions ment	5)	Employer (See In: White Mountain		
	Date	Full name of contributor Gerwels, Mary Claire	out-of-state PAC (ID#	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; (12345 Alameda Trace Cir. #63 Austin, TX 78727	City; State; Zip Code 8	•••••	\$100.00	
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions	3)	Employer (See Ins	structions)	
	Senior Lecture	ਨ। -		University of TX	al Austin	

	The Instruction	ON GUIDE explains how to complete this form.	٠	1 PAGE#	6/48 Report: 18/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gonzalez, Rene	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/11/2014	6 Contributor address; City; State; Zip Code 15107 Oak Loft San Antonio, TX 78232		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See In: Exxon Mobil Co				
	Date	Full name of contributor ut-of-state PAC (ID# Goodman, David	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/21/2014	Contributor address; City; State; Zip Code 4300 Tallowood Drive Austin, TX 78731		\$250.00	 		
					Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In: The Law Ofiice	structions) of David Goodma	in		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/18/2014	Contributor address; City; State; Zip Code 4300 Tallowood Drive Austin, TX 78731		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	oation / Job title (See Instructions)	Employer (See In: The Law Office	structions) of David Goodma	ın		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/14/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730		\$350.00	 		
	i			(If travel outside of	Texas, complete Schedule T)		
	Principal occup CEO	oation / Job title (See Instructions)	Employer (See In: Build A Sign	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Graham, Lisa	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
_	Principal occup Homemaker	pation / Job title (See Instructions)	Employer (See In: Homemaker				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 17	/48 Report: 19/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gramlich, Charles)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/26/2014	6 Contributor address; City; State; Zip Code 8105 Chardonnay Cove Austin, TX.78750		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Requested	ation / Job title (See Instructions)	10 Employer (See In Requested	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; City; State; Zip Code 10605 Sans Souci Pl Austin, TX 78759		\$100.00	
			<u></u>	L '	Texas, complete Schedule T)
	Principal occup Security Arch	ation / Job title (See Instructions) itect	Employer (See In IBM	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State: Zip Code 10605 Sans Souci Pl Austin, TX 78759		\$250.00	l . l . l
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Manager	ation / Job title (See Instructions)	Employer (See In Homeaway	<u> </u>	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip Code 7232 Comanche Trail Austin, TX 78732		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/04/2014	Contributor address; City; State; Zip Code 8510 Emerald Hill Drive Austin, TX 78759	••••	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In IBM		. Onde, complete outleddie 1)
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	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 18	/48 Report: 20/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Greytok, John)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	06/03/2014	6 Contributor address; City; State; Zip Code 8510 Emerald Hill Drive Austin, TX 78759		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Texas Lobby	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/02/2014	Contributor address; City; State; Zip Code P.O. Box 30401 Austin, TX 78759		\$350.00	[] [
				'	Texas, complete Schedule T)			
	Principal occup Lobbyist	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/30/2014	Contributor address; City; State; Zip Code 4209 Cat Hollow Dr. Austin, TX 78731		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Insurance Bro	ation / Job title (See Instructions) ker	Employer (See In EFG&M, LP	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/10/2014	Contributor address; City; State; Zip Code 3506 Mount Bonnell Rd Austin, TX 78731		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In ATX Brands, LL					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Kick-Off Party			
	05/02/2014	Contributor address; City; State; Zip Code 4006 Rockledge Drive Austin, TX 78731		\$200.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Sales	ation / Job title (See Instructions)	Employer (See In Domain System	structions)				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 19	1/48 Report: 21/55		
2	FILER NAME	Thomas, Robert (Mr.)	·	3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hajdu, Chris	()	7 Amount of contribution (\$)	8		
	05/02/2014	6 Contributor address; City; State; Zip Code 4006 Rockledge Drive Austin, TX 78731		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Manager	ation / Job title (See Instructions)	10 Employer (See In: SailPoint Techn		 .		
	Date	Full name of contributor ut-of-state PAC (ID# Hargrave, Tracey)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/14/2014	Contributor address; City; State; Zip Code 9090 E 118th PI S Bixby, OK 74008		\$350.00	 		
					Texas, complete Schedule T)		
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In: Homemaker	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Hargrave III, Robert (L)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/14/2014	Contributor address; City; State; Zip Code 9090 E 118TH PL S BIXBY, OK 74008		\$350.00	 		
		·		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Managing Pa	ation / Job title (See Instructions) rtner COO	Employer (See In: BAIR	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/17/2014	Contributor address; City; State; Zip Code 5630 E89th PL Tulsa, OK 74137	•••••	\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Pilot	ation / Job title (See Instructions)	Employer (See Ins FedEx				
	Date	Full name of contributor ut-of-state PAC (ID# Hargrave Jr, Sompong Peer)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/17/2014	Contributor address; City; State; Zip Code 5630 E89th PL Tulsa, OK 74137		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See Ins Self Employed		, verification of		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	0/48 Report: 22/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor uut-of-state PAC (ID# Harmonson, Peter (C)	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/19/2014	6 Contributor address; City; State; Zip Code PO Box 30317 Austin, TX 78755		\$250.00	 		
			·	(If travel outside of	Texas, complete Schedule T)		
9	Principal occup CEO	ation / Job title (See Instructions)	10 Employer (See In Far West Capital				
-	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 7310 Foxtree Cove		\$50.00	 		
		Austin, TX 78750		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In	structions)			
	nomemaker		Homemaker				
	Date	Full name of contributor ut-of-state PAC (ID# Harvey, Kyle	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 7310 Foxtree Cove Austin, TX 78750		\$50.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In		taxas, complete concesso 17		
	Director of Qu	ality	Newgistics				
	Date	Full name of contributor ut-of-state PAC (ID# Hawkins, Albert)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 7005 Quill Leaf Cove Austin, TX 78750		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Policy Consul	ation / Job title (See Instructions) tant	Employer (See In Self Employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Hawkins, Jacquelyn)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 7005 Quill Leaf Cove Austin, TX 78750	•••••	\$350.00	 		
				(16 hanna) midalida -d	Towns assumption California and T		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)		
	None		None				

<u> </u>									
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 21	/48 Report: 23/55				
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)				
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Head, Jennifer)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	06/08/2014	6 Contributor address; City; State; Zip Code 8683 Creekstone Place Gainesville, GA 30506-4870		\$25.00	 				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup Project Mana	ation / Job title (See Instructions) ger	10 Employer (See In Hallmark Cards						
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/08/2014	Contributor address; City; State; Zip Code 8683 Creekstone Place Gainesville, GA 30506-4870		\$25.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Requested	ation / Job title (See Instructions)	Employer (See In Requested	structions)					
•	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/06/2014	Contributor address; City; State; Zip Code 1812 Bremen Street Austin, TX 78703		\$25.00	 				
				(If travel outside of	Texas, complete Schedule T)				
		ation / Job title (See Instructions) gner & Copy Editor	Employer (See In Self Employed	structions)					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/10/2014	Contributor address; City; State; Zip Code 100 Congress Ave. # F118 Austin, TX 78701		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Hohmann, Taub	structions) pe & Summers, Lt	Р				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/29/2014	Contributor address; City; State; Zip Code 4002 Sierra Dr Austin, TX 78731	•••••	\$250.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Advertising	ation / Job title (See Instructions)	Employer (See In Holmes Outdoo	structions)	, ,				

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The Instruction Guide explains h	ow to complete this form.		1 PAGE# Schedule: 22	2/48 Report: 24/55
2 FILER NAME Thomas, Rober	t (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date 5 Full name of co Howard, Jeffrey		#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/30/2014 6 Contributor add 5436 Moon Shado Austin, TX 78735	,,		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occupation / Job title (See Attorney	Instructions)	10 Employer (See In McLean & How		
Date Full name of co Howard, John	ontributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/29/2014 Contributor add 8601 Emerald Hill Austin, TX 78759			\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See	Instructions)	Employer (See In	·	Total, complete contract //
Attorney		Dell Inc.		
Date Full name of co Huang, Lawrenc	—	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/20/2014 Contributor add 16 Scott Crescent Austin, TX 78703	dress; City; State; Zip Code	••••	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Engineer	Instructions)	Employer (See In Carngie Design		·
Date Full name of co Jankowsky, Crai	•	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/24/2014 Contributor add 6109 Lost Horizon Austin, TX 78759	, ,,,		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Program Manager	Instructions)	Employer (See In: Deli	structions)	
Date Full name of co Jastrow, Corby	ontributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/06/2014 Contributor add 1515 Mohle Drive Austin, TX 78703	dress; City; State; Zip Code		\$250.00]
			(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Title Insurance	Instructions)	Employer (See Ins Prominent Title		. <u>-</u>

	The Instruction	on Guide explains how to comp	plete this form.		1 PAGE# Schedule: 23	3/48 Report: 25/55		
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor Jenkins, Bobby	☐ out-of-state PAC (ID#	')	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/16/2014	6 Contributor address; 1404 Etheridge Avenue Austin, TX 78703	City; State; Zip Code		\$350.00	 		
		,			(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Owner	ation / Job title (See Instructions	s)	10 Employer (See In ABC Home & C	structions) commercial Servic	es		
	Date	Full name of contributor Jenkins, Janice	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/16/2014	Contributor address; 6 1404 Ethridge Austin, TX 78703	City; State; Zip Code		\$350.00	l . !		
	. <u> </u>				<u> </u>	Texas, complete Schedule T)		
	Principal occup Homemaker	ation / Job title (See Instructions	s) 	Employer (See In Homemaker	structions)			
	Date	Full name of contributor Johnston, Greg	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/09/2014	Contributor address; 0 3018 Edgewater Drive Austin, TX 78733	City; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Self Employe	ation / Job title (See Instructions d	s)	Employer (See In Oxford	structions)			
	Date	Full name of contributor Johnston, Kathy	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/09/2014	Contributor address; (3018 Edgewater Drive Austin, TX 78733	City; State; Zip Code		\$350.00	. 		
	·				(If travel outside of	Texas, complete Schedule T)		
	Principal occup None	ation / Job title (See Instructions	5)	Employer (See In None	structions)			
	Date	Full name of contributor Jones, Amy	Out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/20/2014	Contributor address; (7125 Ridge Oak Road Austin, TX 78749	City; State; Zip Code		\$50.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Business Dev	ation / Job title (See Instructions relopment	s)	Employer (See In O'Connell Robe				

	The Instruction	on Guide explains how to comple	ete this form.		1 PAGE# Schedule: 24	/48 Report: 26/55		
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor Dones, Chris	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/30/2014	6 Contributor address; Ci 9001 Clithea Cove Austin, TX 78759	ity; State; Zip Code		\$75.00	 		
			•		(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Mgr	ation / Job title (See Instructions)		10 Employer (See In: TCS	structions)			
	Date	Full name of contributor Doslove, Scott	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/27/2014	Contributor address; Ci 2803 Clearview Drive Austin, TX 78703	ity; State; Zip Code		\$300.00	 		
	D ivided				<u> </u>	Texas, complete Schedule T)		
	Principal occup President + C	ation / Job title (See Instructions)		Employer (See In: Texas Hotel & L	structions) _odging Associatio	on		
	Date	Full name of contributor Kargbo, Edward	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; Ci 8426 Antero Austin, TX 78759	ity; State; Zip Code		\$350.00	 		
		<u>.</u>			(If travel outside of	Texas, complete Schedule T)		
	Principal occup President	ation / Job title (See Instructions)	,	Employer (See In: Greater Austin	structions) Transportation Co	mpany		
	Date	Full name of contributor C Keig, Lowell	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/10/2014	Contributor address; Ci 5103 Ridgemoor Drive Austin, TX 78731	ity; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) Rights Division		Employer (See Ins Texas Workforc		-		
	Date	Full name of contributor Kester, Steve	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/07/2014	Contributor address; Ci 6903 Glen Ridge Drive Austin, TX 78731	ity; State; Zip Code		\$250.00	 		
					/If travel outside of	Texas, complete Schedule T)		
•	Principal occup Manager	ation / Job title (See Instructions)		Employer (See In: AMD	<u> </u>	- Sample Complete Control of 17		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 25	/48 Report: 27/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (IDA Kilpatrick, Gaines	(7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/08/2014	6 Contributor address; City; State; Zip Code 1802 Eva Street Austin, TX 78704		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Fuel Sales	ation / Job title (See Instructions)	10 Employer (See In Bison Clean Fu		
-	Date	Full name of contributor ut-of-state PAC (ID# Kilpatrick, Suzanne		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/08/2014	Contributor address; City; State; Zip Code 1802 Eva Street Austin, TX 78704		\$350.00	 -
				,	Texas, complete Schedule T)
	Principal occup Marketing Dir	ation / Job title (See Instructions) ector	Employer (See to Kilpatrick Opera		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Klein, Dale	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/12/2014	Contributor address; City; State; Zip Code 40 North IH 35 Austin, TX 78701		\$250.00	1 I I
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In UT System	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Klein, Rebecca)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/13/2014	Contributor address; City; State; Zip Code 40 North IH 35 Austin, TX 78701		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Klein Energy LL		
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; City; State; Zip Code 4003 Greystone Austin, TX 78731		\$50.00	
				(if trave) outside of	Texas, complete Schedule T)
	Principal occup Public Relation	ation / Job title (See Instructions)	Employer (See In:		·······

P.O.Box 12070

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#					
·			· ·		/48 Report: 28/55				
2	FILER NAME	Thomas, Robert (Mr.)	3 ACCOUNT # 00067874	(Ethics Commission filers)					
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kraft, Jill	<u>'</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	06/09/2014	6 Contributor address; City; State; Zip Code 7109 Barefoot Cv austin, TX 78730		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In Homemaker	structions)					
	Date	Full name of contributor ut-of-state PAC (ID# Kraft, John (Rix)	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/09/2014	Contributor address; City; State; Zip Code 7109 Barefoot Cv austin, TX 78730		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
		ation / Job title (See Instructions)	Employer (See In	structions)	<u>- </u>				
	Exec		BuildASign LLC	•					
	Date	Full name of contributor ut-of-state PAC (ID# Krugel, Leonard (S))	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/06/2014	Contributor address; City; State; Zip Code 8105 Amelia Cove Austin, TX 78750		\$50.00	 				
				(If travel outside of	Texas, complete Schedule T)				
		ation / Job title (See Instructions) pliance Officer	Employer (See In TX Dept. Family	structions) y and Protective S	Services				
	Date	Full name of contributor ut-of-state PAC (ID# Lampert, Lynn	<u>+)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/16/2014	Contributor address; City; State; Zip Code 6404 Dry Bend Cove Austin, TX 78731		\$350.00					
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Retired	eation / Job title (See Instructions)	Employer (See In Retired	structions)					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/16/2014	Contributor address; City; State; Zip Code 6404 Dry Bend Cove Austin, TX 78731		\$350.00	! 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)					

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 27	7/48 Report: 29/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (Land, Margaret	ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/29/2014	6 Contributor address; City; State; Zip Coo 9005 Clithea cv Austin, TX 78759		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Director of Ac	ation / Job title (See Instructions) Iministration	10 Employer (See Ir Baker Botts	estructions)	
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Coo 6806 Rockledge Cove Austin, TX 78731	le	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Internet	ation / Job title (See Instructions)	Employer (See Ir Written	nstructions)	
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip Coo 7809 W Rim Austin, TX 78731		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)	Employer /Coole		Texas, complete schedule 1)
	Managing Dir		Employer (See Ir Teacher Retire	ment System of To	exas
	Date	Full name of contributor ut-of-state PAC (Lardner, Dave	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Coo 1036 Liberty Park Dr. Apt. 13B Austin, TX 78746	le	\$100.00	
	ı			(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) nt Uneven Sidewalk Repair Services	Employer (See In Precision Safe	structions) Sidewalks, LLC	
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/26/2014	Contributor address; City; State; Zip Coc 7705 Shadyrock Austin, TX 78731	le	\$100.00	I
		·		(If travel outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)	Employer (See In		revas, complete achequie ()
	CPA		Self Employed	ou ocuono,	

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	The Instruction	ON GUIDE explains how to complete this form.	<u>-</u>	1 PAGE# Schedule: 28	/48 Report: 30/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Lenihan, Susan	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/29/2014	6 Contributor address; City; State; Zip Code 3915 Rockledge Drive Austin, TX 78731		\$350.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Marketing Co	ation / Job title (See Instructions) nsultant	10 Employer (See In The Lenihan Gr		
	Date	Full name of contributor ut-of-state PAC (ID# Liddell, Greg	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 6001 Salton Dr Austin, TX 78759		\$100.00	
	. <u>.</u>			<u> </u>	Texas, complete Schedule T)
		ation / Job title (See Instructions) ner / Technologist	Employer (See In Human Interfac	•	
	Date	Full name of contributor ut-of-state PAC (ID# Lindner, Aaron)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; City; State; Zip Code 5821 Kempson Dr. Austin, TX 78735	••••	\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In		rexas, complete scriedule 1)
<u>_</u> -	·				
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; City; State; Zip Code 5821 Kempson Dr.		\$50.00	
		Austin, TX 78735		(If travel outside of	Texas, complete Schedule T)
	Principal occup Homernaker	ation / Job title (See Instructions)	Employer (See In: Homemaker	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 3714 Stevenson Ave Austin, TX 78703		\$100.00	
				(If travel outside of	Teyas, complete Schodule To
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule T)
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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 29	1/48 Report: 31/55
2	FILER NAME	Thomas, Robert (Mr.)	3 ACCOUNT # 00067874	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Maxwell, Peggy	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/01/2014	6 Contributor address; City; State; Zip Code 6505 Winterberry Austin, TX 78750		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Maxwell, Terry	<u>,</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 6505 Winterberry Austin, TX 78750		\$350.00	[
				<u> </u>	Texas, complete Schedule T)
	CPA	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# McElroy, Ryan (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; City; State; Zip Code 1121 Choquette Drive Austin, TX 78757	· · · · · · · · · · · · · · · · · · ·	\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Thunderbird Co		
	Date	Full name of contributor ut-of-state PAC (ID# McKallip, Murray (Davis))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/28/2014	Contributor address; City; State; Zip Code 6807 Glen Ridge Drive Austin, TX 78731	•••••	\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Computer Pro	ation / Job title (See Instructions) ogrammer	Employer (See In Self Employed	structions)	
	Date	Full name of contributor	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/22/2014	Contributor address; City; State; Zip Code 106 Harbor Hill Drive Austin, TX 78734		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In N/A		

The INSTR	EUCTION GUIDE explains how to complete this form.		1 PAGE# Schedule: 30	9/48 Report: 32/55
2 FILER NA	ME Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Means, Diane	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/20/20	6 Contributor address; City; State; Zip Code 6007 Mesa Drive Austin, TX 78731	• • • • • • • • • • • • • • • • • • • •	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal of Teacher	occupation / Job title (See Instructions)	10 Employer (See In AISD	<u> </u>	
Date	Full name of contributor ut-of-state PAC (ID#	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/20/20	14 Contributor address; City; State; Zip Code 6007 Mesa Drive Austin, TX 78731		\$350.00	
			-	Texas, complete Schedule T)
Principal o Owner	occupation / Job title (See Instructions)	Employer (See In Austin Cab Con		
Date	Full name of contributor ut-of-state PAC (ID# Mendoza, Richard	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/27/20	Contributor address; City; State; Zip Code 3412 Green Emerald Terrace Austin, TX 78739	• • • • • • • • • • • • • • • • • • • •	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
	eccupation / Job title (See Instructions) Public Accountant	Employer (See In R. Mendoza & (
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/02/20	Contributor address; City; State; Zip Code P.O. Box 10343 Austin, TX 78766		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal o Self Emp	occupation / Job title (See Instructions) loyed	Employer (See In Self Employed	structions)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/18/20	Contributor address; City; State; Zip Code 6901 Glen Ridge Drive Austin, TX 78731		\$350.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
Principal o	occupation / Job title (See Instructions)	Employer (See In Meroney P.R.	<u> </u>	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 31	/48 Report: 33/55
2	FILER NAME	Thomas, Robert (Mr.)	,	3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Meroney, Shannon	<u>; </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/18/2014	6 Contributor address; City; State; Zip Code 6901 Glen Ridge Drive Austin, TX 78731		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Insurance Pro	ation / Job title (See Instructions) ofessional	10 Employer (See In: Aetna	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 6703 Tree Fern Ln Austin, TX 78750		\$350.00	
	Principal occup		Flover (Coolin	<u></u>	Texas, complete Schedule T)
	Real Estate B	ation / Job title (See Instructions) Broker	Employer (See In: NAI Commercia		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 6703 Tree Fern Ln Austin, TX 78750		\$350.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup Real Estate L	etion / Job title (See Instructions) ender	Employer (See In: Compass Bank		
	Date	Full name of contributor ut-of-state PAC (ID# Miura, Steven	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 1502 Lorrain Austin, TX 78703		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup FA	ation / Job title (See Instructions)	Employer (See Ins NM	structions)	
	Date	Full name of contributor	,	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; City; State; Zip Code 2902 Enfield Rd Austin, TX 78703		\$25.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete ochedale 1)
	Student		Student		

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The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 32/48 Report: 34/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Nelson, Marie (Eleanor))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/21/2014	6 Contributor address; City; State; Zip Code 8217 Partridge Bend Cove Austin, TX 78729		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Sales	ation / Job title (See Instructions)	10 Employer (See In: Xerox	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/21/2014	Contributor address; City; State; Zip Code 8217 Partridge Bend Cove Austin, TX 78729		\$350.00	 		
				L	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Travis County Attorney's Office				
	Date	Full name of contributor ut-of-state PAC (ID# Newman, Holly)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Code 4208 N Hills Dr Austin, TX 78731		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Sales			Employer (See Instructions) AT&T				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 5101 Cuesta Verde Austin, TX 78746		\$150.00	 		
				(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Real Estate			Employer (See In: CBRE / Trammo				
	Date	Full name of contributor ut-of-state PAC (ID# Norman, Monique)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/12/2014	Contributor address; City; State; Zip Code 3605 Edgemont Drive Austin, TX 78731		\$350.00	 		
					· •		
(If travel outside of Texas, complete Schedule T)							
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Monique Norman Attorney at Law				

The Instruction Guide explains how to complete this form.				1 PAGE# Schedule: 33	/48 Report: 35/55	
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-	of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/12/2014	6 Contributor address; City; St 3605 Edgemont Drive Austin, TX 78731	tate; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Executive Dir	ation / Job title (See Instructions) ector		10 Employer (See Ins Texas Homebui	structions) Iders Association	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/08/2014	Contributor address; City; St 4704 Fawn Run Austin, TX 78735	tate; Zip Code		\$50.00	
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)		Employer (See In		
	Agent			Central Insurance	ce ·	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; St 4301 Tallowood Drive Austin, TX 78731	tate; Zip Code		\$125.00	
					(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Athletics				Employer (See Instructions) University of Texas Austin		
	Date	Full name of contributor uut-o	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; Sf 4301 Tallowood Drive Austin, TX 78731	tate; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$125.00	
					(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Event Coordinator			Employer (See Ins Self Employed	structions)		
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/22/2014	Contributor address; City; St 7200 West RIm Dr. Austin, TX 78731	tate; Zip Code		\$150.00	
					(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			Employer (See In:		reads, complete achequie ()	
Volunteer			None	- /		

The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 34/48 Report: 36/55				
2 F	FILER NAME	Thomas, Robert (Mr.)	· · · · · · · · · · · · · · · · · · ·	3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Owens, Jennifer)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
0	6/16/2014	6 Contributor address; City; State; Zip Code 7200 Montana Norte Austin, TX 78731		\$25.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Sales	ation / Job title (See Instructions)	10 Employer (See In Boundless Netv					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
0	6/16/2014	Contributor address; City; State; Zip Code 7200 Montana Norte Austin, TX 78731	•••••	\$25.00	 			
					Texas, complete Schedule T)			
	Principal occup Requested	ation / Job title (See Instructions)	Employer (See Instructions) Requested					
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
0	6/08/2014	Contributor address; City; State; Zip Code 3008 Scenic Drive Austin, TX 78703		\$250.00]] [
				(if travel outside of	Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Insurance Broker			Employer (See In Higginbotham	Employer (See Instructions) Higginbotham				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
0	6/26/2014	Contributor address; City; State; Zip Code 4009 Greenhill PI Austin, TX 78759	••••	\$100.00] 			
				(If travel outside of	Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) President			Employer (See Instructions) The Payton Company					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
0	6/19/2014	Contributor address; City; State; Zip Code 4305 Deepwoods Drive Austin, TX 78731		\$350.00] 			
				(If travel outside of	Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Self Employed			Employer (See In Self Employed	structions)				

		<u> </u>			
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 35	/48 Report: 37/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Petrick, David (W))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/19/2014	6 Contributor address; City; State; Zip Code 4305 Deepwoods Drive Austin, TX 78731		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Real Estate	ation / Job title (See Instructions)	10 Employer (See In David Petrick C		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/07/2014	Contributor address; City; State; Zip Code 1110 Plantation Meadows Drive Richmond, TX 77406		\$350.00	!
	D. C. C. C.			<u> </u>	Texas, complete Schedule T)
	Attorney	ation / Job title (See Instructions)	Employer (See In: Norma Montalvo	structions) o Petrosewicz PC	
	Date	Full name of contributor ut-of-state PAC (ID# Petrosewicz, Thomas (James))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/07/2014	Contributor address; City; State; Zip Code 1110 Plantation Meadows Drive Richmond, TX 77406		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup CPA	ation / Job title (See Instructions)	Employer (See In: Petrosewicz & (
	Date	Full name of contributor ut-of-state PAC (ID# Pierce, Jack (William))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/22/2014	Contributor address; City; State; Zip Code 6811 Glen Ridge Dr. Austin, TX 78731		\$150.00	 -
		Austiii, 17 70731		(If travel outside of	Texas, complete Schedule T)
	Principal occup Physician	ation / Job title (See Instructions)	Employer (See In: Self Employed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Pierce, P.J.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/22/2014	Contributor address; City; State; Zip Code 6811 Glen Ridge Dr. Austin, TX 78731		\$350.00	
		į.		(If travel outside of	Texas, complete Schedule T)
	Principal occup Writer	ation / Job title (See Instructions)	Employer (See In: Self Employed	<u></u>	

_		<u> </u>		 	
	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE # Schedule: 36	5/48 Report: 38/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Polumbo, Carol	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/30/2014	6 Contributor address; City; State; Zip Code 7900 Escala Drive Austin, TX 78735		\$350.00	I I I
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In McCall, Parkhul	structions) rst & Horton LLP	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City; State; Zip Code 11818 Pennsylvania Ave		\$50.00	
		Kansas City, MO 64114-5547		<u> </u>	Texas, complete Schedule T)
		eation / Job title (See Instructions) es, Channel Development	Employer (See In Avanti Systems		
	Date	Full name of contributor uut-of-state PAC (ID# Ramirez, Brenda)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/18/2014	Contributor address; City; State; Zip Code P.O. Box 102695 Austin, TX 78720		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Teacher	eation / Job title (See Instructions)	Employer (See In AISD		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/22/2014	Contributor address; City; State; Zip Code 3103, Riva Ridge Rd Austin, TX 78746		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chief Enginee	ation / Job title (See Instructions) er	Employer (See In IBM	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Rivera, Julian)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip Code 2404 Forest Bend Dr Austin, TX 78704		\$100.00	
		· · · · · · · · · · · · · · · · · · ·	•		·
L	Principal occurs	eation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	Attorney	and the toes mandendist	Husch Blackwel		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 37	7/48 Report: 39/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Romano, Miguel	!)	7 Amount of contribution (\$)	8		
	06/15/2014	6 Contributor address; City; State; Zip Code 3918 Dry Creek Drive Austin, TX 78731		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Banker	ation / Job title (See Instructions)	10 Employer (See In American Bank				
	Date	Full name of contributor ut-of-state PAC (ID#Rourke, Kali)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/21/2014	Contributor address; City; State; Zip Code 300 Bowie St. # 2602 Austin, TX 78703		\$350.00	 		
					Texas, complete Schedule T)		
	Principal occup Self Employed	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Rousselot, Mark)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/27/2014	Contributor address; City; State; Zip Code P.O. Box 413 Sonora, TX 76950		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Rancher	ation / Job title (See Instructions)	Employer (See In Self Emlployed	structions)	· · · · · · · · · · · · · · · · · · ·		
	Date	Full name of contributor ut-of-state PAC (ID# Rousselot, Norman	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/20/2014	Contributor address; City; State; Zip Code 520 E. 2nd St. Sonora, TX 76950		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Rancher	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Rousselot, Reid (W))	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/29/2014	Contributor address; City; State; Zip Code 5800 Highland Hills Drive Austin, TX 78731		\$350.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	·	,,		
	Investor		Self Employed	•			

The Instruction Guide explains how to complete this form.	1 PAGE # Schedule: 38/48 Report: 40/55					
2 FILER NAME Thomas, Robert (Mr.)	3 ACCOUNT # (Ethics Commission filers) 00067874					
4 Date 5 Full name of contributor ☐ out-of-state PAC (ID: Safady, Randa (S)	#) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)					
06/29/2014 6 Contributor address; City; State; Zip Code 3915 Rockledge Drive Austin, TX 78731	\$350.00 Contract C					
	(If travel outside of Texas, complete Schedule T)					
Principal occupation / Job title (See Instructions) Vice Chancellor	10 Employer (See Instructions) University of Texas System					
Date Full name of contributor out-of-state PAC (ID: Scarborough, Charles (D)	#) Amount of In-kind contribution contribution (\$) description (if applicable)					
06/19/2014 Contributor address; City; State; Zip Code 6701 N. Park Dr. Austin, TX 78757	\$100.00					
	(If travel outside of Texas, complete Schedule T)					
Principal occupation / Job title (See Instructions) Executive Director, The Seton Fund	Employer (See Instructions) Seton Healthcare Family					
Date Full name of contributor ut-of-state PAC (ID: Schaaf, Brook	#) Amount of In-kind contribution contribution (\$) description (if applicable)					
06/19/2014 Contributor address; City; State; Zip Code 210 Lavaca St. #2803 Austin, TX 78701	\$250.00					
	(If travel outside of Texas, complete Schedule T)					
Principal occupation / Job title (See Instructions) Marketing	Employer (See Instructions) Schaaf-PartnerCentric					
Date Full name of contributor out-of-state PAC (ID: Schaaf, Brook	#) Amount of In-kind contribution contribution (\$) description (if applicable)					
O6/25/2014 Contributor address; City; State; Zip Code 210 Lavaca St. # 2803 Austin, TX 78701	\$100.00					
·	(If travel outside of Texas, complete Schedule T)					
Principal occupation / Job title (See Instructions) Marketing	Employer (See Instructions) Schaaf-PartnerCentric					
Date Full name of contributor Out-of-state PAC (ID: Schocket, Kim	#) Amount of In-kind contribution contribution (\$) description (if applicable)					
O6/29/2014 Contributor address; City; State; Zip Code 4201 Greystone Drive Austin, TX 78731	\$50.00 I					
	(If travel outside of Texas, complete Schedule T)					
Principal occupation / Job title (See Instructions) Clinical Psychologist	Employer (See Instructions) CPI					

	The Instruction	א Guide explains how to complete this form.		1 PAGE# Schedule: 39	/48 Report: 41/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Seibel, Ronald)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/23/2014	6 Contributor address; City; State; Zip Code 181 Rock Vista run Austin, TX 78737		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Benefits Exec	ation / Job title (See Instructions) cutive	10 Employer (See In Advanced Bene	structions) efit Solutions			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 801 W 5th St.		\$350.00	 		
		Austin, TX 78703		(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions)	Employer (See In	structions)			
	Investor		None				
	Date	Full name of contributor ut-of-stale PAC (ID# Sepehri, John)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 5817 Mount Bonnell Road Austin, TX 78731		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	,	rozas, complete concato i,		
	Attorney		Texas Apartme	nt Association			
	Date	Full name of contributor ut-of-state PAC (ID#	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/20/2014	Contributor address; City; State; Zip Code 5600 Scout Island Circle South Austin, TX 78731		\$250.00	 		
					' 		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In: Retired	<u> </u>	Texas, complete Schedule T)		
_	Data	Full page of a parity day of state PAC (ID)			1		
	Date	Full name of contributor uut-of-state PAC (ID# Shaw, John E.)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/27/2014	Contributor address; City; State; Zip Code 5245 Biloxi Avenue Toluca Terrace, CA 91601		\$350.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions)	Employer (See In	structions)			
	Insurance Bro	oker	Marsh				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 40	/48 Report: 42/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Shaw, Shirin	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/27/2014	6 Contributor address; City; State; Zip Code 5245 Biloxi Avenue Toluca Terrace, CA 91601		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Producer	nation / Job title (See Instructions)	10 Employer (See In Persian Cowbo	structions) y Productions, Inc			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 6800 Austin Center Blvd. # 1351 Austin, TX 78731		\$350.00	 		
				,	Texas, complete Schedule T)		
	Principal occup Retired	eation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Sher, Joel	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 4905 Tenison Ct Austin, TX 78731		\$350.00	 		
				(# *	*		
·	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)		
	Commercial F		Employer (See In Congress Holdi				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution. description (if applicable)		
	06/20/2014	Contributor address; City; State; Zip Code 902B West 18th St Austin, TX 78701		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Consulting	pation / Job title (See Instructions)	Employer (See In UT System	<u> </u>	Totals, complete conclude 17		
	Date	Full name of contributor uut-of-state PAC (ID# Silverman, Andrew (Flint)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/20/2014	Contributor address; City; State; Zip Code 5705 Wilder Ridge Austin, TX 78759		\$250.00	l l ,		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	, ,		
		- Clinical Research	INC Research	-,			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 41	/48 Report: 43/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Singh, Seetha	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/24/2014	6 Contributor address; City; State; Zip Code 1004 N Weston Ln Austin, TX 78733		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Engineer	ation / Job title (See Instructions)	10 Employer (See In Austin Bazaar I				
	Date	Full name of contributor ut-of-state PAC (ID# Singh, Suman	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 1004 N Weston Ln Austin, TX 78733		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup CEO	eation / Job title (See Instructions)	Employer (See In Austin Bazaar II				
	Date	Full name of contributor ut-of-state PAC (ID# Skaggs, Jack (E.)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 7700 Stoneywood Dr. Austin, TX 78731		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Jackson Walker	structions)			
	Date	Full name of contributor uut-of-state PAC (ID# Smith, Andrew)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/20/2014	Contributor address; City; State; Zip Code 6012 Cervinus Run Austin, TX 78735		\$150.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In: Parkway	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/23/2014	Contributor address; City; State; Zip Code 7802 Deer Ridge Circle Austin, TX 78731		\$250.00	 		
			-	(If traval autaid= =+	Toyon complete School to T		
	Principal occur	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)		
	Marketing Ex		Bulldog Solution				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 42	/48 Report: 44/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Soper, Steven)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/23/2014	6 Contributor address; City; State; Zip Code 6002 Westside Drive Austin, TX 78731		\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Consulting	ation / Job title (See Instructions)	10 Employer (See In Direct Impact	structions)			
•	Date	Full name of contributor ut-of-state PAC (ID Spross, Brian	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 1605 Lakecliff Hills Ln. Austin, TX 78732		\$350.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal оссир Attorney	ation / Job title (See Instructions)	Employer (See In Jones & Spross				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/20/2014	Contributor address; City; State; Zip Code 4007 Rockledge Dr. Austin, TX 78731		\$100.00] 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See Instructions) Reed, Claymon, Meeker & Hargett, PLLC				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/26/2014	Contributor address; City; State; Zip Code 10501 Brannon Cove Austin, TX 78759		\$200.00			
			_		Texas, complete Schedule T)		
	Principal occup Attorney	vation / Job title (See Instructions)	Employer (See In Stahl, Bernal, D	structions) Pavies, Sewell & C	havarria, LIP		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/12/2014	Contributor address; City; State; Zip Code 3702 Terrina # I- 9 Austin, TX 78759		\$250.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 43	3/48 Report: 45/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC Stahl, Susan	ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/26/2014	6 Contributor address; City; State; Zip Coo 10501 Brannon Cove Austin, TX 78731		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Co-Director	ation / Job title (See Instructions)	10 Employer (See In Power for Park		
	Date	Full name of contributor ut-of-state PAC Tanner, Christy	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City; State; Zip Coo 8426 Antero Austin, TX 78759	le	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See Ir Homemaker	nstructions)	•
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; City; State; Zip Coo 1902 Stamford Lane Austin, TX 78703-2942	e	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See Ir Homemaker		
	Tiomemaker		Homemaker		
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; City; State; Zip Coo 1902 Stamford Lane Austin, TX 78703-2942		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Ir Jackson Walke		
	Date	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/11/2014	Contributor address; City; State; Zip Coo 6902 Beauford Drive Austin, TX 78750	e	\$250.00	
				(If traval autoids ==	Toyon complete Sales dula To
_	Principal occur	ation / Job title (See Instructions)	Employer (See In	ــــــــــــــــــــــــــــــــــــــ	Texas, complete Schedule T)
	None	(None		

P.O.Box 12070

	The INSTRUCTION	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 44	/48 Report: 46/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Thompson, Matthew)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/19/2014	6 Contributor address; City; State; Zip Code 6804 Glen Ridge Dr Austin, TX 78731		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Healthcare M	ation / Job title (See Instructions) anagement	10 Employer (See In Medical Manag	structions) ement Solutions			
	Date	Full name of contributor ut-of-state PAC (ID# Thorne, George	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/20/2014	Contributor address; City; State; Zip Code 300 Bowie #1801 Austin, TX 78703		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Physician	ation / Job title (See Instructions)	Employer (See In Eye Physicians				
	Date	Full name of contributor	<u>*)</u> .	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/07/2014	Contributor address; City; State; Zip Code 3704 Eastledge Dr. Austin, TX 78731		\$350.00	1 1 1		
				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup Investments	ation / Job title (See Instructions)	Employer (See In Self Employed				
	Date	Full name of contributor ut-of-state PAC (ID)	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/28/2014	Contributor address; City; State; Zip Code 2904 Bridle Path Austin, TX 78703		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Entrepreneur	ation / Job title (See Instructions)	Employer (See In Bona Dea	structions)	<u>-</u>		
	Date	Full name of contributor	<i>#</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 309 Hacienda Place		\$100.00	1		
		Dripping Springs, TX 78620			-		
<u> </u>				<u> </u>	Texas, complete Schedule T)		
	Principal occup Director of Al	eation / Job title (See Instructions) liances	Employer (See In Kronos	ISTRUCTIONS)			

P.O.Box 12070

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 45	/48 Report: 47/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Wallace, Tina)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/29/2014	6 Contributor address; City; State; Zip Code 6405 Sumac Drive Austin, TX 78731		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Teacher	ation / Job title (See Instructions)	10 Employer (See In St. Austin Catho				
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/26/2014	Contributor address; City; State; Zip Code 6208 Harrogate Drive Austin, TX 78759		\$100.00			
		, , , , , , , , , , , , , , , , , , ,		(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Lawyer		State of Texas	- Office of the Atto	rney General		
	Date	Full name of contributor ut-of-state PAC (IE Warden, John (R))#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/23/2014	Contributor address; City; State; Zip Code 5952 Highland Hills Dr Austin, TX 787314052		\$80.00	[
		Austin, 17/0/314032		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Planner	ation / Job title (See Instructions)	Employer (See In JRW Consulting	structions)			
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 4513 Autumnleaf Hollow		\$100.00	 		
		Austin, TX 78731					
	Principal occur	eation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)		
	Consultant	and the term of th	Self Employed	,			
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/23/2014	Contributor address; City; State; Zip Code 6200 Northern Dancer Dr. Austin, TX 78746		\$100.00	 		
				//d democratic decide	Tanana namalaka Gabadula 70 🗖		
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See Ir		Texas, complete Schedule T)		
	CEO	,	Headspring	,			

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 46	/48 Report: 48/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# White, Andrew)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/20/2014	6 Contributor address; City; State; Zip Code P.O. Box 49612 Austin, TX 78765		\$100.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Andrew S. Whit				
	Date	Full name of contributor ut-of-state PAC (ID# Whitney, Leon)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 3909 Rockledge Dr. Austin, TX 78731		\$100.00	 		
					Texas, complete Schedule T)		
	Principal occup Retired	eation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/21/2014	Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin, TX 78731		\$350.00	 		
					'		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Interior Desig	pation / Job title (See Instructions) ner	Employer (See In Self Employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Whitworth, David	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/21/2014	Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin, TX 78731		\$350.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Infill Builder	eation / Job title (See Instructions)	Employer (See In Self Employed	structions)			
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/23/2014	Contributor address; City; State; Zip Code 1703 W. 33rd Austi8n, TX 78703		\$200.00	 		
				(N travel outside of	Texas, complete Schedule T)		
\vdash	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> L'</u>	TOXES, COMPLETE SOMEOBIE 1)		
	Dentist		Self Employed				

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The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 47/48 Report: 49/55		
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor D Williams, Donnie	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/29/2014	6 Contributor address; Ci 4008 Knollwood Drive Austin, TX 78731	ity; State; Zip Code		\$250.00	l
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Banker	ation / Job title (See Instructions)		10 Employer (See In: Sovereign Bank		
	Date	Full name of contributor D Williams, Mark	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/05/2014	2801 Scenic Drive	ity; State; Zip Code		\$350.00	
		Austin, TX 78703				Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Retired/Civic Volunteer			Employer (See In: N/A	structions)		
	Date	Full name of contributor Utiliams, Scott	out-of-state PAC (ID#	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/29/2014	Contributor address; C 6617 Valleyside Road Austin, TX 78731	ity; State; Zip Code		\$100.00	
	:				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Title				Employer (See Instructions) Title Company		
	Date	Full name of contributor Unchell, Maria	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; C 8607 Green Valley Austin, TX 78759-8045	ity; State; Zip Code		\$25.00	
					(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Retired				Employer (See In Retired	structions)	
	Date	Full name of contributor [Wright, Stayton	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; C 3906 Rockledge Dr Austin, TX 78731	City; State; Zip Code		\$100.00	
		, , ,			(If travel outside of	Texas, complete Schedule T)
	Principal occup Principal	eation / Job title (See Instructions))	Employer (See In Cresa Partners	structions)	TORES, COMPLEX CONTRACTOR ()

	The Instruction	ом Guide explains how to complete this form.		1 PAGE # Schedule: 48/48 Report: 50/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Yanke, Dave)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/07/2014	6 Contributor address; City; State; Zip Code 7817 Harvestman Cove Austin, TX 78731		\$200.00 i		
				•	Texas, complete Schedule T)	
9	Principal occup Utility Consul	ation / Job title (See Instructions) tant	10 Employer (See Instructions) NewGen Strategies & Solutions			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/25/2014	Contributor address; City; State; Zip Code 7913 Davis Mountain Pass Austin, TX 78726		\$50.00		
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup CEO	eation / Job title (See Instructions)	Employer (See Instructions) HDYR LLC			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/24/2014	Contributor address; City; State; Zip Code 7605 Stoneywood Drive Austin, TX 78731		\$100.00 	· 	
	!			(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Winstead PC			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/23/2014	Contributor address; City; State; Zip Code 4104 Tablerock Dr. Austin, TX 78731		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instructions) Retired			

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

P.O.Box 12070

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE# FILER NAME 3 ACCOUNT # (TEC filers) 2 Thomas, Robert (Mr.) Schedule: 1/4 Report: 52/55 00067874 4 Date 5 Payee name 05/30/2014 American Printing and Mailing 6 Amount (\$) Payee address City; State; Zip Code 1606 Headway Circle **\$**2,197.**1**4 Austin, TX 78754 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE Printing Expense** Push Cards for Events **EXPENDITURE** Payee name Austin Screen Printing 06/30/2014 Amount (\$) Payee address City; State: Zip Code 4204 Medical Parkway \$631.12 Austin, TX 78756 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Campaign T-Shirts OF **EXPENDITURE** Date Payee name **Borgelt Law** 06/04/2014 Amount (\$) Payee address City; State; Zip Code 614 S. Capital of Texas Hwy. \$162.50 Reimbursement from political contributions intended Austin, TX 78746 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Legal Services Legal Advice OF **EXPENDITURE** Payee name Kelly, Thomas (Mr.) 06/20/2014 Pavee address City: State: Zip Code Amount (\$) 1409 Quaker Ridge Drive \$5,933.63 Austin, TX 78746 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Expense Mailer OF **EXPENDITURE**

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

P.O.Box 12070

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Event Expense Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE# FILER NAME 3 ACCOUNT # (TEC filers) 2 Thomas, Robert (Mr.) 00067874 Schedule: 2/4 Report: 53/55 Date 5 Payee name Longhorn Trophy 05/21/2014 Amount (\$) Payee address City; State; Zip Code 4912 Burnet Road \$59.54 Austin, TX 78756 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Advertising Expense Campaign Name Tags OF **EXPENDITURE** Payee name 06/02/2014 Longhorn Trophy Amount (\$) Payee address City: State: Zip Code 4912 Burnet Road \$51.96 Austin, TX 78756 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Name Badges OF **EXPENDITURE** Date Payee name Opinion Analysts, Inc. 06/19/2014 Amount (\$) Payee address City; State; Zip Code 906 Rio Grande St. \$327.46 Austin, TX 78701 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Advertising Expense OF **EXPENDITURE** Date Payee name 06/30/2014 PayPal Payee address Amount (\$) City: State: Zip Code 2211 N. 1st St \$13.00 San Jose, CA 95131 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fees Fees OF **EXPENDITURE**

Printing Expense

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

P.O.Box 12070

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form. PAGE # 3 ACCOUNT # (TEC filers) FILER NAME Thomas, Robert (Mr.) 00067874 Schedule: 3/4 Report: 54/55 4 Date 5 Payee name 06/30/2014 Piryx, Inc. City; State; Zip Code 6 Amount (\$) Payee address 144 2nd Street \$1,587.61 1st Floor Reimbursement from political contributions intended San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Fees Fees **EXPENDITURE** Date Payee name Ranch Road 05/30/2014 Payee address Amount (\$) City; State; Zip Code 8906 Wall Steet \$591.05 Suite 507 Reimbursement from political contributions intended Austin, TX 78754 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Advertising Expense Notes, Cards, and Envelopes OF **EXPENDITURE** Date Payee name Ranes, Jim (Mr.) 05/30/2014 Amount (\$) Payee address City: State: Zip Code 1501 Barton Springs Rd., Ste. 233 \$286.60 Austin, TX 78704 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Design Work ΩF **EXPENDITURE**

05/12/2014
Amount (\$)
\$299.41
Reimbursement

Date

Payee name Ring Central

Payee address

City; State; Zip Code

from political contributions intended

1400

Fashion Island Blvd. 7th Floor San Mateo, CA 94404

PURPOSE EXPENDITURE

Category (See Categories listed at the top of this schedule) OTHER - Phones

Description (If travel outside of Texas, complete Schedule T) **VOIP System**

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Food/Beverage Expense Polling Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) PAGE # Thomas, Robert (Mr.) Schedule: 4/4 Report: 55/55 00067874 5 Payee name Date U.S. Postal Service 05/22/2014 6 Amount (\$) Payee address City; State; Zip Code 3575 Far West Blvd \$49.00 Austin, TX 78731 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** OTHER - Postage Stamps OF EXPENDITURE Date Payee name U.S. Postal Service 06/23/2014 Amount (\$) Payee address City; State; Zip Code 3575 Far West Blvd \$56.84 Austin, TX 78731 Reimbursement from political contributions intended (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** OTHER - Postage Postage **OF EXPENDITURE**