
	OFFICEHOLDER		FORM C/OH COVER SHEET PG 1
The C/OH Instruction Gu	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE# 1 of 24
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MS. ORA NICKNAME LAST HOUSTON	MI SUFFIX	OFFICE Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 2207 E. 22nd St. Austin, TX 78722	CITY; STATE; ZIP CODE	Date Hand-delivered coo Date Post Arked
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST SUNNY NICKNAME LAST OGUNRO	MI	Date Processed Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SU 4700 LOYOLA LN. STE. 101 AUSTIN, TX 78723	ITE #; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 928-9860	EXTENSION	
8 REPORT TYPE	January 15 30th day before elect		 15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year THRC 09/26/2014	Month Day DUGH 10/25/20	Year 14
10 ELECTION	ELECTION DATE ELECTION TA Month Day Year Prima 11/04/2014		General Special
11 OFFICE	OFFICE HELD (if any) City Conuncil District 1 District 1	12 OFFICE SOUGHT (if known)	
	GO TO	PAGE 2	
			Electronic Filing Version 3.4.6

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME HOUS	STON, ORA (Ms.)		14 ACCOUNT # 00000001	(Ethics Commission filers)	
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the ca nout the candidate's or officeholder's knowledge or consent. Candidat ay receive notice of such expenditures	ndidate / officeholder. es and officeholders a	These expenditures may are required to report this	
POLITICAL COMMITTEE(S)		COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	210.21	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,615.21	
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	D \$	0.00	
	4. TOTAL I	POLITICAL EXPENDITURES	\$	17,611.00	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	19,916.15	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	0.00	
17 AFFIDAVIT					
STATE STATE	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. My Commission Expires November 19, 2018				
		Signature of C	andidate or Officer	nolder	

AFFIX NOTARY STAMP / SEAL ABOVE

			No il id
Sworn to and subs	cribed before	me, by the said	Dea Houston
of Actobur	,20 14	, to certify which	ch, witness my hand and seal of office.

HA this the day

 $20 \underline{14}$, to certify which, witness my hand and seal of office.

 $\mathfrak{a} \leq$ Signature of officer administering oath

24 linas Print name of officer administering oath

Title of officer administering oath

CAL CONTRIBUTIONS R THAN PLEDGES OR LOAN	S		SCHEDULE A
ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/14	4 Report: 3/24
HOUSTON, ORA (Ms.)	· · · · · ·		(Ethics Commission filers)
5 Full name of contributor Dout-of-state PAC (ID#_ Anderson, David)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3808 Hidden Holw Austin, TX 78731		\$100.00 	
		(If travel outside of T	exas, complete Schedule T)
	0 Employer (See In Selfemployed	structions)	
Full name of contributor Dout-of-state PAC (ID# Anderson, Pasty)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 6505 Ashland Circle Austin, TX 78723		\$40.00 <mark> </mark>	
		(If travel outside of T	exas, complete Schedule T)
pation / Job title (See Instructions)	Employer (See In Retired	· ·	<u></u>
Full name of contributor D out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11401 Madrid Dr Austin, TX 78759		\$100.00 	
		(If travel outside of T	exas, complete Schedule T)
pation / Job title (See Instructions)	Employer (See In AISD	structions)	
Full name of contributor Dout-of-state PAC (ID#_ Austin, Orvis)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4402 Elmsgrove Dr Austin, TX 78721		\$40.00	
		(If travel outside of T	exas, complete Schedule T)
pation / Job title (See Instructions)	Employer (See In Retired	istructions)	
Full name of contributor Dout-of-state PAC (ID#_ Austin Apt Assoc Pac Committee)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4107 Medical Pkwy #100 Austin, TX 78758	<i>, </i>	\$350.00	
		(If travel outside of 1	exas, complete Schedule T)
		1 1	
	ATHAN PLEDGES OR LOAN ION GUIDE explains how to complete this form. HOUSTON, ORA (Ms.) 5 Full name of contributor anderson, David 6 Contributor address; 3808 Hidden Holw Austin, TX 78731 pation / Job title (See Instructions) d Full name of contributor anderson, Pasty Contributor address; City; State; Zip Code 6505 Ashland Circle Austin, TX 78723 pation / Job title (See Instructions) Fuil name of contributor Contributor address; City; State; Zip Code Ashford, Jesse & Mary Contributor address; City; State; Zip Code 11401 Madrid Dr Austin, TX 78759 pation / Job title (See Instructions) Full name of contributor Contributor address; City; State; Zip Code 1401 Madrid Dr Austin, TX 78759 pation / Job title (See Instructions) Full name of contributor Contributor address; City; State; Zip Code 4402 Elmsgrove Dr Austin, TX 78721 pation / Job title (See Instructions) Full name of contributor Contributor ad	R THAN PLEDGES OR LOANS R Guice explains how to complete this form. HOUSTON, ORA (Ms.) 5 Full name of contributor out-of-state PAC (ID#) Anderson, David 6 6 Contributor address; City; State; Zip Code 3808 Hidden Holw Austin, TX 78731 pation / Job title (See Instructions) 10 Employer (See In Setfemployed Full name of contributor out-of-state PAC (ID#) Anderson, Pasty	ATHAN PLEDGES OR LOANS In PAGE # Schedule: 1/1. HOUSTON, ORA (Ms.) 3 ACCOUNT # O0000001 5 Full name of contributor anderson, David 6 Contributor address; 3008 Hidden Holw Austin, TX 78731 10 Employer (See Instructions) Anderson, Pasty Anderson, Pasty Contributor address; City: State: Zip Code Selfermployed Full name of contributor Contributor address; City: State: Zip Code Anderson, Pasty Contributor address; City: State: Zip Code Ashford, Jesse & Mary Contributor address; City: State: Zip Code Ashford, Jesse & Mary Contributor address; City: State: Zip Code Ashford, Job title (See Instructions) Employer (See Instructions) Retired Pation / Job title (See Instructions) Contributor address; City: State: Zip Code Ashford, Jesse & Mary Austin, Orvis C

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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	The Instructio	ON GUIDE explains how to complete this form.		1	PAGE # Schedule: 2/1	4	Report: 4/24
2	FILER NAME	HOUSTON, ORA (Ms.)		3	ACCOUNT # 00000001	(Ei	thics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Bailey & Miller, Victoria & Brian)	7 c	Amount of ontribution (\$)	8	In-kind contribution description (if applicable)
	10/14/2014	6 Contributor address; City; State; Zip Code 1309 Aggie Lane Austin, TX 78757			\$25.00	 	
				(If	travel outside of	Tex	as, complete Schedule T)
9	Principal occup Selfemployed	ation / Job title (See Instructions)	10 Employer (See In Selfemployed	strue	ctions)		
	Date	Full name of contributor Dout-of-state PAC (ID# Binder, Dennia)	с	Amount of ontribution (\$)	 	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 11519 Sneffelsnet Mountant Helotes, TX 78023			\$90.00	 	
				(If	travel outside of	ı Tex	as, complete Schedule T) [
	Principal occup Director Interi	ation / Job title (See Instructions) jor Design	Employer (See In Miller Flooring	stru	ctions)		
	Date	Full name of contributor Dout-of-state PAC (ID# Brian, Joseph)	c	Amount of ontribution (\$)	 	In-kind contribution description (if applicable)
	10/16/2014	Contributor address; City; State; Zip Code 8202 Edgemoor Austin, TX 78749			\$50.00	1 	
				(If	travel outside of	Tex	as, complete Schedule T)
	Principal occup Selfemployed	ation / Job title (See Instructions)	Employer (See In Selfemployed	stru	ctions)		
	Date	Full name of contributor Dout-of-state PAC (ID# Brocker, Fred)	c	Amount of ontribution (\$)		In-kind contribution description (if applicable)
	10/14/2014	Contributor address; City; State; Zip Code 2813 Gardendale Dr Fort Worth, TX 76120			\$50.00	 	
				(If	travel outside of	Tex	as, complete Schedule T)
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	stru	ctions)		
	Date	Full name of contributor Dout-of-state PAC (ID# Bulla, Dale & Pat)	c	Amount of contribution (\$)	 	In-kind contribution description (if applicable)
	10/15/2014	Contributor address; City; State; Zip Code 7202 Foxtree Cv Austin, TX 78750			\$20.00	 	
				116	travel outside of	Tav	as, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See Ir			. 44	
	Retired		Retired		,		

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	CAL CONTRIBUTIONS	NS		SCHEDULE A
The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/	14 Report: 5/24
2 FILER NAME	HOUSTON, ORA (Ms.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor □ out-of-state PAC (ID# Buttrey, Sarah (Mr.& Mrs))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/08/2014	6 Contributor address; City; State; Zip Code 902 W 31st ST Austin, TX 78705	·····	\$500.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Doctor	ation / Job title (See Instructions)	10 Employer (See In: Seton	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Casias, Michael)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/14/2014	Contributor address; City; State; Zip Code 2115 Riverview Austin, TX 78702		\$60.00	
			(If travel outside of	f Texas, complete Schedule T)
Principal occup Selfemployed	ation / Job title (See Instructions)	Employer (See In Brilliant City	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Clark, Mary)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/30/2014	Contributor address; City; State; Zip Code 11701 Metric Blvd 1214 Austin, TX 78758		\$100.00	1
			(If travel outside of	f Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Crossland, Shirley)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/14/2014	Contributor address; City; State; Zip Code 1026 Clayton Ln Austin, TX 78723		\$50.00	
		<u> </u>	••••••	f Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Dale, Beverly (Mr.& Mrs)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/15/2014	Contributor address; City; State; Zip Code 1111 W 12th St Austin, TX 78703		\$500.00	
		Employee (See 1-	•	f Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired		

	TICAL CONTRIBUTIONS ER THAN PLEDGES OR LOAN	NS		SCHEDULE A
The Inst	RUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/	14 Report: 6/24
FILER N	ME HOUSTON, ORA (Ms.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
Date	5 Full name of contributor Dout-of-state PAC (ID# Denkler, Ann)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/16/20	14 6 Contributor address; City; State; Zip Code 6112 Highlandale Austin, TX 78731		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
	occupation / Job title (See Instructions) st Domestic Relations	10 Employer (See In Travis County	structions)	·
Date	Full name of contributor Dout-of-state PAC (ID# Dilworth, Nola Marie	······································	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/03/20	1 4 Contributor address; City; State; Zip Code 3302 Woodbrian Dr Austin, TX 78723	· · · · · · · · · · · · · · · · · · ·	\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal Selfemp	occupation / Job title (See Instructions) oyed	Employer (See In Selfemployed	structions)	
Date	Full name of contributor out-of-state PAC (ID# Edelen-Delco, M.F	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/14/20	14 Contributor address; City; State; Zip Code P O BOX 141204 Austin, TX 78714		\$100.00	
			(if travel outside of	Texas, complete Schedule T)
Principal Adminis	occupation / Job title (See Instructions) rator	Employer (See In ACC	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Evans, Derrick	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/07/20	14 Contributor address; City; State; Zip Code 2011 Poquito St Austin, TX 78722		\$350.00	1
			(if travel outside of	· Texas, complete Schedule T)
Principal Sales	occupation / Job title (See Instructions)	Employer (See In Freescale Sem	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Evans, Roxanne	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/07/20	14 Contributor address; City; State; Zip Code P O BOX 142534 Austin, TX 78714		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal Selfemp	ccupation / Job title (See Instructions) oyed	Employer (See Ir Selfemployed	structions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

	The Instruction	N Guide explains how to complete this form.	-	1 PAGE # Schedule: 5/*	14 Report: 7/24
2	FILER NAME	HOUSTON, ORA (Ms.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Flores, Fabiola	t)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/16/2014	6 Contributor address; City; State; Zip Code 924 E 51st ST APT111 Austin, TX 78751		\$50.00	 Texas, complete Schedule T}
				`	
9	Administrator	ation / Job title (See Instructions)	10 Employer (See In TRLA,Inc		
	Date	Full name of contributor D out-of-state PAC (ID# Friedman, Jeff	±)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/09/2014	Contributor address; City; State; Zip Code 3500 Jefferson St Austin, TX 78731		\$180.00	1
					Texas, complete Schedule T)
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Capra & Cavelli		
	Date	Full name of contributor Dout-of-state PAC (ID# Fuchs, Ford	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/16/2014	Contributor address; City; State; Zip Code 1905 Sierra Verde Austin, TX 78759		\$50.00	
					Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In TRLA, INC	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Gardner, Bonny	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/20/2014	Contributor address; City; State; Zip Code 3207 Kerbey Ln Austin, TX 78703		\$50.00	l I I
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Psychologist	ation / Job title (See Instructions)	Employer (See In Bonny Gardner		
	Date	Full name of contributor D out-of-state PAC (ID# Gerson, Steve & Lora (Mr.& Mrs)	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Code 5206 Turnabout Ln Austin, TX 78731		\$50.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
		Dation / Job title (See Instructions) Distituent Services	Employer (See In senator Kirk Wa	structions)	
			L		Stantonia Cilian Maraina 2.4.4

	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOAN	S		SCHEDULE A
	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/1	4 Report: 8/24
2 FILER NAME	HOUSTON, ORA (Ms.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
ate Date	5 Full name of contributor D out-of-state PAC (ID#_ Ghosh, Pinaki)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/15/2014	6 Contributor address; City; State; Zip Code 113 W 55th 1/2 ST Austin, ⊤X 78751		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Contractor	upation / Job title (See Instructions) 1	10 Employer (See Ir Selfemployed	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Gleckler, Milly)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/29/2014	Contributor address; City; State; Zip Code 205 Nelray Blvd Austin, TX 78751		\$1 00.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Ir Retired	structions)	
Date	Full name of contributor Glenn III, Noble)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/03/2014	Contributor address; City; State; Zip Code 8800 Ranch Road 620 N.APT 335 Austin, TN 78726		\$300.00	
			1.	Texas, complete Schedule T)
Principal occi Selfemploye	upation / Job title (See Instructions) ed	Employer (See Ir Seifemployed	nstructions)	
Date	Full name of contributor Glover, Howard)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/21/2014	Contributor address; City; State; Zip Code 812 Atteberry Ln Lancaster, TX 75145		\$50.00	l L İ
			(If travel outside of	Texas, complete Schedule T)
Principal occi Retired	upation / Job title (See Instructions)	Employer (See Ir Retired	structions)	
Date	Full name of contributor Dout-of-state PAC (ID#_ Gordon, Frank)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/20/2014	Contributor address; City; State; Zip Code 704 W Monroe St Unit A Austin, TX 78704		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occ Selfemploye	upation / Job title (See Instructions)	Employer (See II Selfemployed		<u>_</u>

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 7/14 Report: 9/24 (Ethics Commission filers) 3 ACCOUNT # 2 FILER NAME HOUSTON, ORA (Ms.) 00000001 In-kind contribution 4 5 Full name of contributor out-of-state PAC (ID#_ 7 Amount of 1 8 Date contribution (\$) description (if applicable) Guillen, Josue 10/16/2014 6 Contributor address; City; State; Zip Code \$50.00 1312 Willon St Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 AVAA7 Sr Online Campaign Manager Full name of contributor D out-of-state PAC (ID#) In-kind contribution Amount of Date description (if applicable) contribution (\$) Guillory, Tonya 10/09/2014 City; State; Zip Code \$100.00 Contributor address; P O BOX 16696 Austin, TX 78761 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) St Francis School Teacher In-kind contribution Full name of contributor 🛛 out-of-state PAC (ID# Amount of Date contribution (\$) description (if applicable) Hall, David 10/14/2014 Contributor address; City; State; Zip Code \$200.00 1011 S Indiana Ave Weslaco, TX 78596 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Texas Rio Grande Lrgal Aid Lawyer In-kind contribution Full name of contributor D out-of-state PAC (ID# Amount of Date description (if applicable) contribution (\$) Hartwell, Karen 10/20/2014 Contributor address: City; State; Zip Code \$250.00 5502 B Buffald Pass Austin, TX 78745 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired In-kind contribution Date Full name of contributor out-of-state PAC (ID# Amount of description (if applicable) contribution (\$) Hatch, Tom 10/16/2014 Contributor address; City; State; Zip Code \$350.00 1102 B East 8th ST Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Selfemployed Selfemployed Electronic Eiling Marrian 3 4

	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOAN	IS		SCHEDULE A
The Instruct	TION GUIDE explains how to complete this form.	<u> </u>	1 PAGE #	4 Roport: 10/24
FILER NAME	HOUSTON, ORA (Ms.)		3 ACCOUNT #	4 Report: 10/24 (Ethics Commission filers)
Date	5 Full name of contributor D out-of-state PAC (ID#_ HBA HOME PAC)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/10/2014	6 Contributor address; City; State; Zip Code 8140 EXCHANGE DR AUSTIN, TX 78754	•••••	\$350.00	
			(If travel outside of '	Texas, complete Schedule T)
	upation / Job title (See Instructions) ACTION COMMITTEE	10 Employer (See In HBA HOME PA		· · · · · · · · · · · · · · · ·
Date	Full name of contributor out-of-state PAC (ID# Hodge, Annie)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/20/2014	Contributor address; City; State; Zip Code 5935 Southtown st Houston, TX 77033	· · · · · · · · · · · · · · · · · · ·	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Retired	upation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor ut-of-state PAC (ID#_ Hunt II, Willis & Edalma)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/10/2014	Contributor address; City; State; Zip Code 2104 East 13 St Austin, TX 78702		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occi Real Estate	upation / Job title (See Instructions)	Employer (See Ir Hunt Realtors	istructions)	
Date	Full name of contributor D out-of-state PAC (ID# Johnson & McMurrey, Dorothy & Sean)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/16/2014	Contributor address; City; State; Zip Code 1604 E 11th St Austin, TX 78702	••••••••••••••••••••••••••••••••••••••	\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occi Attorney	upation / Job title (See Instructions)	Employer (See Ir TRLA, INC	structions)	·····
Date	Full name of contributor Gout-of-state PAC (ID# Jones, Joanne)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/20/2014	Contributor address; City; State; Zip Code 5209 Provencial DR Austin, TX 78724	· · · · · · · · · · · · · · · · · · ·	\$100.00	
			(if travel outside of	' Texas, complete Schedule T)
Principal occ Retired	upation / Job title (See Instructions)	Employer (See Ir Retired		. shar, complete senedule () L

	TICAL CONTRIBUTIONS ER THAN PLEDGES OR LOAN	IS		SCHEDULE A
The Instru	UCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/*	14 Report: 11/24
2 FILER NAI	ME HOUSTON, ORA (Ms.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Jones, Michael)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/14/20	14 6 Contributor address; City; State; Zip Code 9306 Hudson Bend Cir Houston, TX 77095		\$100.00	 !
	· ·		<u> </u>	Texas, complete Schedule T)
9 Principal o HR Speci	ccupation / Job title (See Instructions) alist	10 Employer (See In Marathon Oil C		
Date	Full name of contributor D out-of-state PAC (ID# Lynch, Louise)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/16/20	14 Contributor address; City; State; Zip Code 8202 Edgemoor PL Austin, TX 78740		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal o Administr	ccupation / Job title (See Instructions) ator	Employer (See Ir Austin Travis C		
Date	Full name of contributor Dout-of-state PAC (ID# Mason, Norman & Lavonne)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/16/20	14 Contributor address; City; State; Zip Code 7104 Mesa Drive Austin, TX 78731		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal o Debtist	ccupation / Job title (See Instructions)	Employer (See In Selfemployed	istructions)	
Date	Full name of contributor D out-of-state PAC (ID# McCly, Fred)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/14/20	14 Contributor address; City; State; Zip Code 2316 Thrashe Lane Austin, TX 78741		\$50.00	•
			(If travel outside of	Texas, complete Schedule T)
Principal o Selfemple	ccupation / Job title (See Instructions) byed	Employer (See Ir Selfemployed	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Meachum, Kurt	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/15/20	14 Contributor address; City; State; Zip Code 3900 Sidehill Path Austin, TX 78731		\$150.00	
			(if travel outside of	Texas, complete Schedule T)
Principal o Owner	ccupation / Job title (See Instructions)	Employer (See in Blue Roots Stra	I <u> </u>	

	CAL CONTRIBUTIONS	IS		SCHEDULE A
	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/	/14 Report: 12/24
2 FILER NAME	HOUSTON, ORA (Ms.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Mock, Nelson)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/1 5/2014	6 Contributor address; City; State; Zip Code 7102 Daugherty St Austin, TX 78757		\$50.00 	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Lawyer	pation / Job title (See Instructions)	10 Employer (See In Texas RioGran		
Date	Full name of contributor Dout-of-state PAC (ID# Mungnuia, Emma)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/25/2014	Contributor address; City; State; Zip Code 1903 Ridgeland San Antonio, TX 78250	••••••••••••••••••••••••••••••••••••••	\$60.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Educator	pation / Job title (See Instructions)	Employer (See In Texas A & M U		
Date	Full name of contributor Dout-of-state PAC (ID# Needham, Terri)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/03/20 14	Contributor address; City; State; Zip Code 12521 Belcara Place Austin, TX 78732		\$300.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Selfemployed	bation / Job title (See Instructions)	Employer (See In Selfemployed	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Owens, Margaret)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/24/2014	Contributor address; City; State; Zip Code 7109 Geneva Dr Austin, TX 78723		\$100.00	
			· ·	Texas, complete Schedule T)
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Ir Retired	istructions)	
Date	Full name of contributor Dout-of-state PAC (ID# Quander, Joseph)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/25/2014	Contributor address; City; State; Zip Code 12370 Alameda Trace Cir Austin, TX 78727		\$50.00	 1
	<u> </u>			Texas, complete Schedule T)
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Ir Retired	nstructions)	

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 11/14 Report: 13/24 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME HOUSTON, ORA (Ms.) 00000001 In-kind contribution 4 Date 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of 18 contribution (\$) description (if applicable) Randel, Joe 10/06/2014 6 Contributor address; City; State; Zip Code \$150.00 604 Allen St Austin, TX 78702 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) 9 The University of Texas at Austin Arts Administrator Full name of contributor D out-of-state PAC (ID#_ In-kind contribution Amount of Date contribution (\$) description (if applicable) Reagan, Daniel & Karl Jo (Mr.& Mrs) 10/01/2014 Contributor address; City; State; Zip Code \$700.00 1939 E.Laird Dr Salt Lake City, UT 84103-5205 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) President Reagan Outdoor Advertising Amount of In-kind contribution Full name of contributor out-of-state PAC (ID#_ Date contribution (\$) description (if applicable) Richey, Howie 09/27/2014 Contributor address; City; State; Zip Code \$30.00 6501 Linda Ln Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Word Wrestler State Of Texas In-kind contribution Full name of contributor D out-of-state PAC (ID# Amount of Date Т contribution (\$) description (if applicable) Ringer, Frank Contributor address; City; State; Zip Code \$50.00 10/22/2014 11828 Shropshire Blvd Austin, TX 78753 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Selfemployed Landscaper Full name of contributor D out-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Rips, Geoffey 10/16/2014 Contributor address; City; State; Zip Code \$40.00 1311 Ardwood Rd Austin, TX 78722 (if travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Selfemployed Lawyer Cindrania Cilina Mamina 3

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The Instruction Guide explains how to complete this form. Schedule: 12/14 Report: 14/24 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME HOUSTON, ORA (Ms.) 00000001 In-kind contribution 4 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of 8 | Date description (if applicable) contribution (\$) Simmons, Robert E. 10/24/2014 6 Contributor address; City; State; Zip Code \$40.00 PO Box 6576 Austin, TX 78752-6578 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) 9 N/A Retired Full name of contributor D out-of-state PAC (ID#_ Amount of In-kind contribution Date contribution (\$) description (if applicable) Smith, Kevin 10/19/2014 Contributor address; City; State; Zip Code \$100.00 1004A E 13th St Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Empirico Delvelopment **Real Estate** Amount of In-kind contribution Full name of contributor D out-of-state PAC (ID# Date contribution (\$) description (if applicable) Southwest Laborers District Council SWLDC PAC City; State; Zip Code \$350.00 10/16/2014 Contributor address; 11720 East 21th ST Suite D Tulsa, OK 74129 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) SWLDC PAC SWLDC PAC In-kind contribution Full name of contributor D out-of-state PAC (ID# Amount of Date description (if applicable) contribution (\$) Stonegate Neighborhood Assoc . City; State; Zip Code \$50.00 10/25/2014 Contributor address; 4402 Elmsgrove dr Austin, TX 78721 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Stonegate Neighborhood Ass Stonegate Asso Full name of contributor D out-of-state PAC (ID#_ In-kind contribution Date Amount of description (if applicable) contribution (\$) Texas Taxi Political Action Committe 10/14/2014 Contributor address; City; State; Zip Code \$350.00 919 Congress Ave STE 1500 Austin, ŤX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Texas Taxi Political Action Committe **Political Action Committee**

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 13/14 Report: 15/24 (Ethics Commission filers) 3 ACCOUNT # 2 FILER NAME HOUSTON, ORA (Ms.) 00000001 7 In-kind contribution 4 5 Full name of contributor out-of-state PAC (ID#) Amount of 18 Date description (if applicable) contribution (\$) Torres, Aurelio 10/10/2014 6 Contributor address; City; State; Zip Code \$100.00 2201 Manor Rd Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Selfemployed Selfemployed out-of-state PAC (ID#) In-kind contribution Date Full name of contributor Amount of description (if applicable) contribution (\$) Vaughn, Joanna 10/16/2014 Contributor address; City; State; Zip Code \$100.00 1008 E 14th ST Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired In-kind contribution Date Full name of contributor D out-of-state PAC (ID#_ Amount of contribution (\$) description (if applicable) Walker, Nathaniel 10/15/2014 Contributor address; City; State; Zip Code \$200.00 5506 Windward Dr Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Blue Roots Strategies, Inc Owner Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Wheelus, Daniel . 10/03/2014 Contributor address; City; State; Zip Code \$100.00 3103 Bee Cave Rd Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Selfemboyed Attorney out-of-state PAC (ID#) In-kind contribution Date Full name of contributor Amount of contribution (\$) description (if applicable) Willis, Eric & Sandra City; State; Zip Code 10/14/2014 Contributor address; \$25.00 6405 Chemmey Creek Cir Apt A Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Retired

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/14 Report: 16/24		
2	FILER NAME	HOUSTON, ORA (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00000001		
4	Date 5 Full name of contributor D out-of-state PAC (ID# Wormley, Rodney L.& Gail			7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)		
	10/14/2014	6 Contributor address; City; State; Zip Code 12105 Emerald Oaks Dr. Austin, TX 78730		\$30.00 I		
				(If travel outside of Texas, complete Schedule T)		
9	Principal occup Technician	ation / Job title (See Instructions)	10 Employer (See In AT&T	structions)		

Electropic Ciling Marsing 2.4 6

POLITICAL EXPENDITURES

(512)463-5800 TDD 1-800-735-2989

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Loan Repayment/Reimbursement								
Accounting/Bank	king Legal Services Solicitation/Fund	draising Expense Transportation Equipment & Related Expense						
Consulting Expe Event Expense	Polling Expense Travel Out Of D							
Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form.								
1 PAGE#	2 FILER NAME HOUSTON, ORA (Ms.)	3 ACCOUNT # (TEC filers)						
Schedule: 1/8 Re		0000001						
4 Date	5 Payee name							
10/15/2014	AZUL STRATEGIES							
6 Amount (\$)	7 Payee address City; State; Zip Code							
\$5,520.29	1802 ANN ARDOR AUSTIN, TX 78704							
	A03111, 1X 10104							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) cards and mailing						
OF	Printing Expense							
EXPENDITURE		Check if Austin, TX, officeholder living expense						
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:						
direct expenditure								
to benefit C/OH								
Date	Payee name							
10/01/2014	CALDEKON, SLIERWIN	··						
Amount (\$)	Payee address City; State; Zip Code							
\$125.00	11519 VILLA HEIGHTS DR							
	HOUSTON, TX 77066							
		• · · · · · · · · · · · · · · · · · · ·						
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)						
PURPOSE OF	Salaries/Wages/Contract Labor	SALARY						
EXPENDITURE								
		Office sought: Office held:						
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:						
to benefit C/OH								
Date	Payee name							
10/15/2014	CALDEKON, SLIERWIN							
Amount (\$)	Payee address City; State; Zip Code							
\$125.00	11519 VILLA HEIGHTS DR							
¢120.00	HOUSTON, TX 77066							
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)						
PURPOSE OF	Salaries/Wages/Contract Labor	salary						
EXPENDITURE								
		Check if Austin, TX, officeholder living expense						
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:						
direct expenditure to benefit C/OH								
Date	Payee name							
10/03/2014	Craigslist.ORG							
Amount (\$)	Payee address City; State; Zip Code							
\$25.00								
	San Francisci, CA 94122							
· · · · · · · · · · · · · · · · · · ·	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)						
PURPOSE	Advertising Expense	Advertising Expense						
	- · ·							
		Check if Austin, TX, officeholder living expense						
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:						
direct expenditure to benefit C/OH								

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITIC	SCHEDULE F		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fund nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	Contract Labor Loan Re draising Expense Transpo t Contribu strict Cand I/Rental Expense OTHER	payment/Reimbursement rtation Equipment & Related Expense tions/Donations Made By idate/Officeholder/Political Committee (enter a category not listed above)
1 PAGE # Schedule: 2/8 Re	2 FILER NAME		3 ACCOUNT # (TEC filers) 00000001
4 Date 10/01/2014	5 Payee name CROCKEH, SARAH		1
6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 2004 A EAST 9th ST AUSTIN, TX 78702		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	WAGÈS	utside of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/15/2014	Payee name CROCKEH, SARAH		
Amount (\$) \$250.00	Payee address City; State; Zip Code 2004 A EAST 9th ST AUSTIN, TX 78702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel o salary	utside of Texas, complete Schedule T)
		Check if Austin, TX, offic	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/14/2014	Payee name Facebook Inc		τ
Amount (\$) \$26.57	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Advertising	outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, offic Office sought:	eholder living expense Office held:
Date 10/23/2014	Payee name Facebook Inc		· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address City; State; Zip Code	<u></u>	
\$26.40	1601 Willow Road Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel o advertising	outside of Texas, complete Schedule T)
		Check if Austin, TX, offic	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ng Legal Services Solicitation/Fundraising	act Labor Loan Repayment/Reimbursement g Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee al Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 3/8 Re	port: 19/24 2 FILER NAME HOUSTON, ORA (Ms.)	3 ACCOUNT # (TEC filers) 00000001
4 Date 10/06/2014	5 Payee name GOOGLE	
6 Amount (\$) \$30.00	7 Payee address City; State; Zip Code 9606 NORTH MOPAC EXPRESSWAY SUITE 700 AUSTIN, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/01/2014	Payee name HARVEY, MATTHEW	
Amount (\$)	Payee address City; State; Zip Code	· · · ·
\$1,000.00	403 KREBS LN AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Salaries
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/15/2014	Payee name HARVEY, MATTHEW	
Amount (\$) \$1,000.00	Payee address City; State; Zip Code 403 KREBS LN AUSTIN, TX 78704	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/01/2014	Payee name JFA REALTY HOLDING	
Amount (\$) \$930.00	Payee address City; State; Zip Code 7333 E HWY 290 AUSTIN, TX 78723	·
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) Rental Expense Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: Electronic Filing Version 3.4

P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITICAL	EXPENDITURES
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SCHEDULE F

Advertising Expe		ards/Memorial Expense S	URE CATEGO	tract Labor		ent/Reimbursement	Evnense		
Accounting/Bank Consulting Experience Event Expense Fees	anking Legal Services Solicitation/Fundraising Expense Transportation E kpense Food/Beverage Expense Travel In District Contributions/De se Polling Expense Travel Out Of District Candidate/Of Printing Expense Office Overhead/Rental Expense OTHER (enter and the second seco					Donations Made By Officeholder/Political C	Equipment & Related Expense onations Made By fficeholder/Political Committee a category not listed above)		
		The Instruction Guide	explains how to	o complete this fo	orm.				
1 PAGE # Schedule: 4/8 Re	enort [.] 20/24	2 FILER NAME HOUSTON, ORA (Ms.)				3 ACCOUNT # 00000001	(TEC filers)		
4 Date	5 Payee name								
10/01/2014	KHOUNLO								
6 Amount (\$)	7 Payee address	• • •	Code						
\$125.00	13723 MAGO CYPRESS,	DLIA MANOR RD TX 77429							
8 PURPOSE OF	· · · · · ·	e Categories listed at the top of this ges/Contract Labor	schedule)	(b) Description SALARY	(If travel outside	e of Texas, complete S	ichedule T) 🗌		
EXPENDITURE					n TX officebold	ler living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office so		Office held:	-		
Date	Payee name								
10/15/2014	KHOUNLO,	SOPHIE		<u> </u>			_		
Amount (\$)	Payee address	••••••	Code						
\$125.00	13723 MAGO CYPRESS,	OLIA MANOR RD TX 77429							
PURPOSE		Categories listed at the top of this	schedule)	Description wages	(If travel outside	e of Texas, complete S	Schedule T)		
OF	Salaries/Wa	ges/Contract Labor		mages					
EXPENDITURE				Check if Austi	n. TX. officehold	ler living expense	•		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office so		Office held:			
Date	Payee name								
10/08/2014	LA VOZ NEV	VSPAPERS							
Amount (\$)	Payee addres	s City; State; Zip	Code						
\$150.00	P O BOX 19 AUSTIN, TX								
PURPOSE	Category (See Advertising E	e Categories listed at the top of this Expense	schedule)	Description Advertising	(If travel outside	e of Texas, complete S	Schedule T) 📋		
EXPENDITURE				Check if Austi	n. TX. officehold	ler living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name	· · · · · ·	Office so		Office held:			
Date	Payee name								
10/02/2014	NGP VAN					<u> </u>			
Amount (\$)	Payee addres		Code	_					
\$320.00		STREET NW SUITE 500 ON, DC 20005							
PURPOSE OF EXPENDITURE	Category (See Consulting E	e Categories listed at the top of this xpense	schedule)	Description Online serv	(If travel outside ices and fund	e of Texas, complete S raising	Schedule T) 🗌		
						der living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office so	ught:	Office held:	:		

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

SCHEDULE F

Advertising Expe Accounting/Banki Consulting Exper Event Expense Fees	nking Legal Services Solicitation/Fundraising Expense Transportation Equipment & ense Food/Beverage Expense Travel In District Contributions/Donations Ma				
1 PAGE #	2 FILER NAME	3 ACCOUNT # (TEC filers)			
Schedule: 5/8 Re		0000001			
4 Date	5 Payee name				
10/20/2014	OFFICE MAX				
6 Amount (\$)	7 Payee address City; State; Zip Code				
\$73.97	4615 N LAMAR BLVD AUSTIN, TX 78751				
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)			
PURPOSE	Office Overhead/Rental Expense	toner			
	· · · · · · · · · · · · · · · · · · ·	Check if Austin, TX, officeholder living expense			
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:			
direct expenditure to benefit C/OH	1				
	Paves reme				
Date 10/21/2014	Payee name Ogunro, Sunday				
10/21/2014	Ogunro, Sunday				
Amount (\$)	Payee address City; State; Zip Code				
\$2,000.00	4700 Loyola Ln Suite 101				
	Austin, TX 78723				
		Description (If travel outside of Texas, complete Schedule T)			
PURPOSE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Bookkeeping Services			
OF	· · · · · · · · · · · · · · · · · · ·				
EXPENDITURE		Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:			
to benefit C/OH					
Date	Payee name				
10/01/2014	PANZER, JONATHAN				
Amount (\$)	Payee address City; State; Zip Code				
\$1,500.00	2814 FOSTER LN				
	F144 AUSTIN, TX 78731	1.			
DUDDOGE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)			
PURPOSE OF	Salaries/Wages/Contract Labor	salaries			
EXPENDITURE					
0	Condidate / Officeholder	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:			
to benefit C/OH					
Date	Payee name				
10/15/2014	PANZER, JONATHAN				
Amount (\$)	Payee address City; State; Zip Code				
\$1,500.00	2814 FOSTER LN				
ψ1,000.00	F144				
	AUSTIN, TX 78731				
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)			
PURPOSE OF	Advertising Expense	salary			
		Check if Austin, TX, officeholder living expense			
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:			
direct expenditure to benefit C/OH					
		Electronic Filing Version 3.4.6			

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITICAL EXPENDITURES

SCHEDULE F

	EXPENDITURE CATE					
Advertising Expe Accounting/Bank	ing Legal Services Solicitation/Fund	raising Expense Transportation Equipment & Related Expense				
Consulting Expe Event Expense		Contributions/Donations Made By				
Fees	Printing Expense Office Overhead/	Rental Expense OTHER (enter a category not listed above)				
	The INSTRUCTION GUIDE explains how	3 ACCOUNT # (TEC filers)				
1 PAGE #	2 FILER NAME HOUSTON, ORA (Ms.)	00000001				
Schedule: 6/8 Re 4 Date	5 Payee name					
10/10/2014	PIZZA HUT					
6 Amount (\$)	7 Payee address City; State; Zip Code					
\$40.55	6307 Cameron Rd					
	AUSTIN, TX 78723					
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)				
PURPOSE	Food/Beverage Expense	Food				
		Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:				
to benefit C/OH						
Date	Payee name					
10/17/2014	PIZZA HUT					
Arnount (\$)	Payee address City; State; Zip Code					
\$39.72	6307 Cameron Rd AUSTIN, TX 78723					
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
PURPOSE	Food/Beverage Expense	food				
		Check if Austin, TX, officeholder living expense Office sought: Office held:				
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:				
to benefit C/OH		· · · · · · · · · · · · · · · · · · ·				
Date						
10/01/2014	RODRIGUEZ, AMANDA	· · · · · · · · · · · · · · · · · · ·				
Amount (\$)	Payee address City; State; Zip Code 8313 TRIPOD DRIVE					
\$500.00	AUSTIN, TX 78747					
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)				
PURPOSE OF	Salaries/Wages/Contract Labor	salary				
EXPENDITURE						
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:				
direct expenditure to benefit C/OH	· · · · · · · · · · · · · · · · · · ·	•				
Date 10/15/2014	Payee name RODRIGUEZ, AMANDA					
Amount (\$)	Payee address City; State; Zip Code					
\$500.00						
4300.00	AUSTIN, TX 78747					
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) salary				
OF	Salaries/Wages/Contract Labor Salary					
EXPENDITURE		Check if Austin, TX, officeholder living expense				
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:				
	Candidate / Officeholder name					

 Texas Ethics Commission
 P.O.Box 12070
 Austin, Texas 78711-2070
 (512)463-5800 TDD 1-800-735-2989

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense	ing Legal Services Solicitation/F	es/Contract Labor Loan Repayment/Reimbursement undraising Expense Transportation Equipment & Related Expense rict District Candidate/Officeholder/Political Committee
Fees		ead/Rental Expense OTHER (enter a category not listed above) how to complete this form.
1 PAGE # Schedule: 7/8 Re		3 ACCOUNT # (TEC filers) 00000001
4 Date 10/02/2014	5 Payee name SAGE PAYMENT SOLUTIONS	
6 Amount (\$) \$385.95	7 Payee address City; State; Zip Code 1750 OLD MEADOW ROAD #300 MCLEAN, VA 22102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Credit Card Expense
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name THE Austin Chronicle	
10/15/2014 Amount (\$)	Payee address City; State; Zip Code	
\$750.00	P O BOX 49066 AUSTIN, TX 78765	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/03/2014	Payee name TODO AUSTIN	
Amount (\$)	Payee address City; State; Zip Code	
\$95.00	1400 CORONA DRIVE AUSTIN, TX 78723	
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) ADVERTISTING
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/08/2014	Payee name TODO AUSTIN	×
Amount (\$) \$95.00	Payee address City; State; Zip Code 1400 CORONA DRIVE AUSTIN, TX 78723	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held: Electronic Filing Version 3.4

 Texas Ethics Commission
 P.O.Box 12070
 Austin, Texas 78711-2070
 (512)463-5800 TDD 1-800-735-2989

POLITICAL EXPENDITURES

SCHEDULE F

		EYDEN		ORIES				
Adventising Expe Accounting/Bank Consulting Exper Event Expense Fees	ense Food/Beverage Expense Travel in Distri Polling Expense Travel Out Of [Contract Labor aising Expense trict Rental Expense	Transportation Equ Contributions/Dona Candidate/Office OTHER (enter a ca	an Repayment/Reimbursement ansportation Equipment & Related Expense ontributions/Donations Made By Candidate/Officeholder/Political Committee THER (enter a category not listed above)		
						ACCOUNT #	(TEC filere)	
1 PAGE # Schedule: 8/8 Re	eport: 24/24	2 FILER NAME HOUSTON, ORA (1	As.)		3	00000001	(TEC filers)	
4 Date	5 Payee name							
10/23/2014	WM SUPER	CENTERTMOBILE						
6 Amount (\$)	7 Payee addres	s City; State;	Zip Code	·			·	
\$102.55	·	RSTATE 35						
8 PURPOSE		e Categories listed at the top o	f this schedule)	(b) Description Telephone	(If travel outside of 1	lexas, complete Si	chedule T) 🔲	
OF	Unice Overn	ead/Rental Expense						
EXPENDITURE								
		<u> </u>		Check if Austin,	<u>, TX, officeholder lit</u>	Office held:		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name						
							· · ·	
1								