FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080871 23 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Ms. Germaine J. NAME Date Received **ELECTRONICALLY FILED** 10/09/2018 NICKNAME LAST **SUFFIX** Tanner CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 9950 Cypresswood Dr., Ste. 203 MAILING Receipt # Amount **ADDRESS** Change of Address Houston, TX 77070 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Abbie NAME NICKNAME LAST **SUFFIX** Kamin STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 1413 W. 21st St. **ADDRESS** (Residence or Business) Houston, TX 77008 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 306-9286 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 X appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2018 09/27/2018 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/06/2018 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 311

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 23

13 C / OH NAME	Tanner, Germaine J.	(Ms.)		14 Filer ID 00080871	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus may have been made without to equired to report this information	the candidate's or offi	ceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	ИE			
	GENERAL					
		COMMITTEE ADD	DRESS			
	SPECIFIC					
		COMMITTEE CAN	IPAIGN TREASURER NAME			
		COMMITTEE CAN	IPAIGN TREASURER ADDRES	SS		
16 CONTIBUTION TOTALS			NS OF \$50 OR LESS (OTHER T ANS), UNLESS ITEMIZED	ΓHAN PLEDGES,	\$	0.00
		ICAL CONTRIBU		6)	\$	14,130.00
EXPENDITURE TOTALS	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			,	\$	0.00
	4. TOTAL POLIT	ICAL EXPENDIT	URES		\$	11,333.33
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	5,144.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFADAVIT						
			I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.	of perjury, that the a Il information required	accompanying I to be reporte	report is ed by me
			Ms. G	ermaine J. Tanner		
			Signature of	Candidate or Officeh	older	
AFFIX NOT	ΓARY STAMP / SEAL AΒ	OVE				
Sworn to and subso	cribed before me, by the s	aid		, this the		day
of	, 20, to ce	ertify which, witness	my hand and seal of office.			
Signature of office	er administering oath	Printed name	of officer administering oath	Title of offic	er administer	ng oath

SUBTOTALS - JC/OH

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

					3 of 23
18 FILER NAME 19 Filer ID Tanner, Germaine J. (Ms.) 00080871					Commission Filers)
I		E SUBTOTALS SCHEDULE		SI	JBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	13,730.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	400.00
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	_
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	11,111.15
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	222.18
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/9 Rpt: 4/23
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)			00080871
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	08/15/2018	Anderson, Henisha			\$100.00
		6 Contributor address; City;	State; Zip Code		
		Missouri City, TX 77459)		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Law Office of	of H.D. Anderson			
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/15/2018	Anunobi, Chidi	_		\$150.00
		Contributor address; City;	State; Zip Code		··· <mark> </mark>
			•		
		Houston, TX 77008			
	Contributor's	I Principal Occupation		Contributor's Job Title	<u> </u>
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Anunobi Lav				7,
		s a child, law firm of parent(s) (if anv)		
		- u ,			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/19/2018	Caldwell, Kimberly	_		\$50.00
		Contributor address; City;	State; Zip Code		
		, ,,	, ,		
		Austin, TX 78757			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Program Dir	ector		Program Director	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Annie's List				
	If contributor	s a child, law firm of parent(s) (if any)	<u> </u>	

	MONET	ARY POLITICAL CONTRIB	UTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A(J)1: Sch: 2/9 Rpt: 5/23
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)		00080871
4	4 Date 09/10/2018 5 Full name of contributor out-of-state PAC (ID#:) Craig, James 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$350.00	
		Houston, TX 77042		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Consultant		Consultant	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
	James Craiç	1		
12	If contributor i	s a child, law firm of parent(s) (if any)	·	
	Date	Full name of contributor out-of-state P/	AC (ID#:)	Amount of Contribution (\$)
	07/03/2018	Esprit, Grace	,	\$30.00
		Contributor address; City; State; Zip Code		··· <mark> </mark>
		, ,, , ,		
		Lake Charles, LA 70611		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Retired			
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Retired			
_	If contributor i	s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor out-of-state P/	AC (ID#·)	Amount of Contribution (\$)
	08/14/2018	Gonzalez, Marco	, , , , , , , , , , , , , , , , , , , ,	\$2,500.00
		Contributor address; City; State; Zip Code		
		Contributor address, Sity, State, 2:p Sode		
		Houston, TX 77017		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	The Gonzale	ez Law Group		
	If contributor i	s a child, law firm of parent(s) (if any)	I	
Н				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/9 Rpt: 6/23
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)		00080871
4	Date	5 Full name of contributor out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
	09/10/2018	Jackson, Hondrulas		\$300.00
		6 Contributor address; City; State; Zip Code		
		Woodbridge, VA 22192		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	•
	Independen	t Transportation Contractor	Independent Transport	ation Contractor
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
	TJR Logistic	es LLC		
12	If contributor i	is a child, law firm of parent(s) (if any)	•	
	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	09/25/2018	Kippers, Lawrence		\$25.00
		Contributor address; City; State; Zip Code		
		Harvey, IL 60426		
	Contributor's	I Principal Occupation	Contributor's Job Title	1
	Administrato		Administrator	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
		s of Chicago		
	If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:	.)	Amount of Contribution (\$)
	08/20/2018	Lee, Chung	·	\$500.00
	00/20/2020	Contributor address; City; State; Zip Code		
		Contributor address, City, State, 21p code		
		Houston, TX 77002		
_	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney	Thiopar Occupation	Attorney	
_		employer/law firm	Law firm of contributor's s	nouse (if any)
		gal Group Plic	Law limit of contributor 3 3	pouse (ii arry)
_		is a child, law firm of parent(s) (if any)		
	ii continuator i	s a clind, law intri of parent(s) (if any)		
L				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/9 Rpt: 7/23
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)			00080871
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	07/05/2018	Manns, Qiana	—		\$500.00
		6 Contributor address; City;	State; Zip Code		
		Houston, TX 77245			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Manns Law	Office Pllc			
12	2 If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/23/2018	Manor, Jeralynn			\$250.00
		Contributor address; City;	State; Zip Code		··· <mark>·</mark>
			, ,		
		Houston, TX 77004			
	Contributor's	I Principal Occupation		Contributor's Job Title	<u> </u>
	Attorney			Attorney	
_		employer/law firm		Law firm of contributor's s	pouse (if any)
		Law Firm PC			, , , , , , , , , , , , , , , , , , , ,
	If contributor	s a child, law firm of parent(s) (i	f anv)		
		(=) ((=)	,		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/16/2018	Marshall, Desiree			\$100.00
		Contributor address; City;	State: Zip Code		··· <mark>·</mark>
		, , , , , , , , , , , , , , , , , , , ,			
		Houston, TX 77095			
-	Contributor's	I Principal Occupation		Contributor's Job Title	
	Attorney			Attorney	
		employer/law firm		Law firm of contributor's s	pouse (if any)
		ll Law Firm Pllc			(y)
_		s a child, law firm of parent(s) (i	f anv)		
	coacc.	o a oa, ian o. pa.o(o) (
_					

	MONET	ARY POLITICAL CO	NTRIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to	complete this form.	1 Total pages Schedule A(J)1: Sch: 5/9 Rpt: 8/23
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)		00080871
4	4 Date 08/23/2018 5 Full name of contributor out-of-state PAC (ID#:) Musyimi, Mathew 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$50.00	
		Pearland, TX 77584		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Financial A	nalyst	Financial Analyst	
10	Contributor's C	employer/law firm	11 Law firm of contributor's s	spouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>	
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	07/05/2018	Musyimi, Solomon	out-of-state (AC (ID#:)	\$500.00
	0.70072020	Contributor address; City; State;	7in Code	
		Contributor address, City, State,	Zip Code	
		Houston, TX 77074		
	Contributorio		Constributed to Joh Title	
		Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	or and of the second
		employer/law firm Solomon Musyimi	Law firm of contributor's s	spouse (II any)
_				
	ii contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	08/23/2018	Musyimi, Solomon		\$1,000.00
		Contributor address; City; State;	Zip Code	
		Houston, TX 77074		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Law Firm of	Solomon Musyimi		
	If contributor i	s a child, law firm of parent(s) (if any)		
\vdash				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 6/9 Rpt: 9/23
2	FILER NAME Tanner, Ger	maine J. (Ms.)			3	Filer ID (Ethics Commission Filers) 00080871
4	Date 08/23/2018			7	Amount of Contribution (\$) \$400.00	
		Houston, TX 77074				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm Solomon Musyimi		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	<u>I</u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/10/2018	Musyimi, Solomon Contributor address; City;	<u> </u>			\$400.00
		Houston, TX 77074				
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm Solomon Musyimi		Law firm of contributor's sp	oous	se (If any)
		s a child, law firm of parent(s) (i	f any)	<u> </u>		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	07/01/2018	Nguyen, Natalie Contributor address; City;	<u> </u>			\$100.00
		Houston, TX 77064				
		Principal Occupation		Contributor's Job Title		
	Self Employe			Attorney		
	Nguyen Law	employer/law firm / Firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 7/9 Rpt: 10/23
2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)			L	00080871
4	Date 09/04/2018	5 Full name of contributor Nguyen, Natalie6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,500.00
		Houston, TX 77064				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
_	Nguyen Law					
12	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	09/24/2018	Pace-Whitaker, Tiffany				\$25.00
		Contributor address; City; S Crowley, TX 76036	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Founder	-ппсіраї Оссираціон		Founder		
		employer/law firm		Law firm of contributor's sp	2011	co (if any)
		reparatory School		Law IIIII of Continuator 3 3	Jou	se (II dily)
		s a child, law firm of parent(s) (if	anvi			
	ii contributor i.	s a ciliu, iaw iiiii oi parein(s) (ii	arry			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/11/2018	Tanner, Rod	_			\$50.00
		Contributor address; City; S	State; Zip Code			
		Converse, TX 78109		_		
	Contributor's F Retired	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if anv)
	Retired					(
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL CON	NTRIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to c	complete this form.	1 Total pages Schedule A(J)1: Sch: 8/9 Rpt: 11/23
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)		00080871
4	Date	5 Full name of contributor 0	ut-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	09/24/2018	Tatum, Tennille		\$100.00
		6 Contributor address; City; State; Z	ip Code	
		New York, NY 10026		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10	Contributor's	employer/law firm	11 Law firm of contributor's	spouse (if any)
	Self Employ	ed		
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor 0	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/04/2018	Texans for Fairness		\$1,000.00
		Contributor address; City; State; Z	ip Code	··· <mark> </mark>
		Houston, TX 77095		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
		,		
	Date	l —	ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/05/2018	Tuchshnieder, Hanan		\$3,500.00
		Contributor address; City; State; Z	ip Code	
		Houston, TX 77027		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Owner		Owner	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Texas Fuelii	ng Services, Inc.		
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this f	form.	1	otal pages Schedule A(J)1: ch: 9/9 Rpt: 12/23
2	FILER NAME			3 Fil	er ID (Ethics Commission Filers)
	Tanner, Ger	maine J. (Ms.)		00	0080871
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Ar	mount of Contribution (\$)
	09/23/2018	Turner, Ima]	\$250.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77044	<u> </u>		
8		Principal Occupation	9 Contributor's Job Title		
	Attorney		Attorney		
10		employer/law firm	11 Law firm of contributor's sp	oouse (if any)
	Self Employe	ed			
12	If contributor is	s a child, law firm of parent(s) (if any)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	L	SCHEDULE A2
The Instruction Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/23
2 FILER NAME Tanner, Germaine J. (Ms.)		3 Filer ID (Ethics Commission Filers) 00080871
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$
5 Date 08/18/2018 6 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) 9 In-kind contribution description \$400.00 Fundraising Event; drinks, food
Houston, TX 77074		Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-	-JUDICIAL) (See instructions)
12 Contributor's principal occupation (FOR JUDICIAL) Attorney	13 Contributor's job title (Attorney	(FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
Law Firm of Solomon Musyimi 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services The Instruction Guide e	Salaries/V	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	=				3	Filer ID	(Ethics Commission Filers)
_	Sch: 1/9 Rpt: 14/23		rmaine J. (Ms.)					00080871	(
4	Date	5 Payee name							
	08/31/2018	CapitalOne							
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	ode				
	\$15.00	19619 Tom	ball Pkwy						
		Houston, T	X 77070						
8	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees				므		de of Texas. Com	
						Banking Mair		officeholder living	rexpense
						Banking Maii	ittei	iance i ees	
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				<u> </u>				
9	Complete ONLY if direct expenditure to benefit C/Oh		ceholder name	Office sou	ıght			Office he	eld
	Date	Payee name							
	07/02/2018	Harris Cour	nty Democratic Party						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
	\$3,000.00	1445 N Loc	•	, ,					
	, , , , , , , ,		p						
		Houston, T	X 77008						
	PURPOSE		ee Categories listed at the top		(b)	Description			
	OF EXPENDITURE		ns/Donations Made E			=		de of Texas. Com	
		Candidate/	Officeholder/Political	Committee		_		officeholder living	expense
						Coordinated (Cai	ripaigri	
_	Commission ONL V if disposit	Canadidata/Off		O#iss ss.				Office he	al al
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office sou	ıgnı			Office he	eiu
	<u>'</u>								
	Date	Payee name							
	07/23/2018	Harris Cour	nty Democratic Party						
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode				
	\$1,000.00	1445 N Loc	p West						
		Houston, T	X 77008						
	PURPOSE OF		ee Categories listed at the top		(b)	Description			
	EXPENDITURE		ns/Donations Made E					de of Texas. Com	•
		Candidate/	Officeholder/Political	Committee		Coordinated (officeholder living	expense
						Coordinated	Cal	npaign	
_	0 1. 5	0 "1 :			L_				
	Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Office sou	ıght			Office he	eia
	experience to beliefit 6/01	•							

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 2/9 Rpt: 15/23	Tanner, Germaine J. (Ms.)	
4	Date	5 Payee name	
	08/24/2018	Harris County Democratic Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,000.00	1445 N Loop West	
		Houston, TX 77008	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee Coordinated Campaign	
		Coordinated Campaign	
Ļ	Commission ONLL V if diversit	Condidate/Office helder no year	_
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	=
	08/27/2018	Harris County Democratic Party	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,940.00	1445 N Loop West	
		Houston, TX 77008	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee	
		Coordinated Campaign	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/Oh		
	Date	Payee name	=
	08/11/2018	Print N Sign	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$250.00	7350 Harwin Dr	
	4200.00		
		Houston, TX 77036	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense	
		Check if Austin, TX, officeholder living expense	
		Push cards and campaign signs	
	Complete ONLY if direct	Condidate/Officeholder name Office cought	_
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
			_
			ĺ

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/9 Rpt: 16/23	Tanner, Germaine J. (Ms.)
4	Date	5 Payee name
	08/24/2018	Print N Sign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	7350 Harwin Dr
		Houston, TX 77036
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Push Cards
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/04/2018	Print N Sign
	Amount (\$)	Payee address; City; State; Zip Code
	\$550.00	7350 Harwin Dr
		Houston, TX 77036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Yard Signs
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/19/2018	Print N Sign
	Amount (\$)	Payee address; City; State; Zip Code
	\$510.00	7350 Harwin Dr
		Houston, TX 77036
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign push cards and banner
		Campaign paon salas ana salmo.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/9 Rpt: 17/23	Tanner, Germaine J. (Ms.) 00080871
4	Date	5 Payee name
	09/19/2018	Print N Sign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$412.50	7350 Harwin Dr
		Houston, TX 77036
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign T-Shirts
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	07/01/2018	Rally Piryx
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.20	995 Market St. 2d Fl
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payso nama
	08/14/2018	Payee name Rally Piryx
	Amount (\$)	Payee address; City; State; Zip Code
	\$197.80	995 Market St. 2d Fl
	7201.00	
		San Francisco, CA 94103
	PURPOSE	<u> </u>
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Fees
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1: Sch: 5/9 Rpt: 18/23	2 FILER NAME Tanner, Germaine J. (Ms.)		3 Filer ID (Ethics Commission Filers) 00080871
4	Date 08/15/2018	5 Payee name Rally Piryx		
6	Amount (\$) \$8.20	7 Payee address; City; State; Zip Coo 995 Market St. 2d Fl San Francisco, CA 94103	de	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Fees
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
	Date 08/15/2018	Payee name Rally Piryx		
	Amount (\$) \$12.15	Payee address; City; State; Zip Coo 995 Market St. 2d Fl San Francisco, CA 94103	de	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office souç	ght	Office held
	Date 08/16/2018	Payee name Rally Piryx		
	Amount (\$) \$8.20	Payee address; City; State; Zip Coo 995 Market St. 2d Fl	de	
		San Francisco, CA 94103		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/9 Rpt: 19/23	Tanner, Germaine J. (Ms.)
4	Date	5 Payee name
	08/20/2018	Rally Piryx
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.80	995 Market St. 2d Fl
		San Francisco, CA 94103
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card Fees
		Great Sala Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
	Date	Payee name
	09/04/2018	Rally Piryx
	Amount (\$)	Payee address; City; State; Zip Code
	\$118.80	995 Market St. 2d Fl
		San Francisco, CA 94103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense Credit Fees
		Cleuit rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/05/2018	Rally Piryx
	Amount (\$)	Payee address; City; State; Zip Code
	\$276.80	995 Market St. 2d Fl
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card fees
		Great Sara rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card F dyment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commiss	ion Filers)
Sch: 7/9 Rpt: 20/23	Tanner, Germaine J. (Ms.)		00080871	
4 Date	5 Payee name			
09/10/2018	Rally Piryx			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$27.95	995 Market St. 2d Fl			
	San Francisco, CA 94103			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	Check if trave	I outside of Texas. Complete Schedule T.	
EXI ENDITORE			n, TX, officeholder living expense	
		Credit Card	iees	
9 Complete ONLY if direct	Condidate/Officeholder name Office co	laht	Office hold	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ugnt	Office held	
Date	Payee name			
09/10/2018	Rally Piryx			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$24.00	995 Market St. 2d Fl			
	San Francisco, CA 94103			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	I —	I outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
		Credit Card		
Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office held	
expenditure to benefit C/O				
Date	Payee name			
09/11/2018	Rally Piryx			
Amount (\$)	Payee address; City; State; Zip C	nde		
\$4.25	995 Market St. 2d Fl	ode		
ψ 1.23	Soo Market St. 24 11			
	San Francisco, CA 94103			
DUDDOCE		(h) p : ::		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if trave	I outside of Texas. Complete Schedule T.	
EXPENDITURE	Fees	│	n, TX, officeholder living expense	
		credit card fe	ees	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held	
expenditure to benefit C/O	Н			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 8/9 Rpt: 21/23	Tanner, Germaine J. (Ms.)	00080871
4	Date	5 Payee name	
	09/19/2018	Rally Piryx	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4.25	995 Market St. 2d Fl	
		San Francisco, CA 94103	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 000	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		credit card fe	
		5.50.0 50.0 1	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
–	Date	Payee name	
	09/23/2018	Rally Piryx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.05	995 Market St. 2d Fl	
	,		
		San Francisco, CA 94103	
	PURPOSE	(a) a	
	OF	,	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 003	, TX, officeholder living expense
		credit card fe	es
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiditure to beliefit C/Or	1	
	Date	Payee name	
	09/24/2018	Rally Piryx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$8.20	995 Market St. 2d Fl	
		San Francisco, CA 94103	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 003	outside of Texas. Complete Schedule T.
		Check if Austin	, TX, officeholder living expense
		Credit Card le	es
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office rigid
l			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTHER (output a colorograph and listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense mittee Legal Services The Instruction Guide explain		Vages	s/Contract Labor	Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1: Sch: 9/9 Rpt: 22/23	ı	FILER NAME Tanner, Germaine J. (Ms.)				Filer ID 00080871	(Ethics Commission Filers)
4	Date 08/04/2018		Payee name Sharpstown Democrats					
6	Amount (\$) \$75.00		Payee address; City; Stat P.O. Box 2053 Bellaire, TX 77402	te; Zip Co	ode			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this se Contributions/Donations Made By Candidate/Officeholder/Political Com		(b)	Description Check if travel outsid Check if Austin, TX, of Event Sponsorsh	officeholder living	
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name	Office sou	ght		Office he	ld
	Date 07/17/2018	ı	Payee name Taylor, Aubrey					
	Amount (\$) \$475.00		Payee address; City; Stat 957 NASA Parkway #251 Houston, TX 77058	te; Zip Co	ode			
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this son Advertising Expense	chedule)	(b)	Description Check if travel outsid Check if Austin, TX, of Houston Busines	officeholder living	expense
	Complete ONLY if direct expenditure to benefit C/Ol		andidate/Officeholder name	Office sou	ght		Office he	ld

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee Legal Services Salaries/	Wages/Contract Labor		OTHER (enter a category not listed above)
	credit card r ayment		The Instruction Guide explains how to c	omplete this form.		
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Sch: 1/1 Rpt: 23/23		Tanner, Germaine J. (Ms.)			00080871
4	Date	5	Payee name			
	07/08/2018		Constant Contact			
6	Amount (\$)	7	Payee address; City; State; Zip C	nde		
Ĭ	\$74.06	ľ	1601 Trapelo Rd Fl 3	ouc		
			1001 Hapole Rail Fe			
	Reimbursement from political contributions intended		Molthom MA 024E1			
			Waltham, MA 02451	I		
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	4	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense
	EXPENDITURE		Advertising Expense	L Mana Fanail ann i	_	neck ii Austin, 17, onicendider living expense
				Mass Email servi	ce	
_	One and the ONE Wife disease		adialata (Office helder mene	Office a second to		Office health
9	Complete ONLY if direct expenditure to benefit	Cai	ndidate/Officeholder name	Office sought		Office held
	C/OH					
	Date		Payee name			
	08/08/2018		Constant Contact			
	Amount (\$)	H	Payee address; City; State; Zip C	ode		
	\$74.06		1601 Trapelo Rd Fl 3	ouc		
	Reimbursement from		1001 Trapolo Na TTO			
	political contributions intended		Waltham, MA 02451			
		L		December	1.0	had the about a tribe of Taylor Canada Cabada T
	PURPOSE OF		Category (See Categories listed at the top of this schedule)	Description _	4	heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense
EXPENDITURE			Advertising Expense	Mass Email Servi		
				Mass Email Servi		
	Complete ONLY if direct	Cai	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit			g		
	C/OH					
	Date		Payee name			
	09/08/2018		Constant Contact			
	Amount (\$)		Payee address; City; State; Zip C	ode		
	\$74.06		1601 Trapelo Rd Fl 3			
	Reimbursement from					
	political contributions intended		Waltham, MA 02451			
	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	С	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		С	heck if Austin, TX, officeholder living expense
	LXI LINDITORL			Mass Email Servi	ce	
		L				
		Cai	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit C/OH					