

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

20

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS MRS MR FIRST MI  
Lisa  
NICKNAME LAST SUFFIX  
Green

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
1442 Oxbow Drive, Cedar Mill,  
TX 75104

Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(469) 272-9183

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR FIRST MI  
Alicia  
NICKNAME LAST SUFFIX  
Brown Young

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
1503 Halsey Drive, Duncanville, TX 75137

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(214) 542-9148

9 REPORT TYPE

- January 15     30th day before election     Runoff     15th day after campaign treasurer appointment (Officeholder Only)
- July 15     8th day before election     Exceeded \$500 limit     Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month Day Year Month Day Year  
1 / 1 / 2018 THROUGH 6 / 30 / 2018

11 ELECTION

ELECTION DATE: Month Day Year  
7 / 6 / 2018

ELECTION TYPE  
 Primary     Runoff     Other Description  
 General     Special

12 OFFICE

OFFICE HELD (if any)  
Presiding Judge, Dallas  
County Criminal Court #5

13 OFFICE SOUGHT (if known)

OFFICE USE ONLY

Date Received

FILED  
2018 JUL 16 PM 12:10  
JOHN F. WATSON  
COUNTY CLERK  
DALLAS COUNTY

Date Hand-Delivered for Date Postmarked

Receipt # Amount \$

Date Processed

Date Imaged

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 2

14 JC/OH NAME

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 140.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 900

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 439.04

4. TOTAL POLITICAL EXPENDITURES

\$ 979.99

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ -11.96

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

18 AFFIDAVIT



**KIJA LEWIS**  
Notary Public State of Texas  
My Commission# 131060821  
My Comm. Exp. Mar. 24, 2021

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.

*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Notary, this the 13<sup>th</sup> day of July, 2018, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Kija Lewis  
Printed name of officer administering oath

Notary  
Title of officer administering oath

# SUBTOTALS - JC/OH

FORM JC/OH  
COVER SHEET PG 3

<b>19</b> FILER NAME <i>Lisa Green</i>	<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 900
2. <input type="checkbox"/> SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. <input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 356
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 979.99
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 Date

1/18/18

5 Full name of contributor

Christina Puga

out-of-state PAC ID#: \_\_\_\_\_

7 Amount of contribution (\$)

\$50

6 Contributor address;

133 N. Riverfront Blvd, Dallas, TX 75207

City; State; Zip Code

8 Contributor's principal occupation

Professional Mentor

9 Contributor's job title

Mentor

10 Contributor's employer/law firm

self employed

11 Law firm of contributor's spouse (if any)

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

Date

1/24/18

Full name of contributor

Lisa Green

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

\$226.00

Contributor address;

1442 Oxbow Drive Cedar Hill, TX 75104

City; State; Zip Code

Contributor's principal occupation

Judge

Contributor's job title

Presiding Judge

Contributor's employer/law firm

Dallas County

Law firm of contributor's spouse (if any)

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

Date

1/26/18

Full name of contributor

Lisa Green

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

\$20

Contributor address;

1442 Oxbow Drive, Cedar Hill 75104

City; State; Zip Code

Contributor's principal occupation

Judge

Contributor's job title

Presiding Judge

Contributor's employer/law firm

Dallas County

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 Date

3/1/18

5 Full name of contributor

Mark Green

out-of-state PAC ID#: \_\_\_\_\_

7 Amount of contribution (\$)

\$40.00

6 Contributor address;

1442 Oxbow Drive, Cedar Hill, TX 75104

City; State; Zip Code

8 Contributor's principal occupation

Educator

9 Contributor's job title

Adjunct Professor

10 Contributor's employer/law firm

Dallas County Community College Dist

11 Law firm of contributor's spouse (if any)

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

Date

3/5/18

Full name of contributor

Willie F. Ingram

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

\$100

Contributor address;

1801 N. Mustang Rd, DeSoto, TX 75115

City; State; Zip Code

Contributor's principal occupation

Attorney

Contributor's job title

Attorney at Law

Contributor's employer/law firm

Ingram Law Firm

Law firm of contributor's spouse (if any)

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

Date

3/30/18

Full name of contributor

Mark Green

out-of-state PAC ID#: \_\_\_\_\_

Amount of contribution (\$)

\$30.00

Contributor address;

1442 Oxbow Dr. Cedar Hill, TX 75104

City; State; Zip Code

Contributor's principal occupation

Educator

Contributor's job title

Adjunct Professor

Contributor's employer/law firm

Dallas County Community College Dist

Law firm of contributor's spouse (if any)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

## SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 Date

5/18/18

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

Lisa Green

7 Amount of contribution (\$)

\$40.00

6 Contributor address; City; State; Zip Code  
1442 Oxbow Dr, Cedar Hill, TX 75104

8 Contributor's principal occupation

Judge

9 Contributor's job title

Presiding Judge

10 Contributor's employer/law firm

Dallas County

11 Law firm of contributor's spouse (if any)

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

Date

6/18/18

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

Eugene Green

Amount of contribution (\$)

\$394.00

Contributor address; City; State; Zip Code  
175 Scarborough St, Hartford, CT 06105

Contributor's principal occupation

retired

Contributor's job title

retired educator

Contributor's employer/law firm

Hartford Public Schools

Law firm of contributor's spouse (if any)

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

Date

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

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

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

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

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

# LOANS (JUDICIAL)

# SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

5

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 356.00

5 Date of loan

1/24/18

7 Name of lender

Lisa Green

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

9 Loan Amount (\$)

\$226.00

6 Is lender a financial Institution?

Y  N

8 Lender address; City; State; Zip Code

1442 Oxbow Drive, Cedar Hill, TX 75104

10 Interest rate

n/a

11 Maturity date

n/a

12 Lender's Principal Occupation

Judge

13 Lender's Job Title

Presiding Judge, County Court 5

14 Lender's Employer/Law Firm

Dallas County

15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address; City; State; Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

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

# LOANS (JUDICIAL)

# SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

5

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 356.<sup>00</sup>

5 Date of loan

1/26/18

7 Name of lender

Lisa Green

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

9 Loan Amount (\$)

\$20

6 Is lender a financial institution?

Y

8 Lender address; City; State; Zip Code

1442 Oxbow Drive, Cedar Hill TX 75104

10 Interest rate

n/a

11 Maturity date

n/a

12 Lender's Principal Occupation

Judge

13 Lender's Job Title

Presiding Judge, County Courts

14 Lender's Employer/Law Firm

Dallas County

15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address; City; State; Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

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# LOANS (JUDICIAL)

# SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

5

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 356.00

5 Date of loan

3/1/15

7 Name of lender

Mark Green

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

9 Loan Amount (\$)

\$40.00

6 Is lender a financial Institution?

Y  N

8 Lender address; City; State; Zip Code

1442 Oxbow Drive, Cedar Mill, TX 75104

10 Interest rate

n/a

11 Maturity date

n/a

12 Lender's Principal Occupation

Educator

13 Lender's Job Title

Adjunct Professor

14 Lender's Employer/Law Firm

Dallas County Community College Dist

15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address; City; State; Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED  
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# LOANS (JUDICIAL)

# SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

5

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 356.00

5 Date of loan

3/30/18

7 Name of lender

Mark Green

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

9 Loan Amount (\$)

\$ 30.00

6 Is lender a financial institution?

Y  N

8 Lender address;

City;

State;

Zip Code

1442 Oxbow Drive Cedar Mill, TX 75104

10 Interest rate

n/a

11 Maturity date

n/a

12 Lender's Principal Occupation

Educator

13 Lender's Job Title

Adjunct Professor

14 Lender's Employer/Law Firm

Dallas County Community College Dist

15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address;

City;

State;

Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# LOANS (JUDICIAL)

# SCHEDULE E(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E(J):

5

2 FILER NAME

Lisa Green

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 356.00

5 Date of loan

5/18/18

7 Name of lender

Lisa Green

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

9 Loan Amount (\$)

\$40.00

6 Is lender a financial institution?

Y  N

8 Lender address;

City;

State;

Zip Code

1442 Oxbow Drive, Cedar Hill  
TX 75104

10 Interest rate

n/a

11 Maturity date

n/a

12 Lender's Principal Occupation

Judge

13 Lender's Job Title

Presiding Judge

14 Lender's Employer/Law Firm

Dallas County

15 Law Firm of lender's spouse (if any)

16 If lender is a child, law firm of parent(s) (if any)

17 Description of Collateral

none

18 Check if personal funds were deposited into political account (See Instructions)

19 GUARANTOR INFORMATION

20 Name of guarantor

22 Amount Guaranteed (\$)

21 Guarantor address;

City;

State;

Zip Code

not applicable

23 Guarantor's Principal Occupation

24 Guarantor's Job Title

25 Guarantor's Employer/Law Firm

26 Law Firm of guarantor's spouse (if any)

27 If guarantor is a child, law firm of parent(s) (if any)

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

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>1/3/18</b>	5 Payee name <b>Lisa Green</b>	
6 Amount (\$) <b>\$40</b>	7 Payee address; City; State; Zip Code <b>1442 Oxbow Drive, Cedar Mill, TX 75104</b>	
8  <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Travel in District</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  <b>gas expense</b>

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/8/18</b>	Payee name <b>Office Max</b>
Amount (\$) <b>\$19.47</b>	Payee address; City; State; Zip Code <b>328 N. Hwy 67, Cedar Mill, TX 75104</b>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Office Overhead</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>1/18/18</b>	Payee name <b>Exxon Mobil</b>
Amount (\$) <b>\$9.25</b>	Payee address; City; State; Zip Code <b>Hwy 310 67 Duncanville, TX 75137</b>

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Transportation Expense (gas)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>1/22/18</b>	5 Payee name <b>Lisa Green</b>	
6 Amount (\$) <b>\$20</b>	7 Payee address; City; State; Zip Code <b>1442 Oxbow Drive, Cedar Mill, 75104</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Office Overhead Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <b>1/24/18</b>	Payee name <b>Exxon Mobil</b>	
Amount (\$) <b>\$20</b>	Payee address; City; State; Zip Code <b>Hwy 310 67 Duncanville, TX 75187</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Transportation Expense (gas)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	
Date <b>1/25/18</b>	Payee name <b>Interdenominational Ministerial Alliance</b>	
Amount (\$) <b>\$154.96</b>	Payee address; City; State; Zip Code <b>3206 S. Tyler St Dallas, TX 75224</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising Expense 1/2 page ad</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>1/25/18</b>	5 Payee name <b>Ram Web Design</b>
--------------------------	---------------------------------------

6 Amount (\$) <b>\$75.00</b>	7 Payee address; City; State; Zip Code <b>201 Executive Way, Ste 100, DeSoto, TX 75115</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense (campaign ad)</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date <b>1/25/18</b>	Payee name <b>Chase Bank</b>
------------------------	---------------------------------

Amount (\$) <b>\$12.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 659754, San Antonio, TX 78265</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>fees (monthly service fee)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>1/26</b>	Payee name <b>Mark Green</b>
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Amount (\$) <b>\$10.00</b>	Payee address; City; State; Zip Code <b>1442 Osborn Drive, Cedar Hill, TX 75104</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Transportation Expense (gas)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>		2 FILER NAME <b>Lisa Green</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>2/5/18</b>		5 Payee name <b>Exxon/Mobil</b>			
6 Amount (\$) <b>\$20</b>		7 Payee address City; State; Zip Code <b>310 Hwy 67 Duncanville, TX 75137</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) <b>Transportation Expense (gas)</b>		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>2/26/18</b>		Payee name <b>Chase Bank</b>			
Amount (\$) <b>\$12.00</b>		Payee address; City; State; Zip Code <b>P.O. Box 659754, San Antonio, TX 78265</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>Fees (monthly service fee)</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>3/5/18</b>		Payee name <b>7 El'even Duncanville</b>			
Amount (\$) <b>\$18.99</b>		Payee address; City; State; Zip Code <b>310 Hwy 67 Duncanville, TX 75137</b>			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) <b>Transportation Expense (gas)</b>		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>3/15/18</b>	5 Payee name <b>Kroger</b>
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6 Amount (\$) <b>\$6.47</b>	7 Payee address; City; State; Zip Code <b>235 E Fm 1382 Cedar Mill, TX 75104</b>
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/15/18</b>	Payee name <b>Albertsons</b>
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Amount (\$) <b>\$29.37</b>	Payee address; City; State; Zip Code <b>427 E, Fm 1382 Cedar Mill, TX 75104</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/15/18</b>	Payee name <b>Party City</b>
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Amount (\$) <b>\$16.13</b>	Payee address; City; State; Zip Code <b>715 N. Hwy 67 Cedar Mill, TX 75104</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>3/15/18</b>	5 Payee name <b>Target</b>
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6 Amount (\$) <b>\$30.07</b>	7 Payee address; City; State; Zip Code <b>739 N. Hwy 67 Cedar Mill, TX 75104</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/19/18</b>	Payee name <b>mem Awards</b>
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Amount (\$) <b>\$5.36</b>	Payee address; City; State; Zip Code <b>2100 S. Great Southwest Parkway Grand Prairie, TX 75051</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Awards/memorials Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/19/18</b>	Payee name <b>Exxon Mobil</b>
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Amount (\$) <b>\$19.00</b>	Payee address; City; State; Zip Code <b>Hwy 67 <sup>310</sup> Duncanville, TX 75137</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Transportation Expense (gas)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages-Schedule F1: 9	<b>2</b> FILER NAME Lisa Green	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/23/18	<b>5</b> Payee name Chase Bank	
<b>6</b> Amount (\$) \$12.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 659754, San Antonio, TX 78265	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees (monthly service fee)	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name _____ Office sought _____ Office held _____	
<b>Date</b> 4/16/18	<b>Payee name</b> Exxon Mobil	
<b>Amount (\$)</b> \$23.00	<b>Payee address; City; State; Zip Code</b> 310 Mwy 67 Duncannonville, TX 75137	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Transportation Expense (gas)	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate / Officeholder name _____ Office sought _____ Office held _____	
<b>Date</b> 4/24/18	<b>Payee name</b> Chase Bank	
<b>Amount (\$)</b> \$12.00	<b>Payee address; City; State; Zip Code</b> P.O. Box 659754, San Antonio, TX 78265	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees (monthly service fee)	<b>Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate / Officeholder name _____ Office sought _____ Office held _____	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>5/22</b>	5 Payee name <b>Lisa Green</b>
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6 Amount (\$) <b>\$5.00</b>	7 Payee address; City; State; Zip Code <b>1442 Oxbow Drive, Cedar Mill, TX 75104</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Office Overhead Expense</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>5/23/18</b>	Payee name <b>Chuse Bank</b>
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Amount (\$) <b>\$12.00</b>	Payee address; City; State; Zip Code <b>P.O. Box 654754, San Antonio, TX 78265</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Fees (monthly service fee)</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>6/18/18</b>	Payee name <b>Lisa Green</b>
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Amount (\$) <b>386.00</b>	Payee address; City; State; Zip Code <b>1442 Oxbow Drive, Cedar Mill, TX 75104</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <b>ONLY</b> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# 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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9</b>	2 FILER NAME <b>Lisa Green</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>6/25/18</b>	5 Payee name <b>Chase Bank</b>
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6 Amount (\$) <b>\$12.00</b>	7 Payee address; City; State; Zip Code <b>P.O. Box 659754, San Antonio, TX 78265</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Fee (monthly service fee)</b>	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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