

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form		1 Filer ID(Ethics Commission filers)	2 Total pages filed	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
Mr. Robert C. Chris Bell			<b>OFFICE USE ONLY</b>	
Date Received			10/5/2015	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY; STATE; ZIP CODE	
	PO Box 66544 Houston TX 77266			Date Hand-delivered or Date Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(206) 8410114			Receipt #
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	
	NICKNAME	LAST	SUFFIX	
Mr. Lias J. Jeff Steen			Amount	
Date Processed			Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Business)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY; STATE; ZIP CODE	
	333 Clay St. Suite 4620 Houston TX 77002			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(206) 8410114			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)			
	10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
7/1/2015			9/24/2015	
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11/3/2015				
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	Mayor	

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

14 FILER NAME Robert C. Bell 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

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
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

GENERAL

SPECIFIC

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$126,563.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$240,035.32
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$91,901.85
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT

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

Chris Bell

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Print name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - COH****FORM C/OH  
COVER SHEET PG 3**

19 FILER NAME Robert C. Bell		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	124976
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	2587
3	SCHEDULE B: PLEDGED CONTRIBUTIONS	.
4	SCHEDULE E: LOANS	
5	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	210335.32
6	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	29700
7	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
9	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
10	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
11	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

**CANDIDATE / OFFICEHOLDER REPORT:  
NOTICE FROM POLITICAL COMMITTEE(S)**

**FORM C/OH  
ADDENDUM**

C/OH NAME Robert C. Bell

ACCOUNT # (Ethics  
Commission filers)

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.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Claudia D Stravato	7	Amount of contributions (\$)
	7/1/2015	6 Contributor address; City; State; Zip Code Amarillo TX 79106-4108		\$35.00
8	Principal occupation / Job title (See Instructions) Instructor		9	Employer (See Instructions) WTAMU
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cynthia Crutcher	7	Amount of contributions (\$)
	7/1/2015	6 Contributor address; City; State; Zip Code Allen TX 75002-4313		\$10.00
8	Principal occupation / Job title (See Instructions) Paralegal		9	Employer (See Instructions) M.O.S.E.S.
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Terence Vinson	7	Amount of contributions (\$)
	7/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77036-6737		\$10.00
8	Principal occupation / Job title (See Instructions) PC Network Analyst		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gary Grant	7	Amount of contributions (\$)
	7/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77098-1166		\$500.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
	Eva Englehart ----- 6 Contributor address;                      City;                      State;                      Zip Code 7/1/2015    Bellaire                      TX 77401-5621		7 Amount of contributions (\$)  \$50.00
8	Principal occupation / Job title (See Instructions) Retired	9 Employer (See Instructions) Retired	
	Sharon Baker ----- 6 Contributor address;                      City;                      State;                      Zip Code 7/2/2015    Houston                      TX 77025-1667		7 Amount of contributions (\$)  \$50.00
8	Principal occupation / Job title (See Instructions) Interior Design	9 Employer (See Instructions) Self	
	Janet Hansen ----- 6 Contributor address;                      City;                      State;                      Zip Code 7/2/2015    Houston                      TX 77027-4007		7 Amount of contributions (\$)  \$250.00
8	Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Law Office of Janet Hansen	
	D. Adamson ----- 6 Contributor address;                      City;                      State;                      Zip Code 7/2/2015    Houston                      TX 77052-2014		7 Amount of contributions (\$)  \$65.00
8	Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)	
	Beirne Maynard & Parsons ----- 6 Contributor address;                      City;                      State;                      Zip Code		7 Amount of contributions (\$)

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

7/2/2015	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77056	\$1,000.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

7/3/2015	4 Date <span style="float: right;">5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )</span> harry Isensee	7 Amount of contributions (\$)
	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77006-3748	

8 Principal occupation / Job title (See Instructions) student	9 Employer (See Instructions) Not employed
--	---

7/3/2015	4 Date <span style="float: right;">5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )</span> Michael Webster	7 Amount of contributions (\$)
	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77030-1216	

8 Principal occupation / Job title (See Instructions) musician/professor	9 Employer (See Instructions) Rice University
---	--

7/3/2015	4 Date <span style="float: right;">5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )</span> Rochelle Cyprus	7 Amount of contributions (\$)
	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Sugar Land TX 77478-3645	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Charles Babcock	7	Amount of contributions (\$)
	7/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77010-4037		\$100.00
8	Principal occupation / Job title (See Instructions) Lawyer		9	Employer (See Instructions) Jackson Walker LLP
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Hugh Philip Cowdin	7	Amount of contributions (\$)
	7/4/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-2623		\$150.00
8	Principal occupation / Job title (See Instructions) Contractor/Builder		9	Employer (See Instructions) H. Phillip Cowden Company
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John McIntyre	7	Amount of contributions (\$)
	7/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77057-1435		\$500.00
8	Principal occupation / Job title (See Instructions) Investments		9	Employer (See Instructions) Sanders Morris Harris
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christine Anderson	7	Amount of contributions (\$)
	7/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77008-7135		\$50.00
8	Principal occupation / Job title (See Instructions) Senior Benefits Manager		9	Employer (See Instructions) Group 1 Automotive
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/6/2015	Randel Young ----- 6 Contributor address; City; State; Zip Code New Ulm TX 78950-2249	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/6/2015	Peter Williamson ----- 6 Contributor address; City; State; Zip Code Houston TX 77019-5324	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/8/2015	Barbara McGinity ----- 6 Contributor address; City; State; Zip Code Houston TX 77041-9229	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/9/2015	Bob Ryan ----- 6 Contributor address; City; State; Zip Code Houston TX 77027-5504	7	Amount of contributions (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/9/2015	Sarah Loudermilk ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-4184		\$250.00
8 Principal occupation / Job title (See Instructions) Nonprofit Arts Management		9 Employer (See Instructions) Houston Youth Symphony	
7/12/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Walter Johnson 6 Contributor address; City; State; Zip Code Houston TX 77004-7813	7	Amount of contributions (\$)  \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/12/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Veronica Coulson 6 Contributor address; City; State; Zip Code Athlone 7764 Cape Province	7	Amount of contributions (\$)  \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/13/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Carroll Dartez 6 Contributor address; City; State; Zip Code Houston TX 77227-7169	7	Amount of contributions (\$)  \$5.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ian Cloud	7	Amount of contributions (\$)
	7/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77024-6239		\$50.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Heard Robins
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Dowdall	7	Amount of contributions (\$)
	7/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77088-5632		\$100.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) George Hawkins	7	Amount of contributions (\$)
	7/13/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-3221		\$50.00
8	Principal occupation / Job title (See Instructions) Financial Planner		9	Employer (See Instructions) AXA Advisors
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark Clark	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77002-2815		\$15.00
8	Principal occupation / Job title (See Instructions) Partner		9	Employer (See Instructions) Burleson LLP
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
7/14/2015	Randy Henderson ----- 6 Contributor address; City; State; Zip Code Cypress TX 77433-3133	7	Amount of contributions (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self	
7/14/2015	John Walker ----- 6 Contributor address; City; State; Zip Code Houston TX 77004-7138	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions) geophysicist		9 Employer (See Instructions) seitel-inc.	
7/14/2015	Jane Cherry ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-4452	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/14/2015	Ellen Yarrell ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-1315	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
7/14/2015	Judith Mood ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77077-3725		\$35.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
7/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Trussell 6 Contributor address; City; State; Zip Code Princeton NJ 08540-5220		7 Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) Unemployed	
7/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Linnet Deily 6 Contributor address; City; State; Zip Code Houston TX 77056-3246		7 Amount of contributions (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Oliver Bogler 6 Contributor address; City; State; Zip Code Houston TX 77025-1719		7 Amount of contributions (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Associate Professor		9 Employer (See Instructions) University of Texas MD Anderson Cancer Center	

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Hastings Jr.	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Meridian TX 76665-0899		\$25.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Wayne Kitchens	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Cypress TX 77429-6723		\$50.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Hughes Watters & Askanase
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Andrew Williams	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77035-3637		\$50.00
8	Principal occupation / Job title (See Instructions) Lawyer		9	Employer (See Instructions) McCormick, McNeel, Edler & Williams, L.L.P.
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Timothy Riley	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77008-1757		\$35.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Riley Law Firm
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3 Filer ID (Ethics Commission filers)	
	Tammy Manning		7 Amount of contributions (\$)	
7/14/2015	6 Contributor address;	City; State; Zip Code		\$250.00
		77006 TX		
8 Principal occupation / Job title (See Instructions) Attorney			9 Employer (See Instructions) Galligan & Manning	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bradford Oesch		7 Amount of contributions (\$)	
7/14/2015	6 Contributor address;	City; State; Zip Code		\$100.00
		Richmond TX 77469-7319		
8 Principal occupation / Job title (See Instructions) Attorney			9 Employer (See Instructions) Bradford N. Oesch P.C.	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joanne Vaughan		7 Amount of contributions (\$)	
7/14/2015	6 Contributor address;	City; State; Zip Code		\$50.00
		Dallas TX 75225-5001		
8 Principal occupation / Job title (See Instructions) antique dealer			9 Employer (See Instructions) self	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sharan Finley		7 Amount of contributions (\$)	
7/14/2015	6 Contributor address;	City; State; Zip Code		\$5.00
		Pasadena TX 77503-3455		
8 Principal occupation / Job title (See Instructions) Not employed			9 Employer (See Instructions) Not employed	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Clinton Wells		7 Amount of contributions (\$)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-6035		\$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McDowell Wells	
7/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dolores Goble 6 Contributor address; City; State; Zip Code Houston TX 77025-3338		\$5.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Retired	
7/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Michael DeVoll 6 Contributor address; City; State; Zip Code Houston TX 77035-2409		\$15.00
8 Principal occupation / Job title (See Instructions) Licensed Professional Counselor		9 Employer (See Instructions) Self-employed	
7/14/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rick Provencio 6 Contributor address; City; State; Zip Code El Paso TX 79902-2611		\$5.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Charles Henke	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77027-7528		\$250.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Henke & Williams
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Anthony Heins	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-3107		\$150.00
8	Principal occupation / Job title (See Instructions) Real Estate Broker		9	Employer (See Instructions) Heins Properties
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gayla Sims	7	Amount of contributions (\$)
	7/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77057-2932		\$25.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Marsh	7	Amount of contributions (\$)
	7/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-6570		\$75.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Michael E. DeBakey VA Medical Center
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
7/15/2015	Ann Miller ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77006-4649	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Financial Advisor		9 Employer (See Instructions) A. Miller Investment Advisors, L.P.	
7/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Tirey Counts ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77025-2603	7	Amount of contributions (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Broker		9 Employer (See Instructions) Apartment Locators	
7/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Aslett ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77006-1135	7	Amount of contributions (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Prosecutor		9 Employer (See Instructions) Harris County District Attorney's Office	
7/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jett Williams ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027-3119	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Henke Law Firm	
7/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jim Newgard	7	Amount of contributions (\$) \$

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-5324		\$200.00
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Total Petrochemicals	
4 Date 7/15/2015	5 Full name of contributor Sara Lou Brown	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston TX 77098-1177		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
4 Date 7/15/2015	5 Full name of contributor Andy and Carol Vickery	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) \$10.00
	6 Contributor address; City; State; Zip Code Houston TX 77056-2319		
8 Principal occupation / Job title (See Instructions) Trial Lawyer		9 Employer (See Instructions) Justice Seekers	
4 Date 7/15/2015	5 Full name of contributor Arthur Feldman	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston TX 77024-3705		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Arthur S. Feldman & Associates	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Gordon Young	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
	7/15/2015	6 Contributor address; Houston TX 77005-1129	City; State; Zip Code		\$100.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
4	Date	5 Full name of contributor John Koston	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
	7/15/2015	6 Contributor address; Houston TX 77019-5315	City; State; Zip Code		\$2,500.00
8	Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) cPanel		
4	Date	5 Full name of contributor Lee Bischoff	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
	7/15/2015	6 Contributor address; Houston TX 77027-6338	City; State; Zip Code		\$50.00
8	Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) CPA Global		
4	Date	5 Full name of contributor harry Isensee	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
	7/15/2015	6 Contributor address; Houston TX 77006-3748	City; State; Zip Code		\$5.00
8	Principal occupation / Job title (See Instructions) student		9 Employer (See Instructions) Not employed		
4	Date	5 Full name of contributor	<input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/16/2015	6 Contributor address; City; State; Zip Code Cy Clark	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Melissa Moore 6 Contributor address; City; State; Zip Code Houston TX 77266-7332	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Moore and Associates	
7/17/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John McDowell 6 Contributor address; City; State; Zip Code Houston TX 77010	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McDowell & Associates	
7/19/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jason Powers 6 Contributor address; City; State; Zip Code Houston TX 77006-4604	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) instructional designer, doctor, executive coach		9 Employer (See Instructions) self, contract	
7/19/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Garret Madderra	7	Amount of contributions (\$) \$100.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
7/19/2015	6 Contributor address; City; State; Zip Code San Francisco CA 94114-1521			\$100.00
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Self		
4 Date	5 Full name of contributor James Fairbanks	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
7/21/2015	6 Contributor address; City; State; Zip Code			\$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
4 Date	5 Full name of contributor Howard Hoover	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
7/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77057-1911			\$50.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) BFI, Inc.		
4 Date	5 Full name of contributor Claudia Stravato	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)
7/21/2015	6 Contributor address; City; State; Zip Code Amarillo TX 79106-4108			\$50.00
8 Principal occupation / Job title (See Instructions) Professor		9 Employer (See Instructions) WTAMU		
4 Date	5 Full name of contributor George Foulard	<input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77027-4033		\$1,000.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
4 Date 7/22/2015	5 Full name of contributor Cassie Winthrow	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) \$25.00
	6 Contributor address; City; State; Zip Code		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 7/22/2015	5 Full name of contributor Seth Silverman	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston TX 77006-5467		
8 Principal occupation / Job title (See Instructions) Psychiatrist		9 Employer (See Instructions) Silverman Forensic Psychology	
4 Date 7/22/2015	5 Full name of contributor Clinton Wells	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$) \$50.00
	6 Contributor address; City; State; Zip Code Houston TX 77006-6035		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McDowell Wells	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Marion Collier	7	Amount of contributions (\$)
	7/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-5923		\$200.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Peg Nevers	7	Amount of contributions (\$)
	7/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77025-4104		\$250.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Barbara Koston	7	Amount of contributions (\$)
	7/22/2015	6 Contributor address; City; State; Zip Code		\$100.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Koston	7	Amount of contributions (\$)
	7/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-5315		\$2,175.12
8	Principal occupation / Job title (See Instructions) CEO		9	Employer (See Instructions) cPanel
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/24/2015	Robin Burks ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77024-2756	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Clinical Psychologist		9 Employer (See Instructions) Self Employed	
7/24/2015	Jennifer Falk ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77008-7078	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Harris County	
7/24/2015	Gregg Farris ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77009-4760	7	Amount of contributions (\$) \$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/24/2015	David Black ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056-7220	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/24/2015	Cassie Lee ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) \$

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

7/24/2015	6 Contributor address;                      City;                      State;                      Zip Code	
	Pasadena      TX      77503-4303	\$100.00

8 Principal occupation / Job title (See Instructions) Senior Executive Assistant	9 Employer (See Instructions) Chanel
---	---

7/24/2015	4 Date      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gerald Ryan	
	6 Contributor address;                      City;                      State;                      Zip Code	7 Amount of contributions (\$)
	Houston      TX      77096-4428	\$1,250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

7/24/2015	4 Date      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Peggy Meredith	
	6 Contributor address;                      City;                      State;                      Zip Code	7 Amount of contributions (\$)
	Houston      TX      77027-5507	\$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

7/24/2015	4 Date      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Perry Dorrell	
	6 Contributor address;                      City;                      State;                      Zip Code	7 Amount of contributions (\$)
	Houston      TX      77035-5914	\$40.00

8 Principal occupation / Job title (See Instructions) President	9 Employer (See Instructions) Dorrell Financial LLC
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Morrison	7 Amount of contributions (\$)	
7/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-5315	\$500.00	
8 Principal occupation / Job title (See Instructions) Builder		9 Employer (See Instructions) UrbanCraft Custom Builders	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lisa Lindelef	7 Amount of contributions (\$)	
7/25/2015	6 Contributor address; City; State; Zip Code San Francisco CA 94115-1625	\$100.00	
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Floyd Robinson	7 Amount of contributions (\$)	
7/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77027-5723	\$250.00	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) University of Houston Health Clinic	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Brina Mllikowsky	7 Amount of contributions (\$)	
7/25/2015	6 Contributor address; City; State; Zip Code New York NY 10003-5944	\$100.00	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Everytown for Gun Safety	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	7/27/2015		Gregory Kenney
		6	Contributor address; City; State; Zip Code
		7	Amount of contributions (\$)
			\$200.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Attorney		Exxon Mobil
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	7/27/2015		Paula Stone
		6	Contributor address; City; State; Zip Code
			Aransas Pass TX 78335-1056
		7	Amount of contributions (\$)
			\$15.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	retired teacher		TRS
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	7/27/2015		Dolores Goble
		6	Contributor address; City; State; Zip Code
			Houston TX 77006-6329
		7	Amount of contributions (\$)
			\$25.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Not employed		None
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	7/27/2015		George Rustay
		6	Contributor address; City; State; Zip Code
			Houston TX 77025-2414
		7	Amount of contributions (\$)
			\$25.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	Attorney		Gray Reed& Msgraw
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/27/2015	Michael Tate Barkley ----- 6 Contributor address; City; State; Zip Code Houston TX 77035-5006	7	Amount of contributions (\$)  \$25.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Michael ' Tate' Barkley, P.C.	
7/27/2015	David Z. Mafrige ----- 6 Contributor address; City; State; Zip Code Houston TX 77024-1588	7	Amount of contributions (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions) Commercial Real Estate Investments		9 Employer (See Instructions) David Z. Mafrige Interests	
7/27/2015	Carroll Dartez ----- 6 Contributor address; City; State; Zip Code Houston TX 77227-7169	7	Amount of contributions (\$)  \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/27/2015	Jennifer Chavis ----- 6 Contributor address; City; State; Zip Code Houston TX 77096-4236	7	Amount of contributions (\$)  \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Shell	
7/27/2015	Kara Mings ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/27/2015	6 Contributor address; City; State; Zip Code Bellaire TX 77401-3712		\$500.00
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) Unemployed	
7/28/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Julane Knobil 6 Contributor address; City; State; Zip Code Houston TX 77025-2107		\$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none	
7/28/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Judith Snively 6 Contributor address; City; State; Zip Code Houston TX 77005-3936		\$35.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
7/28/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Charlotte Coffelt 6 Contributor address; City; State; Zip Code Kingwood TX 77345-1814		\$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lawrence Peretzman	7	Amount of contributions (\$)
	7/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-3616		\$15.00
8	Principal occupation / Job title (See Instructions) Unemployed		9	Employer (See Instructions) Unemployed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dotty Oelkers	7	Amount of contributions (\$)
	7/28/2015	6 Contributor address; City; State; Zip Code Conroe TX 77384-3247		\$10.00
8	Principal occupation / Job title (See Instructions) Consultant		9	Employer (See Instructions) DES, Inc.
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joanne Vaughan	7	Amount of contributions (\$)
	7/28/2015	6 Contributor address; City; State; Zip Code Dallas TX 75225-5001		\$10.00
8	Principal occupation / Job title (See Instructions) antique dealer		9	Employer (See Instructions) self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Furr	7	Amount of contributions (\$)
	7/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-1613		\$50.00
8	Principal occupation / Job title (See Instructions) Architect		9	Employer (See Instructions) Gensler
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/28/2015	Betty Adam ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$)  \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/28/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard Shockett ----- 6 Contributor address;                      City;                      State;                      Zip Code Austin TX 78757-4366	7	Amount of contributions (\$)  \$10.00
8 Principal occupation / Job title (See Instructions) Customer Service Rep		9 Employer (See Instructions) IRS	
7/28/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Patricia Bell ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77006-2124	7	Amount of contributions (\$)  \$50.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
7/29/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Steve Washburn ----- 6 Contributor address;                      City;                      State;                      Zip Code Lubbock TX 79464-5162	7	Amount of contributions (\$)  \$5.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions)	
	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Tirey Counts	7	Amount of contributions (\$)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/29/2015	6 Contributor address; City; State; Zip Code Houston TX 77025-2603		\$25.00
8 Principal occupation / Job title (See Instructions) Owner/Broker		9 Employer (See Instructions) Apartment Locators	
7/29/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Michael DeVoll 6 Contributor address; City; State; Zip Code Houston TX 77035-2409		\$25.00
8 Principal occupation / Job title (See Instructions) Licensed Professional Counselor		9 Employer (See Instructions) Self-employed	
7/29/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Flanagan 6 Contributor address; City; State; Zip Code Fort Worth TX 76134-1625		\$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
7/29/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Julane Knobil 6 Contributor address; City; State; Zip Code Houston TX 77025-2107		\$50.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Truett Latimer	7	Amount of contributions (\$)
	7/29/2015	6 Contributor address; City; State; Zip Code Houston TX 77027-5601		\$150.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jack Spivey	7	Amount of contributions (\$)
	7/29/2015	6 Contributor address; City; State; Zip Code Houston TX 77008-5112		\$100.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rosemary Ryan	7	Amount of contributions (\$)
	7/30/2015	6 Contributor address; City; State; Zip Code Houston TX 77096-4428		\$300.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) Retired
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Randy Henderson	7	Amount of contributions (\$)
	7/30/2015	6 Contributor address; City; State; Zip Code Cypress TX 77433-3133		\$100.00
8	Principal occupation / Job title (See Instructions) Lawyer		9	Employer (See Instructions) Self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
7/30/2015	Isabel Kahn ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77035-5002	7	Amount of contributions (\$) \$10.00
8	Principal occupation / Job title (See Instructions) RN	9	Employer (See Instructions) Houston Methodist
7/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) harry Isensee ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77006-3748	7	Amount of contributions (\$) \$10.00
8	Principal occupation / Job title (See Instructions) student	9	Employer (See Instructions) Not employed
7/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Cody Greenwood ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77057-2063	7	Amount of contributions (\$) \$500.00
8	Principal occupation / Job title (See Instructions)	9	Employer (See Instructions)
7/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Mark White ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) \$250.00
8	Principal occupation / Job title (See Instructions) Attorney	9	Employer (See Instructions) Self
7/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sara Love	7	Amount of contributions (\$) \$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
7/31/2015	6 Contributor address; City; State; Zip Code Bethesda MD 20817-4028		\$100.00
8 Principal occupation / Job title (See Instructions) Lobbyist		9 Employer (See Instructions) ACLU of Maryland	
7/31/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jim Newgard 6 Contributor address; City; State; Zip Code Houston TX 77019-5324		7 Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Total Petrochemicals	
7/31/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Newgard 6 Contributor address; City; State; Zip Code Houston TX 77019-5324		7 Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Investments		9 Employer (See Instructions) Total Petrochemicals	
7/31/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Nell Richardson 6 Contributor address; City; State; Zip Code Houston TX 77005-1520		7 Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:		
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)		
4	Date	5 Full name of contributor Lyda Henderson	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	7/31/2015	6 Contributor address; Houston TX 77031-2762		City; State; Zip Code		
8	Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired			
4	Date	5 Full name of contributor Donald Vold	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	8/1/2015	6 Contributor address; Houston TX 77098-4302		City; State; Zip Code		
8	Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed			
4	Date	5 Full name of contributor John Andell	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	8/1/2015	6 Contributor address; Houston TX 77006-6301		City; State; Zip Code		
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)			
4	Date	5 Full name of contributor Bryan Henry	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	8/1/2015	6 Contributor address; Kingwood TX 77339-1308		City; State; Zip Code		
8	Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Humble ISD			
4	Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
8/2/2015	Bob Thurmond ----- 6 Contributor address; City; State; Zip Code Houston TX 77055-7286		7	Amount of contributions (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) RHT Investments		
8/2/2015	Jett Williams ----- 6 Contributor address; City; State; Zip Code Houston TX 77027-3119		7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Henke Law Firm		
8/2/2015	Trey Monsour ----- 6 Contributor address; City; State; Zip Code Houston TX 77003-3238		7	Amount of contributions (\$)  \$25.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) K&L Gates		
8/2/2015	Stephen Victor ----- 6 Contributor address; City; State; Zip Code Houston TX 77007-4147		7	Amount of contributions (\$)  \$25.00
8 Principal occupation / Job title (See Instructions) Obsidian Learning		9 Employer (See Instructions) Strategy and Design Lead		
8/2/2015	Trey Monsour ----- 6 Contributor address; City; State; Zip Code Houston TX 77007-4147		7	Amount of contributions (\$)  \$25.00



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dena Linda	7	Amount of contributions (\$)
	8/4/2015	6 Contributor address; City; State; Zip Code Houston TX 77096-4119		\$25.00
8	Principal occupation / Job title (See Instructions) Clinical Supervisor		9	Employer (See Instructions) University of Houston
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Micki Bronston	7	Amount of contributions (\$)
	8/4/2015	6 Contributor address; City; State; Zip Code Bellaire TX 77401-5803		\$500.00
8	Principal occupation / Job title (See Instructions) Marketing/Public Relations		9	Employer (See Instructions) Self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Brad Odom	7	Amount of contributions (\$)
	8/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-3343		\$100.00
8	Principal occupation / Job title (See Instructions) Self Employed		9	Employer (See Instructions) Salud Winery
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Alice McCarthy	7	Amount of contributions (\$)
	8/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-1113		\$25.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions) Self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
	Robert Simpson	7 Amount of contributions (\$)	
8/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77025-1610		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Barry Palmer	7 Amount of contributions (\$)	
8/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77046-0307		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Coats, Rose, Yale, Ryman & Lee	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Barkley Thompson	7 Amount of contributions (\$)	
8/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-1504		
8 Principal occupation / Job title (See Instructions) Reverend		9 Employer (See Instructions) Christ Church	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dean Putterman	7 Amount of contributions (\$)	
8/7/2015	6 Contributor address; City; State; Zip Code Houston TX		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Financial Consultant	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Bruce	7 Amount of contributions (\$)	

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
8/7/2015	6 Contributor address; City; State; Zip Code Las Vegas NV 89141-4205		\$500.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Jones Vargas	
4 Date	5 Full name of contributor James Robertson	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
8/10/2015	6 Contributor address; City; State; Zip Code Houston TX		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Roberston & Anschutz, PC	
4 Date	5 Full name of contributor Marc Stanley	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
8/10/2015	6 Contributor address; City; State; Zip Code Dallas TX 75205-3440		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Stanley, Mandel & Iola, LLP	
4 Date	5 Full name of contributor Michael Bullington	<input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
8/11/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-6017		
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Rational Systems	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	Gordon Quan				
8/11/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77251-1562				\$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Attorney	Quan, Burdette & Perez

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	Eileen Seagraves				
8/11/2015	6 Contributor address; City; State; Zip Code				
	Cypress TX 77433-3739				\$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	Laurie Geston				
8/11/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77027-6218				\$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
	Debra Hovnatanian				
8/11/2015	6 Contributor address; City; State; Zip Code				
	Houston TX 77401				\$100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
8/11/2015	Carlos Gonzales ----- 6 Contributor address; City; State; Zip Code Houston TX 77019-3519	7	Amount of contributions (\$)  \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/11/2015	Clinton Wells ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-6035	7	Amount of contributions (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McDowell Wells	
8/11/2015	Judith Snively ----- 6 Contributor address; City; State; Zip Code Houston TX 77005-3936	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
8/11/2015	Jimmy Grace ----- 6 Contributor address; City; State; Zip Code Houston TX 77008-4305	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) Priest		9 Employer (See Instructions) St. Andrew's Episcopal	
8/11/2015	Michael Goble ----- 6 Contributor address; City; State; Zip Code Houston TX 77008-4305	7	Amount of contributions (\$)  \$100.00



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Myles Siegal	7	Amount of contributions (\$)
	8/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-2023		\$25.00
8	Principal occupation / Job title (See Instructions) Sales		9	Employer (See Instructions) Tenaris
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Trey Monsour	7	Amount of contributions (\$)
	8/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77003-3238		\$25.00
8	Principal occupation / Job title (See Instructions) attorney		9	Employer (See Instructions) K&L Gates
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Andy and Carol Vickery	7	Amount of contributions (\$)
	8/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-2319		\$10.00
8	Principal occupation / Job title (See Instructions) Trial Lawyer		9	Employer (See Instructions) Justice Seekers
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Marjorie Johnson	7	Amount of contributions (\$)
	8/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-1008		\$1,000.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
8/18/2015	Mickey Altman ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005-1817	7	Amount of contributions (\$) \$500.00
8	Principal occupation / Job title (See Instructions) Investor	9	Employer (See Instructions) Self
8/18/2015	Mary Pfeiffer ----- 6 Contributor address;                      City;                      State;                      Zip Code Washington DC 20002-7331	7	Amount of contributions (\$) \$15.00
8	Principal occupation / Job title (See Instructions) Finance Director	9	Employer (See Instructions) Kuster for Congress
8/19/2015	David Cukierman ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056-4100	7	Amount of contributions (\$) \$2,000.00
8	Principal occupation / Job title (See Instructions)	9	Employer (See Instructions)
8/19/2015	David Farris ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019-5315	7	Amount of contributions (\$) \$1,490.00
8	Principal occupation / Job title (See Instructions) Attorney	9	Employer (See Instructions) cPanel, Inc.
8/19/2015	John Koston ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$) \$1,490.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
8/19/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-5315		\$124.88
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) cPanel	
4 Date 8/19/2015	5 Full name of contributor Jason Powers out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77006-4604	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) instructional designer, doctor, executive coach		9 Employer (See Instructions) self, contract	
4 Date 8/20/2015	5 Full name of contributor Tristan Berlanga out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77007-8307	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 8/20/2015	5 Full name of contributor James Fairbanks out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77030-1002	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions) university professor		9 Employer (See Instructions) Univ. of Houston Downtown	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) James Probst	7	Amount of contributions (\$)
8/21/2015	6 Contributor address; City; State; Zip Code Humble TX 77396-4515		\$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Rogers	7	Amount of contributions (\$)
8/21/2015	6 Contributor address; City; State; Zip Code Dallas TX 75205-3037		\$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
		Real Estate Developer	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Howard Hoover	7	Amount of contributions (\$)
8/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77057-1911		\$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Attorney		BFI, Inc.	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Hilary Fried	7	Amount of contributions (\$)
8/21/2015	6 Contributor address; City; State; Zip Code Milford CT 06460-8148		\$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
technical writer		(retired)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3 Filer ID (Ethics Commission filers)	
	Terry Fry		7	
8/21/2015	6 Contributor address; City; State; Zip Code Houston TX 77027-6438		Amount of contributions (\$) \$100.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Terry G. Fry, P.C.		
	Ronald Rea		7	
8/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77257-1085		Amount of contributions (\$) \$20.00	
8 Principal occupation / Job title (See Instructions) Social worker		9 Employer (See Instructions) Retired		
	George Foulard		7	
8/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77027-4033		Amount of contributions (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed		
	Daniel Arguijo		7	
8/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-3628		Amount of contributions (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)		
	Haddis Tewolde		7	
			Amount of contributions (\$)	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gilbert Baker	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77024-5736		\$250.00
8	Principal occupation / Job title (See Instructions) Financial Consultant		9	Employer (See Instructions) The AFP Group
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Karen Dow	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code		\$200.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kathryn Nelson	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-3660		\$50.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Berg Feldman Johnson Bell LLP
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Aslett	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-1135		\$100.00
8	Principal occupation / Job title (See Instructions) Prosecutor		9	Employer (See Instructions) Harris County District Attorney's Office
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
8/25/2015	David Barnshart ----- 6 Contributor address; City; State; Zip Code Houston TX 77004-7205	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/25/2015	Julie Countiss ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-5217	7	Amount of contributions (\$) \$40.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Berry Firm	
8/25/2015	Robert Glaser ----- 6 Contributor address; City; State; Zip Code Houston TX 77098-0025	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Dymat, Inc.	
8/25/2015	David Mee ----- 6 Contributor address; City; State; Zip Code Houston TX 77096-5836	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/25/2015	Brenda Gibson ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$100.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77069-1736	7 Amount of contributions (\$) \$250.00	
8 Principal occupation / Job title (See Instructions) Paralegal		9 Employer (See Instructions) Yetter Coleman LLP	
8/25/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Martha Williams 6 Contributor address; City; State; Zip Code Houston TX 77006-1202	7 Amount of contributions (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/25/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) L Gardner Landry 6 Contributor address; City; State; Zip Code Houston TX 77227-2524	7 Amount of contributions (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/25/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert Binstock 6 Contributor address; City; State; Zip Code Houston TX 77096-4149	7 Amount of contributions (\$) \$500.00	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Reich and Binstock LLP.	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Marvin Rich	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77096-4111		\$250.00
8	Principal occupation / Job title (See Instructions) Retired		9	Employer (See Instructions) None
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Rushefsky	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77096-3924		\$25.00
8	Principal occupation / Job title (See Instructions) Pharmacist		9	Employer (See Instructions) N/a
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bridget Jensen	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-3704		\$15.00
8	Principal occupation / Job title (See Instructions) Not employed		9	Employer (See Instructions) Not employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Oliver Bogler	7	Amount of contributions (\$)
	8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77025-1719		\$500.00
8	Principal occupation / Job title (See Instructions) Associate Professor		9	Employer (See Instructions) University of Texas MD Anderson Cancer Center
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
8/25/2015	Richard Bischoff ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019-1001	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) BSL Golf	
8/26/2015	V.G. Levine ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77056-3243	7	Amount of contributions (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/26/2015	Martin J. Siegel ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77098	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
8/26/2015	Ty Kelly ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019-1509	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/26/2015	C Dieter Ufer ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019-1509	7	Amount of contributions (\$) \$100.00



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
8/27/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-5214		\$100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)	
8/27/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dana Epley 6 Contributor address; City; State; Zip Code Houston TX 77006-3710		7 Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Sales mgr		9 Employer (See Instructions) Marriott	
8/27/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sue Ann Cox 6 Contributor address; City; State; Zip Code Houston TX 77007-2631		7 Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Computer Programmer		9 Employer (See Instructions) IRS	
8/28/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kirk Weaver 6 Contributor address; City; State; Zip Code Houston TX 77056-2022		7 Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christopher McCord	7	Amount of contributions (\$)
	8/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-3032		\$200.00
8	Principal occupation / Job title (See Instructions) Investment Banking		9	Employer (See Instructions) Healthcare Growth Partners
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Christian Alexander	7	Amount of contributions (\$)
	8/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77024-6703		\$500.00
8	Principal occupation / Job title (See Instructions) COO		9	Employer (See Instructions) Organic Fuels
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Grant Harpold	7	Amount of contributions (\$)
	8/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-2039		\$500.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Vincent, Lopez, Serafino, Jenevein
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Harlan Murphy	7	Amount of contributions (\$)
	8/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77057-1803		\$250.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
8/28/2015	Fabene Welch ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77002-6707	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) EnerVest Ltd	
8/28/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Julane Knobil ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77025-2107	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none	
8/29/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jacquelyn Cox ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005-4026	7	Amount of contributions (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Chris Di Ferrante ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77008-7036	7	Amount of contributions (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self	
8/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Isabel Kahn	7	Amount of contributions (\$) \$

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

8/30/2015	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77035-5002	\$10.00
-----------	--	---------

8 Principal occupation / Job title (See Instructions) RN	9 Employer (See Instructions) Houston Methodist
---	--

8/30/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ted Dom	7 Amount of contributions (\$)  \$100.00
	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77019-4127	

8 Principal occupation / Job title (See Instructions) Commercial Real Estate	9 Employer (See Instructions) Cameron Management
---	---

8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Shannon Hayes	7 Amount of contributions (\$)  \$1,000.00
	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77025-2424	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions) not available
---	--

8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) M. A. Correll	7 Amount of contributions (\$)  \$1,000.00
	6 Contributor address; <span style="float: right;">City; State; Zip Code</span> Houston TX 77019-5916	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Susan Soussan	7	Amount of contributions (\$)
	8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-3079		\$100.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Law Office of Susan Soussan
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lizabeth Green	7	Amount of contributions (\$)
	8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77057-2989		\$500.00
8	Principal occupation / Job title (See Instructions) Real Estate		9	Employer (See Instructions) Capstar Commercial
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Janet Chafin	7	Amount of contributions (\$)
	8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77010-4037		\$100.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Jackson Walker
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Adam Briscoe	7	Amount of contributions (\$)
	8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-3747		\$100.00
8	Principal occupation / Job title (See Instructions) Producer		9	Employer (See Instructions) Sam-I-Am Films
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		



**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

8/31/2015	6 Contributor address; City; State; Zip Code	\$50.00
	Houston TX 77006-1261	

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) US Dept. Of Justice
---	--

4 Date 8/31/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dotty Oelkers	7 Amount of contributions (\$) \$50.00
	6 Contributor address; City; State; Zip Code	
	Conroe TX 77384-3247	

8 Principal occupation / Job title (See Instructions) Consultant	9 Employer (See Instructions) DES, Inc.
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4 Date 8/31/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dee Dee Dochen	7 Amount of contributions (\$) \$100.00
	6 Contributor address; City; State; Zip Code	
	Houston TX 77005-3050	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date 8/31/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Caroline Minter	7 Amount of contributions (\$) \$15.00
	6 Contributor address; City; State; Zip Code	
	Houston TX 77030-1215	

8 Principal occupation / Job title (See Instructions) Not employed	9 Employer (See Instructions) Not employed
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Dawson Financial Services	7	Amount of contributions (\$)
8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-1906		\$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Mafrige	7	Amount of contributions (\$)
8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77024-1588		\$1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) David Z. Mafrige Interests	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Richard Fallin	7	Amount of contributions (\$)
8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		\$500.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Self	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Bailey	7	Amount of contributions (\$)
8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-2109		\$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Cruse, Scott, Henderson & Allen, L.L.P.	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
8/31/2015	Elizabeth Ashton ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77003-2238	7	Amount of contributions (\$) \$35.00
8 Principal occupation / Job title (See Instructions) not employeed		9 Employer (See Instructions) not employeed	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Tirey Counts ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77025-2603	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Broker		9 Employer (See Instructions) Apartment Locators	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jennifer Chavis ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77096-4236	7	Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Shell	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lance Rosmarin ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027-5147	7	Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Coldwell Banker	
8/31/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Barbara McGinity	7	Amount of contributions (\$) \$50.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
8/31/2015	6 Contributor address; City; State; Zip Code Houston TX 77041-9229		\$100.00
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) Better Business Bureau	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Leah Ellen Harrison	7	Amount of contributions (\$)
9/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77009-7106		\$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bob Thurmond	7	Amount of contributions (\$)
9/2/2015	6 Contributor address; City; State; Zip Code Houston TX 77055-7286		\$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) RHT Investments	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Victor	7	Amount of contributions (\$)
9/2/2015	6 Contributor address; City; State; Zip Code Houston TX 77007-4147		\$25.00
8 Principal occupation / Job title (See Instructions) Obsidian Learning		9 Employer (See Instructions) Strategy and Design Lead	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
9/3/2015	Mary Ann Young				\$250.00
6 Contributor address;		City;	State;	Zip Code	
		Houston	TX	77005-1129	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Director	Bell for Mayor

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
9/3/2015	Lance McGhee				\$25.00
6 Contributor address;		City;	State;	Zip Code	
		Houston	TX	77004-1812	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
9/3/2015	George Kelly				\$200.00
6 Contributor address;		City;	State;	Zip Code	
		Houston	TX	77006-2549	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
Chairman and CEO	Cap Street Group

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )	7	Amount of contributions (\$)
9/3/2015	Tadesse Gebremussie				\$100.00
6 Contributor address;		City;	State;	Zip Code	

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/3/2015	Alice Collette ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-4420	7	Amount of contributions (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) The Heritage Society	
9/3/2015	Richard Newlin ----- 6 Contributor address; City; State; Zip Code Houston TX 77023-3503	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Florist/Self Employed		9 Employer (See Instructions) Self Employed	
9/3/2015	Jennifer Paden ----- 6 Contributor address; City; State; Zip Code Houston TX 77005-1615	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Secretary		9 Employer (See Instructions) Christ Church Cathedral	
9/3/2015	Jay Monroe ----- 6 Contributor address; City; State; Zip Code Houston TX 77019-5916	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Martha Turner Sotheby's	
9/3/2015	Dillon Kyle ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/3/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-3615		\$500.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Dillon Kyle Architects	
9/4/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Hugh Philip Cowdin 6 Contributor address; City; State; Zip Code Houston TX 77005-2623		\$150.00
8 Principal occupation / Job title (See Instructions) Contractor/Builder		9 Employer (See Instructions) H. Phillip Cowden Company	
9/4/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Hugh Philip Cowdin 6 Contributor address; City; State; Zip Code Houston TX 77005-2623		\$150.00
8 Principal occupation / Job title (See Instructions) Contractor/Builder		9 Employer (See Instructions) H. Phillip Cowden Company	
9/5/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Frank Ohrt 6 Contributor address; City; State; Zip Code Houston TX 77018-2209		\$300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Retired	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Karen George	7	Amount of contributions (\$)
	9/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-2622		\$250.00
8	Principal occupation / Job title (See Instructions) Financial consultant		9	Employer (See Instructions) Ralph S. O'Connor & Associates
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Aurko Dutta	7	Amount of contributions (\$)
	9/7/2015	6 Contributor address; City; State; Zip Code		\$1,001.00
8	Principal occupation / Job title (See Instructions) VP		9	Employer (See Instructions) RBF Management
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gertrude Meanor	7	Amount of contributions (\$)
	9/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77096-4426		\$100.00
8	Principal occupation / Job title (See Instructions) Doctor		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gertrude Meanor	7	Amount of contributions (\$)
	9/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77096-4426		\$25.00
8	Principal occupation / Job title (See Instructions) Doctor		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
9/8/2015	Craig Muessig ----- 6 Contributor address;                      City;                      State;                      Zip Code Baytown                      TX 77521-4118	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
9/8/2015	Kent Grubbs ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77007-2010	7	Amount of contributions (\$)  \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
9/8/2015	Michael Hendryx ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77024-3606	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Strong Pipkin	
9/8/2015	Robert Taylor ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston                      TX 77006-4013	7	Amount of contributions (\$)  \$150.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions) Chelsea Architects	
9/8/2015	Frank Tilton ----- 6 Contributor address;                      City;                      State;                      Zip Code	7	Amount of contributions (\$)

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/8/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-3140	\$1,000.00	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired	
4 Date 9/8/2015	5 Full name of contributor Dennis Arnie out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77063-5105	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date 9/8/2015	5 Full name of contributor Chris Di Ferrante out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77008-7036	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self	
4 Date 9/8/2015	5 Full name of contributor Clinton Wells out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77006-6035	7	Amount of contributions (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McDowell Wells	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Evelyn Boatwright	7	Amount of contributions (\$)
	9/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77079-7018		\$500.00
8	Principal occupation / Job title (See Instructions) Not employed		9	Employer (See Instructions) Not employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ellen Yarrell	7	Amount of contributions (\$)
	9/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-1315		\$2,500.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) John Glover	7	Amount of contributions (\$)
	9/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-6033		\$250.00
8	Principal occupation / Job title (See Instructions) Attorney		9	Employer (See Instructions) Self
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Alison Malone	7	Amount of contributions (\$)
	9/9/2015	6 Contributor address; City; State; Zip Code Dallas TX 75225-7119		\$250.00
8	Principal occupation / Job title (See Instructions) Advertising		9	Employer (See Instructions) Self Employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/9/2015	Janet Chafin	7	Amount of contributions (\$)
	6 Contributor address; City; State; Zip Code Houston TX 77010-4037		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jackson Walker	
9/9/2015	4 Date	5 Full name of contributor Alison Bell	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77025-1719	\$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions)	
9/9/2015	4 Date	5 Full name of contributor David Crossley	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77006-3708	\$100.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
9/9/2015	4 Date	5 Full name of contributor James Cauley	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Louisville KY 40241-6209	\$1,500.00
8 Principal occupation / Job title (See Instructions) Political Consultant		9 Employer (See Instructions) self	
	4 Date	5 Full name of contributor Colleen Butterfield	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# )	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/9/2015	6 Contributor address; City; State; Zip Code Grapevine TX 76051-6665		\$15.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions)	
9/9/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Bryce Callahan 6 Contributor address; City; State; Zip Code Houston TX 77005-1112		7 Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Yetter Coleman	
9/9/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jacque Passino 6 Contributor address; City; State; Zip Code Houston TX 77019-5917		7 Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Change Management Consultant		9 Employer (See Instructions) Self	
9/9/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Steve Moore 6 Contributor address; City; State; Zip Code		7 Amount of contributions (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/9/2015	Charles Rosson	\$250.00
6 Contributor address; City; State; Zip Code		

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) V&E
---	--------------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/9/2015	James Furr	\$100.00
6 Contributor address; City; State; Zip Code		
Houston TX 77005-1613		

8 Principal occupation / Job title (See Instructions) Architect	9 Employer (See Instructions) Gensler
--	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/9/2015	Seth Russell	\$200.00
6 Contributor address; City; State; Zip Code		

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Andrews Myers
---	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/9/2015	Jeffrey Johnston	\$500.00
6 Contributor address; City; State; Zip Code		
Houston TX 77002-6706		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
9/9/2015	Barrett Reasoner <hr/> 6 Contributor address; City; State; Zip Code Houston TX 77002-5215	7	Amount of contributions (\$)  \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Gibbs & Bruns, L.L.P.	
9/9/2015	Michael Holloman <input type="checkbox"/> out of state PAC(ID# ) <hr/> 6 Contributor address; City; State; Zip Code Houston TX 77005-1620	7	Amount of contributions (\$)  \$250.00
8 Principal occupation / Job title (See Instructions) Business Broker		9 Employer (See Instructions) Murphy Business	
9/9/2015	Robert Schick <input type="checkbox"/> out of state PAC(ID# ) <hr/> 6 Contributor address; City; State; Zip Code Houston TX 77024-7111	7	Amount of contributions (\$)  \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Vinson & Elkins	
9/9/2015	John Chapoton <input type="checkbox"/> out of state PAC(ID# ) <hr/> 6 Contributor address; City; State; Zip Code Houston TX 77002-3009	7	Amount of contributions (\$)  \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/9/2015	Nils Magelssen <input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$)





# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/10/2015	Caroline Minter	7	Amount of contributions (\$)
	6 Contributor address; City; State; Zip Code Houston TX 77030-1215		
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
9/10/2015	4 Date	5 Full name of contributor Pamela Lanagan	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Nacogdoches TX 75965-2656	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/10/2015	4 Date	5 Full name of contributor Randy Henderson	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Cypress TX 77433-3133	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self	
9/10/2015	4 Date	5 Full name of contributor Barbara McGinity	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# ) 6 Contributor address; City; State; Zip Code Houston TX 77041-9229	
8 Principal occupation / Job title (See Instructions) Social Worker		9 Employer (See Instructions) Better Business Bureau	
	4 Date	5 Full name of contributor Jayson Rhoton	7 Amount of contributions (\$)
		<input type="checkbox"/> out of state PAC(ID# )	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/10/2015	6 Contributor address; City; State; Zip Code Houston TX 77006	\$25.00	
8 Principal occupation / Job title (See Instructions) Student		9 Employer (See Instructions) University of Texas	
9/11/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jim Adler 6 Contributor address; City; State; Zip Code Houston TX 77027-3274	7 Amount of contributions (\$) \$250.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Jim S. Adler and Associates	
9/11/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Arthur Nicholson 6 Contributor address; City; State; Zip Code San Antonio TX 78209-2205	7 Amount of contributions (\$) \$250.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self	
9/11/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Clinton Wells 6 Contributor address; City; State; Zip Code Houston TX 77006-6035	7 Amount of contributions (\$) \$100.00	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) McDowell Wells	

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/11/2015	George Cook ----- 6 Contributor address; City; State; Zip Code Katy TX 77450-4546	
		\$50.00

8 Principal occupation / Job title (See Instructions) pharmacist	9 Employer (See Instructions) CHS
---	--------------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/12/2015	Ron Marks ----- 6 Contributor address; City; State; Zip Code Houston TX 77007-8021	
		\$250.00

8 Principal occupation / Job title (See Instructions) self	9 Employer (See Instructions) self
---	---------------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/13/2015	Andrew McFarland ----- 6 Contributor address; City; State; Zip Code Houston TX 77069-1127	
		\$500.00

8 Principal occupation / Job title (See Instructions) Not employed	9 Employer (See Instructions) Not employed
---	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	7 Amount of contributions (\$)
9/14/2015	Rick Provencio ----- 6 Contributor address; City; State; Zip Code El Paso TX 79902-2611	
		\$5.00

8 Principal occupation / Job title (See Instructions) not employed	9 Employer (See Instructions) none
---	---------------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/14/2015	Barry Moore ----- 6 Contributor address; City; State; Zip Code Houston TX 77002-2815	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) Senior Associate		9 Employer (See Instructions) Gensler & Assoc.	
9/14/2015	Jerri Stevak ----- 6 Contributor address; City; State; Zip Code Houston TX 77077-3831	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions) Origin Scheduling Manager		9 Employer (See Instructions) CITGO Petroleum Corp	
9/14/2015	William McKenzie ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-2240	7	Amount of contributions (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions) IT Architect		9 Employer (See Instructions) Chevron	
9/14/2015	Eric Pulaski ----- 6 Contributor address; City; State; Zip Code Houston TX 77024-3834	7	Amount of contributions (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) SmartVault Corp.	
9/14/2015	Georgianna Hockman ----- 6 Contributor address; City; State; Zip Code Houston TX 77024-3834	7	Amount of contributions (\$)  \$1,000.00

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
9/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77227-7039	7 Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Michael McMahan	7 Amount of contributions (\$)
9/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77025-1720	7 Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Civil Engineer		9 Employer (See Instructions) Turner Collie & Broden
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Joy Stapp	7 Amount of contributions (\$)
9/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77008-7062	7 Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Counselant		9 Employer (See Instructions) Stapp Singleton
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Will Robinson	7 Amount of contributions (\$)
9/14/2015	6 Contributor address; City; State; Zip Code Victoria TX 77902-2549	7 Amount of contributions (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/15/2015		Andrew Lubertkin
		6	Contributor address; City; State; Zip Code
			Houston TX 77027-2902
		7	Amount of contributions (\$)
			\$500.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/15/2015		Marilyn Oshman
		6	Contributor address; City; State; Zip Code
			Houston TX 77227-7969
		7	Amount of contributions (\$)
			\$100.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	CEO		Oshman's Sporting Goods Store
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/15/2015		Andrew Rice
		6	Contributor address; City; State; Zip Code
		7	Amount of contributions (\$)
			\$100.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )
	9/15/2015		Andrea Greer and Henry Hill
		6	Contributor address; City; State; Zip Code
			Houston TX 77009-6629
		7	Amount of contributions (\$)
			\$200.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID# )

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
9/15/2015	Jason Williams ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77019-2141	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/15/2015	4 Date 5 Full name of contributor Charles Sharman <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77098-2685	7	Amount of contributions (\$) \$600.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/15/2015	4 Date 5 Full name of contributor Jennifer LeGrand <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Corporate Counsel		9 Employer (See Instructions) Exterran	
9/15/2015	4 Date 5 Full name of contributor Leslie Swackhamer <input type="checkbox"/> out of state PAC(ID# ) ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027-6309	7	Amount of contributions (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Various		9 Employer (See Instructions) Stage Director	
9/15/2015	4 Date 5 Full name of contributor Richard Finger <input type="checkbox"/> out of state PAC(ID# )	7	Amount of contributions (\$) \$200.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-1111		\$300.00
8 Principal occupation / Job title (See Instructions) Options Trader		9 Employer (See Instructions) Self	
9/16/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Schellist, Lazarz, Slobin LLP 6 Contributor address; City; State; Zip Code Houston TX 77046-1108		\$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/16/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kennon Pavona 6 Contributor address; City; State; Zip Code Houston TX 77006-4561		\$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/16/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Travis Booher 6 Contributor address; City; State; Zip Code Tyler TX 75711-7025		\$5,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Coghlan Crowson	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Andy and Carol Vickery	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-2319		\$500.00
8	Principal occupation / Job title (See Instructions) Trial Lawyer		9	Employer (See Instructions) Justice Seekers
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Linnet Deily	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-3246		\$200.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Wayne Clawwater	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77005-3956		\$100.00
8	Principal occupation / Job title (See Instructions) attorney		9	Employer (See Instructions) shepherd, scott, clawwater & houston LLP
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Charles Puccio	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77007-4954		\$200.00
8	Principal occupation / Job title (See Instructions) Director		9	Employer (See Instructions) The Beacon
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
9/18/2015	Melissa Bondy ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77098-2801	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/18/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Chris Akbari ----- 6 Contributor address;                      City;                      State;                      Zip Code Nederland TX 77627-1363	7	Amount of contributions (\$)  \$500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) ITEX Group	
9/18/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Jonny Heins ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77005-3005	7	Amount of contributions (\$)  \$1,000.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Andrew's Kurth	
9/18/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Linda Bischoff ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77007-2520	7	Amount of contributions (\$)  \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/18/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Anthony Heins	7	Amount of contributions (\$)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Barkley Thompson	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77019-1504		\$150.00
8	Principal occupation / Job title (See Instructions) Reverend		9	Employer (See Instructions) Christ Church
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gretchen Hilyard	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77024-5500		\$500.00
8	Principal occupation / Job title (See Instructions) Not employed		9	Employer (See Instructions) Not employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Andy and Carol Vickery	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-2319		\$10.00
8	Principal occupation / Job title (See Instructions) Trial Lawyer		9	Employer (See Instructions) Justice Seekers
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rob Todd	7	Amount of contributions (\$)
	9/18/2015	6 Contributor address; City; State; Zip Code Houston TX 77002-1712		\$3,000.00
8	Principal occupation / Job title (See Instructions) Executive		9	Employer (See Instructions) Amplified Solutions
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3	Filer ID (Ethics Commission filers)
9/18/2015	Mary Pfeiffer ----- 6 Contributor address; City; State; Zip Code Washington DC 20002-7331	7	Amount of contributions (\$)  \$15.00
8	Principal occupation / Job title (See Instructions) Finance Director	9	Employer (See Instructions) Kuster for Congress
9/19/2015	Jason Powers ----- 6 Contributor address; City; State; Zip Code Houston TX 77006-4604	7	Amount of contributions (\$)  \$100.00
8	Principal occupation / Job title (See Instructions) instructional designer, doctor, executive coach	9	Employer (See Instructions) self, contract
9/19/2015	Amorette Bryant ----- 6 Contributor address; City; State; Zip Code Houston TX 77002-6200	7	Amount of contributions (\$)  \$50.00
8	Principal occupation / Job title (See Instructions)	9	Employer (See Instructions)
9/20/2015	Phyllis Renfro ----- 6 Contributor address; City; State; Zip Code Houston TX 77002-6200	7	Amount of contributions (\$)  \$100.00
8	Principal occupation / Job title (See Instructions) Board of Directors	9	Employer (See Instructions) Faith and Reason
4	Patricia Bell ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/20/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-2124		\$250.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
9/20/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Randy Henderson 6 Contributor address; City; State; Zip Code Cypress TX 77433-3133		\$50.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self	
9/21/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Eddie Sargent 6 Contributor address; City; State; Zip Code Houston TX 77019-4829		\$500.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Arc-Com	
9/21/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Robert MacNaughton 6 Contributor address; City; State; Zip Code Houston TX 77007-8008		\$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Porter & Powers, PLLC	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Curt Hesse						
	6 Contributor address;			City;	State;	Zip Code	
9/21/2015				Houston	TX	77002-1646	7 Amount of contributions (\$) \$300.00

8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Moore and Associates
---	---

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Jay and Julia Hellums						
	6 Contributor address;			City;	State;	Zip Code	
9/21/2015				Houston	TX		7 Amount of contributions (\$) \$100.00

8 Principal occupation / Job title (See Instructions) Investment Banker	9 Employer (See Instructions)
--	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Gregory Browne						
	6 Contributor address;			City;	State;	Zip Code	
9/21/2015				Houston	TX	77024-4931	7 Amount of contributions (\$) \$250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
	Ricardo Weitz						
	6 Contributor address;			City;	State;	Zip Code	
9/21/2015				Houston	TX	77024-7000	7 Amount of contributions (\$) \$5,000.00

8 Principal occupation / Job title (See Instructions) Real Estate & Auto Dealerships	9 Employer (See Instructions) Self
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID# )				
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/21/2015	Bobby Lowe ----- 6 Contributor address; City; State; Zip Code Houston TX 77007-5420	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Strategic Careers	
9/21/2015	Laura Roach ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/21/2015	Odell Winn ----- 6 Contributor address; City; State; Zip Code Bellaire TX 77401-3931	7	Amount of contributions (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Winn Consulting Group	
9/22/2015	Katina Pontikes ----- 6 Contributor address; City; State; Zip Code Houston TX 77005-1801	7	Amount of contributions (\$) \$25.00
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) none	
9/21/2015	Randy Henderson ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$250.00

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/22/2015	6 Contributor address; City; State; Zip Code Cypress TX 77433-3133	7 Amount of contributions (\$) \$15.00	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Self	
9/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Katherine Caldwell 6 Contributor address; City; State; Zip Code Houston TX 77019-4309	7 Amount of contributions (\$) \$250.00	
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Montrose Clinic	
9/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Leslie Karpas 6 Contributor address; City; State; Zip Code Houston TX 77002-6222	7 Amount of contributions (\$) \$50.00	
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Self	
9/22/2015	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Elysia Ragusa 6 Contributor address; City; State; Zip Code Dallas TX 75209	7 Amount of contributions (\$) \$500.00	
8 Principal occupation / Job title (See Instructions) Real Estate Executive		9 Employer (See Instructions) Staubach's Southwest	



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A1:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Adam Briscoe	7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77006-3747	\$100.00

8 Principal occupation / Job title (See Instructions) Producer	9 Employer (See Instructions) Sam-I-Am Films
---	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) George Hawkins	7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-3221	\$25.00

8 Principal occupation / Job title (See Instructions) Financial Planner	9 Employer (See Instructions) AXA Advisors
--	---

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Wyn Bomar	7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77098-3303	\$25.00

8 Principal occupation / Job title (See Instructions) graphic design	9 Employer (See Instructions) self
---	---------------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Judy Mcenany	7 Amount of contributions (\$)
9/22/2015	6 Contributor address; City; State; Zip Code Houst	\$150.00

8 Principal occupation / Job title (See Instructions) Vice President for Public Affairs	9 Employer (See Instructions) Stavanger Sister City Society
--	--

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# )	
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# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
9/22/2015	Kevin Gaudet ----- 6 Contributor address; City; State; Zip Code Houston TX 77019-5210	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed	
9/23/2015	Tom Combs ----- 6 Contributor address; City; State; Zip Code Houston TX 77008-6359	7	Amount of contributions (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Tom Combs & Associates	
9/23/2015	Arthur Fant ----- 6 Contributor address; City; State; Zip Code Houston TX 77057-1926	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/23/2015	Mark Yzaguirre ----- 6 Contributor address; City; State; Zip Code Houston TX 77005-1013	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) University of Houston	
9/23/2015	Steven Reilley ----- 6 Contributor address; City; State; Zip Code	7	Amount of contributions (\$) \$250.00

**MONETARY POLITICAL CONTRIBUTIONS**

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
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9/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77007-2603	\$250.00
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8 Principal occupation / Job title (See Instructions) Attorney	9 Employer (See Instructions) Thompson & Reilley, P.C.
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9/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Amy Combs 6 Contributor address; City; State; Zip Code Washington DC 20016-3866	7 Amount of contributions (\$) \$3,000.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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9/23/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Stephen Dunlap 6 Contributor address; City; State; Zip Code Houston TX 77004-7329	7 Amount of contributions (\$) \$100.00
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8 Principal occupation / Job title (See Instructions) Applications Systems Analyst	9 Employer (See Instructions) M.D. Anderson
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9/24/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Matthew Wareing 6 Contributor address; City; State; Zip Code Houston TX 77027-4117	7 Amount of contributions (\$) \$350.00
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8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A2:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5	Date	6 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) David Kingcaid	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/24/2015	7 Contributor address; City; State; Zip Code Houston TX 77058		\$500.00	Food for meet and greet
			<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

5	Date	6 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Rodney McElroy	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/24/2015	7 Contributor address; City; State; Zip Code Houston TX 77040-4001		\$500.00	Fajita Friday food
			<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

5	Date	6 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Trent Bailey	8	Amount of contributions (\$)	9 In-Kind contribution description
	9/24/2015	7 Contributor address; City; State; Zip Code Houston TX 77095		\$300.00	Food for meet and greet
			<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

The Instruction Guide explains how to complete this form. 1 Total Pages Schedule A2:

2 FILER NAME Robert C. Bell 3 Filer ID (Ethics Commission filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5	Date	6 Full name of contributor Clinton Wells	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	8/11/2015	7 Contributor address; Houston TX 77006-6035	City; State; Zip Code Houston TX 77006-6035		\$287.00	Food and drinks for fundraiser
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
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5	Date	6 Full name of contributor Carol Vickery	<input type="checkbox"/> out of state PAC(ID# )	8	Amount of contributions (\$)	9 In-Kind contribution description
	09/17/15	7 Contributor address; Houston TX 77056-2319	City; State; Zip Code Houston TX 77056-2319		1000.00	Food and drinks for fundraiser
				<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
--	--------------------------------

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

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/22/2015	5 Payee name Three Point Media	
6 Amount (\$) 10944.58	7 Payee address; City; State; Zip Code 3000 K St. NW Ste. 320 Washington DC 20007	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Production Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/21/2015	5 Payee name NRG	
6 Amount (\$) 413.98	7 Payee address; City; State; Zip Code 1201 Fannin St.  Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Energy Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/21/2015	5 Payee name Oldmixon Hill	
6 Amount (\$) 4168.75	7 Payee address; City; State; Zip Code 1201 1st Ave. South. #32 Seattle WA 98134	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online Consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/21/2015	5 Payee name Lone Star Strategies		
6 Amount (\$) 1000	7 Payee address; City; State; Zip Code 10709 Marsha Ln.  Houston TX 77024		
8 PURPOSE OF EXPENDITURE	(a) Category  Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Compliance Consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/21/2015	<b>5</b> Payee name Amegy Bank	
<b>6</b> Amount (\$) 25	<b>7</b> Payee address; City; State; Zip Code 2303 W Holcombe Blvd.  Houston TX 77030	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Accounting/Banking	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Bank Fee
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/21/2015	<b>5</b> Payee name Three Point Media	
<b>6</b> Amount (\$) 25000	<b>7</b> Payee address; City; State; Zip Code 3000 K St. NW Ste. 320 Washington DC 20007	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  TV Purchase Costs
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/18/2015	<b>5</b> Payee name Elegant Valet	
<b>6</b> Amount (\$) 420	<b>7</b> Payee address; City; State; Zip Code 2323 S Voss Rd. #203 Houston TX 77057	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Valet Services
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/16/2015	5 Payee name Three Point Media		
6 Amount (\$) 11327.43	7 Payee address; City; State; Zip Code 3000 K St. NW Ste. 320 Washington DC 20007		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Shoot Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/11/2015	5 Payee name ADP	
6 Amount (\$) 83.41	7 Payee address; City; State; Zip Code 4822 Martin Luther King Jr Blvd  Houston TX 77021	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/8/2015	5 Payee name NRG	
6 Amount (\$) 408.95	7 Payee address; City; State; Zip Code 1201 Fannin St.  Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Reliant Energy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/4/2015	5 Payee name Oldmixon Hill	
6 Amount (\$) 4162.5	7 Payee address; City; State; Zip Code 1201 1st Ave. South. #32 Seattle WA 98134	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online Consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  9/3/2015	5 Payee name  ActBlue		
6 Amount (\$)  323.46	7 Payee address;      City;      State;      Zip Code  366 Summer Street  Somerville MA 02144		

8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> <input type="checkbox"/> Online Fees
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/2/2015	<b>5</b> Payee name Hilltop	
<b>6</b> Amount (\$) 10406.04	<b>7</b> Payee address; City; State; Zip Code 3000 K St. NW  Washington DC 20007	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Consulting 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 Hilltop – Consulting fees
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/2/2015	<b>5</b> Payee name Federal Health Insurance Marketplace	
<b>6</b> Amount (\$) 833.11	<b>7</b> Payee address; City; State; Zip Code 7500 Security Blvd.  Baltimore MD 21244	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense health insurance
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/31/2015	<b>5</b> Payee name Greater Houston Partnership	
<b>6</b> Amount (\$) 825	<b>7</b> Payee address; City; State; Zip Code 1200 Smith St. Suite 700 Houston TX 77002	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Contributions/Donations Made By Candidate/Officeholder/Political Committee	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Event sponsorship/tickets
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/31/2015	5 Payee name Premier Political		
6 Amount (\$) 163.78	7 Payee address; City; State; Zip Code 4805 Woodview Ave.  Austin TX 78756		
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Phone calls
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/27/2015	5 Payee name Catherine Flowers	
6 Amount (\$) 100	7 Payee address; City; State; Zip Code 12015 Merewood Ln.  Houston TX 77071	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/21/2015	5 Payee name ADP	
6 Amount (\$) 83.41	7 Payee address; City; State; Zip Code 4822 Martin Luther King Jr Blvd  Houston TX 77021	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense ADP Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/11/2015	5 Payee name Bison Signs	
6 Amount (\$) 1446.63	7 Payee address; City; State; Zip Code 10100 Clay Rd. Ste. G Houston TX 77080	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/7/2015	5 Payee name Monarch Printing		
6 Amount (\$) 137.47	7 Payee address; City; State; Zip Code 6605 McGrew St. #B Houston TX 77087		
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	<input type="checkbox"/>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/7/2015	5 Payee name Comcast	
6 Amount (\$) 190.69	7 Payee address; City; State; Zip Code 2616 S Voss Rd Houston TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Utilities
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/7/2015	5 Payee name ADP	
6 Amount (\$) 75.26	7 Payee address; City; State; Zip Code 4822 Martin Luther King Jr Blvd Houston TX 77021	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/6/2015	5 Payee name La' Colombe Dior	
6 Amount (\$) 1000	7 Payee address; City; State; Zip Code 3410 Montrose Blvd. Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  8/6/2015	5 Payee name  NGP		
6 Amount (\$)  1500	7 Payee address;                      City;                      State;                      Zip Code  1101 15th St. NW #500 Washington DC 20005		

8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Database
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/5/2015	5 Payee name ActBlue	
6 Amount (\$) 278.87	7 Payee address; City; State; Zip Code 366 Summer Street  Somerville MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense online fundraising fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/5/2015	5 Payee name Academy Awards Advertising	
6 Amount (\$) 1428.95	7 Payee address; City; State; Zip Code 4106 Fannin St.  Houston TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense printed materials
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/3/2015	5 Payee name Marketplace	
6 Amount (\$) 833.11	7 Payee address; City; State; Zip Code 7500 Security Blvd.  Baltimore MD 21244	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense health insurance
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/31/2015	5 Payee name ADP		
6 Amount (\$) 63.43	7 Payee address; City; State; Zip Code 4822 Martin Luther King Jr Blvd  Houston TX 77021		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense adp fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/28/2015	5 Payee name Federal Grill	
6 Amount (\$) 2175.12	7 Payee address; City; State; Zip Code 510 Shepherd Dr.  Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Event Costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/28/2015	5 Payee name Oldmixon Hill	
6 Amount (\$) 4037.5	7 Payee address; City; State; Zip Code 1201 1st Ave. South. #32 Seattle WA 98134	
8 PURPOSE OF EXPENDITURE	(a) Category  Consulting 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 online consulting costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/27/2015	5 Payee name Lone Star Strategies	
6 Amount (\$) 1000	7 Payee address; City; State; Zip Code 10709 Marsha Ln.  Houston TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/27/2015	5 Payee name City of Houston		
6 Amount (\$) 1258	7 Payee address; City; State; Zip Code 900 Bagby St.  Houston TX 77002		
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense filing costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/24/2015	<b>5</b> Payee name ADP	
<b>6</b> Amount (\$) 96.47	<b>7</b> Payee address; City; State; Zip Code 4822 Martin Luther King Jr Blvd  Houston TX 77021	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense adp fees
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/23/2015	<b>5</b> Payee name Global Strategy Group	
<b>6</b> Amount (\$) 13199.58	<b>7</b> Payee address; City; State; Zip Code 215 Park Ave. S.  New York NY 10003	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Polling 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 polling costs
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/14/2015	<b>5</b> Payee name Oldmixon Hill	
<b>6</b> Amount (\$) 4656.25	<b>7</b> Payee address; City; State; Zip Code 1201 1st Ave. South. #32 Seattle WA 98134	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense online consulting costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  7/13/2015	5 Payee name  Monarch Printing		
6 Amount (\$)  2100.05	7 Payee address;                      City;                      State;                      Zip Code  6605 McGrew St. #B Houston TX 77087		

8 PURPOSE OF EXPENDITURE	(a) Category  Printing Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense printing costs
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/10/2015	5 Payee name ADP	
6 Amount (\$) 133.25	7 Payee address; City; State; Zip Code 4822 Martin Luther King Jr Blvd  Houston TX 77021	
8 PURPOSE OF EXPENDITURE	(a) Category  Fees	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense adp fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/8/2015	5 Payee name Stanford Campaigns	
6 Amount (\$) 6100	7 Payee address; City; State; Zip Code 2520 Longview St.  Austin TX 78705	
8 PURPOSE OF EXPENDITURE	(a) Category  Consulting	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense research costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/8/2015	5 Payee name Texas Democratic Party	
6 Amount (\$) 4000	7 Payee address; City; State; Zip Code 4818 E. Ben White Blvd. #104 Austin TX 78741	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voterfile costs
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  7/6/2015	5 Payee name  ActBlue		
6 Amount (\$)  722.72	7 Payee address; City; State; Zip Code  366 Summer Street  Somerville MA 02144		

8 PURPOSE OF EXPENDITURE	(a) Category  Fees	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense online costs
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/2/2015	5 Payee name Federal Health Insurance Marketplace	
6 Amount (\$) 833.11	7 Payee address; City; State; Zip Code 7500 Security Blvd.  Baltimore MD 21244	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  health insurance
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/15/15	5 Payee name Eyo Ita	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/15/15	5 Payee name Nsa Ita	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/15/15	5 Payee name J'Khory Clark		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7907 Hirsch  Houston TX 77016		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/15/15	<b>5</b> Payee name Avery Austin	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 471 Sunnyside  Lancaster TX 75146	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/16/15	<b>5</b> Payee name Eyo Ita	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/16/15	<b>5</b> Payee name Nsa Ita	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/16/15	5 Payee name Avery Austin		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 471 Sunnyside  Lancaster TX 75146		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/16/15	5 Payee name Tyler Doggett	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 308 Duncan Hillsboro TX 76645	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/22/15	5 Payee name Andrea Johnson	
6 Amount (\$) 75	7 Payee address; City; State; Zip Code 7811 Chasefield Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/22/15	5 Payee name Monica Pepper	
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 15115 Chasefield Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/22/15	5 Payee name Rufus Porter		
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 7814 Chasefield Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/22/15	5 Payee name Chris Johnson-Fuller	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 08/22/15	5 Payee name Robert Griggs	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7810 Corinth  Houston TX 77051	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 08/22/15	5 Payee name Bertha Allen	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 2901 Fulton #454 Houston TX 77009	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 08/22/15	5 Payee name Sy'von Breaux		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 1765 Nichole Woods Houston TX 77057		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/22/15	5 Payee name Robert Wooten	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 450 Oak Dale  Stafford TX 77477	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/22/15	5 Payee name Mahayla Pepper	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/22/15	5 Payee name Brianna Arceneaux	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 9210 Benning  Houston TX 77031	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/22/15	5 Payee name Darius White		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chasefield  Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/22/15	<b>5</b> Payee name Eyo Ita	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 08/22/15	<b>5</b> Payee name Nsa Ita	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 08/22/15	<b>5</b> Payee name Zahra Pepper	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  08/22/15	5 Payee name  Chad Johnson		
6 Amount (\$)  40	7 Payee address; City; State; Zip Code  7811 Chasefield  Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/23/15	<b>5</b> Payee name Andrea Johnson	
<b>6</b> Amount (\$) 70	<b>7</b> Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/23/15	<b>5</b> Payee name Monica Pepper	
<b>6</b> Amount (\$) 70	<b>7</b> Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/23/15	<b>5</b> Payee name Rufus Porter	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 7814 Chasefield  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/23/15	5 Payee name Mahayla Pepper		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/23/15	5 Payee name Darius White	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/23/15	5 Payee name Chris Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/23/15	5 Payee name Bertha Allen	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 2901 Fulton #454 Houston TX 77009	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 08/23/15	5 Payee name J'Khory Clark		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 3100 Cleburne Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 08/23/15	<b>5</b> Payee name Eyo Ita	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/23/15	<b>5</b> Payee name Nsa Ita	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 4002 Varner Ct.  Austin TX 78762	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/29/15	<b>5</b> Payee name Andrea Johnson	
<b>6</b> Amount (\$) 75	<b>7</b> Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/29/15	5 Payee name Monica Pepper		
6 Amount (\$) 75	7 Payee address; City; State; Zip Code 15115 Chaseridge Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/29/15	5 Payee name Rufus Porter	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7814 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/29/15	5 Payee name Mahayla Pepper	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/29/15	5 Payee name Darius White	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 08/29/15	5 Payee name Chris Johnson		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/29/15	5 Payee name Chad Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/29/15	5 Payee name Jacqueline Brewer	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 10214 Royal Oaks  Houston TX 77016	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/29/15	5 Payee name Charlotte Camacho	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 2901 Fulton #117 Houston TX 77009	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/30/15	5 Payee name Andrea Johnson		
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 7811 Chasefield Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/30/15	5 Payee name Monica Pepper	
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/30/15	5 Payee name Rufus Porter	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7814 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 08/30/15	5 Payee name Mahayla Pepper	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 08/30/15	5 Payee name Darius White		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 08/30/15	5 Payee name Chris Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 08/30/15	5 Payee name Chad Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/12/15	5 Payee name Andrea Johnson	
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/12/15	5 Payee name Monica Pepper		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 09/12/15	5 Payee name Rufus Porter	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7814 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/12/15	5 Payee name Darius White	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 09/12/15	5 Payee name Chris Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/13/15	5 Payee name Andrea Johnson		
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 7811 Chasefield Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 09/13/15	5 Payee name Monica Pepper	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/13/15	5 Payee name Rufus Porter	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7814 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/13/15	5 Payee name Darius White	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/13/15	5 Payee name Chris Johnson		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 09/19/15	5 Payee name Andrea Johnson	
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/19/15	5 Payee name Chris Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/19/15	5 Payee name Chad Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/19/15	5 Payee name Rufus Porter		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7814 Chasefield Missouri City TX 77489		

8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 09/19/15	5 Payee name Darius White	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/20/15	5 Payee name Andrea Johnson	
6 Amount (\$) 70	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 09/20/15	5 Payee name Chris Johnson	
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield  Missouri City TX 77489	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 09/20/15	5 Payee name Chad Johnson		
6 Amount (\$) 40	7 Payee address; City; State; Zip Code 7811 Chasefield Missouri City TX 77489		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Canvasser Pay
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/20/15	<b>5</b> Payee name Rufus Porter	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 7814 Chasefield  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 09/20/15	<b>5</b> Payee name Darius White	
<b>6</b> Amount (\$) 40	<b>7</b> Payee address; City; State; Zip Code 15115 Chaseridge  Missouri City TX 77489	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvasser Pay
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/20/2015	<b>5</b> Payee name Staples	
<b>6</b> Amount (\$) 83.31	<b>7</b> Payee address; City; State; Zip Code 1919 Taylor St.  Houston TX 77007	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/20/2021	5 Payee name Underbelly		
6 Amount (\$) 67.12	7 Payee address; City; State; Zip Code 1100 Westheimer Rd.  Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch Meeting reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/18/2015	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) 44.98	<b>7</b> Payee address; City; State; Zip Code 8205 Braesmain Dr  Houston TX 77025	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Postage reimbursed to Pat Devney
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/16/2015	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) 22	<b>7</b> Payee address; City; State; Zip Code 8205 Braesmain Dr  Houston TX 77025	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Postage reimbursed to Pat Devney
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Verizon	
<b>6</b> Amount (\$) 95.36	<b>7</b> Payee address; City; State; Zip Code 3817 Southwest Fwy.  Houston TX 77027	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pre-Paid Phone reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/14/2015	5 Payee name Comcast		
6 Amount (\$) 400.66	7 Payee address; City; State; Zip Code 1701 JFK Blvd.  Philadelphia PA 19103		

8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/11/2015	<b>5</b> Payee name Costco	
<b>6</b> Amount (\$) 85.46	<b>7</b> Payee address; City; State; Zip Code 3836 Richmond Ave.  Houston TX 77027	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Campaign Event reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/10/2015	<b>5</b> Payee name Walmart	
<b>6</b> Amount (\$) 85.73	<b>7</b> Payee address; City; State; Zip Code 9555 S Post Oak Rd.  Houston TX 77096	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/5/2015	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) 62.72	<b>7</b> Payee address; City; State; Zip Code 8202 Kirby Dr 1240 Houston TX 77054	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/4/2015	5 Payee name Office Depot		
6 Amount (\$) 200.24	7 Payee address; City; State; Zip Code 8202 Kirby Dr 1240 Houston TX 77054		
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/4/2015	5 Payee name Amazon.com	
6 Amount (\$) 124.74	7 Payee address; City; State; Zip Code 440 Terry Ave N  Seattle WA 98109	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Electronics - Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/2/2015	5 Payee name Kroger	
6 Amount (\$) 26.62	7 Payee address; City; State; Zip Code 1990 Old Spanish Tr  Houston TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Food/Drink for Campaign Event reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/2/2015	5 Payee name Google.com	
6 Amount (\$) 89.49	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy.  Mountain View CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Hosting reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/31/2015	5 Payee name Verizon		
6 Amount (\$) 38.59	7 Payee address; City; State; Zip Code 3817 Southwest Fwy Houston TX 77027		

8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/27/2015	5 Payee name Home Depot	
6 Amount (\$) 33.06	7 Payee address; City; State; Zip Code 999 N Loop W  Houston TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/27/2015	5 Payee name Walmart	
6 Amount (\$) 59.91	7 Payee address; City; State; Zip Code 9555 S Post Oak Rd.  Houston TX 77096	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/27/2015	5 Payee name USPS	
6 Amount (\$) 171.01	7 Payee address; City; State; Zip Code 8205 Braesmain Dr  Houston TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/22/2015	5 Payee name Lucy Ethiopian Restaurant		
6 Amount (\$) 1025.27	7 Payee address; City; State; Zip Code 6800 Southwest Freeway  Houston TX 77074		

8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Costs reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/21/2015	<b>5</b> Payee name Jimmy Johns	
<b>6</b> Amount (\$) 108.14	<b>7</b> Payee address; City; State; Zip Code 2401 W Holcombe  Houston TX 77030	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Lunch for Campaign Meeting reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/20/2015	<b>5</b> Payee name Einsten Bagels	
<b>6</b> Amount (\$) 70.42	<b>7</b> Payee address; City; State; Zip Code 5300 Kirby Dr.  Houston TX 77005	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Bagels for Campaign Meeting reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/20/2015	<b>5</b> Payee name Kroger	
<b>6</b> Amount (\$) 5.38	<b>7</b> Payee address; City; State; Zip Code 1990 Old Spanish Trl.  Houston TX 77054	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Campaign Meeting reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/20/2015	5 Payee name Walmart		
6 Amount (\$) 69.42	7 Payee address; City; State; Zip Code 9555 S Post Oak Rd.  Houston TX 77096		

8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/19/2015	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) 88.2	<b>7</b> Payee address; City; State; Zip Code 8202 Kirby Dr #1240 Houston TX 77054	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 8/20/2015	<b>5</b> Payee name Kroger	
<b>6</b> Amount (\$) 11.27	<b>7</b> Payee address; City; State; Zip Code 1990 Old Spanish Trl.  Houston TX 77054	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 8/18/2015	<b>5</b> Payee name E-Bay	
<b>6</b> Amount (\$) 82	<b>7</b> Payee address; City; State; Zip Code 2065 Hamilton Ave  San Jose CA 95125	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Office Computer Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/14/2015	5 Payee name Verizon		
6 Amount (\$) 62.89	7 Payee address; City; State; Zip Code 1 Verizon Way Basking Ridge NJ 07920		
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Phone reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/17/2015	5 Payee name El Tiempo Cantina	
6 Amount (\$) 230.32	7 Payee address; City; State; Zip Code 3130 Richmond Ave.  Houston TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Event Costs reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/13/2015	5 Payee name Best Buy	
6 Amount (\$) 383.18	7 Payee address; City; State; Zip Code 5133 Richmond Ave.  Houston TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/13/2015	5 Payee name Office Max	
6 Amount (\$) 25.95	7 Payee address; City; State; Zip Code 5540 Wesleyan St.  Houston TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/11/2015	5 Payee name Katz Deli		
6 Amount (\$) 31.96	7 Payee address; City; State; Zip Code 616 Westheimer Rd.  Houston TX 77006		

8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lunch Meeting reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/6/2015	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) 98	<b>7</b> Payee address; City; State; Zip Code 8205 Braesmain Dr Houston TX 77025	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Postage reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/3/2015	<b>5</b> Payee name USPS	
<b>6</b> Amount (\$) 98	<b>7</b> Payee address; City; State; Zip Code 8205 Braesmain Dr Houston TX 77025	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Postage reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/3/2015	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) 57.25	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy. Mountain View CA 94043	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Costs reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/3/2015	5 Payee name Office Max		
6 Amount (\$) 31.38	7 Payee address; City; State; Zip Code 5540 Wesleyan St. Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/3/2015	5 Payee name A-Afordable Office Furniture	
6 Amount (\$) 120	7 Payee address; City; State; Zip Code 5708 N. Shepherd  Houston TX 77091	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/3/2015	5 Payee name Home Depot	
6 Amount (\$) 86.56	7 Payee address; City; State; Zip Code 999 N Loop W  Houston TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/3/2014	5 Payee name USPS	
6 Amount (\$) 98	7 Payee address; City; State; Zip Code 8205 Braesmain Dr  Houston TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/3/2015	5 Payee name OfficeMax		
6 Amount (\$) 31.38	7 Payee address; City; State; Zip Code 5540 Wesleyan St. Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/2/2015	5 Payee name Google	
6 Amount (\$) 57.25	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy.  Mountain View CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Email/Online Hosting reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/24/2015	5 Payee name Reliant Energy	
6 Amount (\$) 598.95	7 Payee address; City; State; Zip Code 1201 Fannin St, Houston, TX 77002  Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Utilities reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/20/2015	5 Payee name USPS	
6 Amount (\$) 98	7 Payee address; City; State; Zip Code 8205 Braesmain Dr  Houston TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/20/2015	5 Payee name Office Depot		
6 Amount (\$) 76.27	7 Payee address; City; State; Zip Code 8202 Kirby Dr #1240 Houston TX 77054		

8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/17/2015	5 Payee name Facebook	
6 Amount (\$) 10.93	7 Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Ads reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/17/2015	5 Payee name Facebook	
6 Amount (\$) 14.16	7 Payee address; City; State; Zip Code 1 Hacker Way  Menlo Park CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category  Advertising Expense	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Ads reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/16/2015	5 Payee name iStock.com	
6 Amount (\$) 33	7 Payee address; City; State; Zip Code 1240 20 Ave SE #200 Calgary AB T2G 1M8	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Images for Social Media reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/15/2015	5 Payee name Fedex Kinkos		
6 Amount (\$) 67.39	7 Payee address; City; State; Zip Code 8330 S Main St.  Houston TX 77025		
8 PURPOSE OF EXPENDITURE	(a) Category  Printing Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/15/2015	5 Payee name Fedex Kinkos	
6 Amount (\$) 10.4	7 Payee address; City; State; Zip Code 8330 S Main St.  Houston TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category  Printing 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 Printing reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/14/2015	5 Payee name Office Depot	
6 Amount (\$) 36.76	7 Payee address; City; State; Zip Code 8202 Kirby Dr #1240 Houston TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/14/2015	5 Payee name Home Depot	
6 Amount (\$) 9.71	7 Payee address; City; State; Zip Code 999 N Loop W  Houston TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/13/2015	5 Payee name USPS		
6 Amount (\$) 98	7 Payee address; City; State; Zip Code 8205 Braesmain Dr Houston TX 77025		
8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental 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 Postage reimbursed to Pat Devney	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/13/2015	5 Payee name USPS	
6 Amount (\$) 49	7 Payee address; City; State; Zip Code 8205 Braesmain Dr  Houston TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Postage reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/13/2015	5 Payee name Verizon Wireless	
6 Amount (\$) 62.89	7 Payee address; City; State; Zip Code 3817 Southwest Fwy.  Houston TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/12/2015	5 Payee name Nikos Nikos	
6 Amount (\$) 37.32	7 Payee address; City; State; Zip Code 2520 Montrose Blvd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  7/10/2015	5 Payee name  OfficeMax		
6 Amount (\$)  41.11	7 Payee address; City; State; Zip Code  5540 Wesleyan St.  Houston TX 77005		

8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/9/2015	5 Payee name Office Depot	
6 Amount (\$) 189.41	7 Payee address; City; State; Zip Code 8202 Kirby Dr #1240 Houston TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/9/2015	5 Payee name Verizon Wireless	
6 Amount (\$) 38.59	7 Payee address; City; State; Zip Code 3817 Southwest Fwy.  Houston TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Pat Devney
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 7/8/2015	5 Payee name Walmart	
6 Amount (\$) 75.52	7 Payee address; City; State; Zip Code 9555 S Post Oak Rd.  Houston TX 77096	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	



**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/7/2015	5 Payee name Houston Chronicle		
6 Amount (\$) 10	7 Payee address; City; State; Zip Code PO Box 4260 Houston TX 77210		

8 PURPOSE OF EXPENDITURE	(a) Category Office Overhead/Rental 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 Subscription reimbursed to Pat Devney
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/3/2015	<b>5</b> Payee name Quickbooks	
<b>6</b> Amount (\$) 19.18	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave.  Mountain View CA 94043	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Accounting Software reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/3/2015	<b>5</b> Payee name Google	
<b>6</b> Amount (\$) 45.16	<b>7</b> Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy.  Mountain View CA 94043	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Office Overhead/Rental 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 Email/Online Hosting reimbursed to Pat Devney
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/1/2015	<b>5</b> Payee name Verizon Wireless	
<b>6</b> Amount (\$) 38.59	<b>7</b> Payee address; City; State; Zip Code 3817 Southwest Fwy  Houston TX 77027	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies reimbursed to Pat Devney
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/22/2015	5 Payee name Black Eyed Pea		
6 Amount (\$) 23.02	7 Payee address; City; State; Zip Code 42111 Bellaire Blvd.  Houston TX 77025		

8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/20/2015	<b>5</b> Payee name Kroger Fuel	
<b>6</b> Amount (\$) 44.14	<b>7</b> Payee address; City; State; Zip Code 1014 Vine St.  Cincinnati OH 45202	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/20/2015	<b>5</b> Payee name Hilton Banquets	
<b>6</b> Amount (\$) 12.5	<b>7</b> Payee address; City; State; Zip Code ?6780 Southwest Fwy?  Houston TX 77074	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/20/2015	<b>5</b> Payee name Hitlon Parking	
<b>6</b> Amount (\$) 12	<b>7</b> Payee address; City; State; Zip Code ?6780 Southwest Fwy?  Houston TX 77074	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/16/2015	5 Payee name Uber		
6 Amount (\$) 15.22	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/15/2015	5 Payee name Ibiza Food and Wine	
6 Amount (\$) 147.88	7 Payee address; City; State; Zip Code 2450 Louisiana St. #300 Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/14/2015	5 Payee name Uber	
6 Amount (\$) 14.85	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/11/2015	5 Payee name Churrascaria Churra	
6 Amount (\$) 141.95	7 Payee address; City; State; Zip Code 4412 Montrose Blvd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  9/9/2015	5 Payee name  Aqua Hand Car Wash		
6 Amount (\$)  40.25	7 Payee address;                      City;                      State;                      Zip Code  1013 Montrose Blvd.  Houston TX 77019		

8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/9/2015	5 Payee name Uber	
6 Amount (\$) 17.43	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/5/2015	5 Payee name Kroger Fuel	
6 Amount (\$) 50.56	7 Payee address; City; State; Zip Code 1014 Vine St.  Cincinnati OH 45202	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/4/2015	5 Payee name Escalantes Mexican	
6 Amount (\$) 93.94	7 Payee address; City; State; Zip Code 590 Meyerland Plaza Mall  Houston TX 77096	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 9/3/2015	5 Payee name Tony Mandola's		
6 Amount (\$) 29.9	7 Payee address;      City;      State;      Zip Code 1212 Waugh Dr.  Houston TX 77019		
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/2/2015	<b>5</b> Payee name Lola	
<b>6</b> Amount (\$) 13.86	<b>7</b> Payee address; City; State; Zip Code 1102 Yale Blvd.  Houston TX 77008	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Campaign Event reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/31/2015	<b>5</b> Payee name Kam's Fine Chinese	
<b>6</b> Amount (\$) 25.4	<b>7</b> Payee address; City; State; Zip Code 4500 Montrose Blvd.  Houston TX 77006	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Campaign Event reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/31/2015	<b>5</b> Payee name Kam's Fine Chinese	
<b>6</b> Amount (\$) 30.57	<b>7</b> Payee address; City; State; Zip Code 4500 Montrose Blvd.  Houston TX 77006	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/31/2015	5 Payee name Kam's Fine Chinese		
6 Amount (\$) 36.93	7 Payee address; City; State; Zip Code 4500 Montrose Blvd.  Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/31/2015	5 Payee name Kam's Fine Chinese	
6 Amount (\$) 44.23	7 Payee address; City; State; Zip Code 4500 Montrose Blvd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/31/2015	5 Payee name Kam's Fine Chinese	
6 Amount (\$) 44.24	7 Payee address; City; State; Zip Code 4500 Montrose Blvd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/31/2015	5 Payee name Kam's Fine Chinese	
6 Amount (\$) 44.72	7 Payee address; City; State; Zip Code 4500 Montrose Blvd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  8/30/2015	5 Payee name  Canopy		
6 Amount (\$)  59.49	7 Payee address;                      City;                      State;                      Zip Code  3939 Montrose Blvd.  Houston TX 77006		

8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Meeting Meal reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/30/2015	5 Payee name Uber	
6 Amount (\$) 14.38	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/30/2015	5 Payee name Uber	
6 Amount (\$) 23.58	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/30/2015	5 Payee name Uber	
6 Amount (\$) 30.57	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/24/2015	5 Payee name Uber		
6 Amount (\$) 5.16	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/23/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 15.2	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/21/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 19.62	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

<b>4</b> Date 9/19/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 11.94	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/19/2015	5 Payee name Uber		
6 Amount (\$) 16.01	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/19/2015	5 Payee name Uber	
6 Amount (\$) 16.29	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/16/2015	5 Payee name Uber	
6 Amount (\$) 8.03	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/16/2015	5 Payee name Uber	
6 Amount (\$) 14.87	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/16/2015	5 Payee name Uber		
6 Amount (\$) 15.37	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/15/2015	5 Payee name Uber	
6 Amount (\$) 7.81	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/14/2015	5 Payee name Canopy Restaurant	
6 Amount (\$) 217.86	7 Payee address; City; State; Zip Code 3939 Montrose Blvd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Meeting reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/11/2015	5 Payee name Uber	
6 Amount (\$) 25.79	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/11/2015	5 Payee name Uber		
6 Amount (\$) 31.85	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/10/2015	5 Payee name Uber	
6 Amount (\$) 24.11	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/9/2015	5 Payee name Uber	
6 Amount (\$) 23.35	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense taxi reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/8/2015	5 Payee name Liberty Kitchen	
6 Amount (\$) 112.9	7 Payee address; City; State; Zip Code 1050 Studewood  Houston TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  7/29/2015	5 Payee name  Davis Street Restaurant		
6 Amount (\$)  61.1	7 Payee address; City; State; Zip Code  5925 Alameda Rd.  Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/29/2015	5 Payee name Los Tios Mexican	
6 Amount (\$) 29.3	7 Payee address; City; State; Zip Code 4840 Beechnut St.  Houston TX 77096	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/31/2015	5 Payee name Uber	
6 Amount (\$) 11.63	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/31/2015	5 Payee name Uber	
6 Amount (\$) 9.49	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/1/2015	5 Payee name Barbecue Inn		
6 Amount (\$) 50.06	7 Payee address; City; State; Zip Code 116 W Crosstimbers Houston TX 77018		
8 PURPOSE OF EXPENDITURE	(a) Category Food/Beverage Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Meeting Meal reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/1/2015	5 Payee name Piatto Ristorante 54	
6 Amount (\$) 75.59	7 Payee address; City; State; Zip Code 4925 W Alabama Houston TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category 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 Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/2/2015	5 Payee name Uber	
6 Amount (\$) 14.24	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/2/2015	5 Payee name Car Spa	
6 Amount (\$) 78.55	7 Payee address; City; State; Zip Code 2801 Brazos St. Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Travel Expenses reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  8/2/2015	5 Payee name  Goode Company Seafood		
6 Amount (\$)  103.61	7 Payee address;                      City;                      State;                      Zip Code  5109 Kirby Dr.  Houston TX 77098		

8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Meeting reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/4/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 16.96	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/5/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 9.37	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/5/2015	<b>5</b> Payee name Canopy	
<b>6</b> Amount (\$) 91.32	<b>7</b> Payee address; City; State; Zip Code 3939 Montrose Blvd.  Houston TX 77006	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  8/5/2015	5 Payee name  Parking Meters Houston		
6 Amount (\$)  2.5	7 Payee address; City; State; Zip Code  2020 McKinney  Houston TX 77003		

8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/7/2015	5 Payee name Luling City Market	
6 Amount (\$) 27.71	7 Payee address; City; State; Zip Code 4726 Richmond  Houston TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Meeting Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/7/2015	5 Payee name Uber	
6 Amount (\$) 13.5	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/8/2015	5 Payee name Uber	
6 Amount (\$) 18.87	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/8/2015	5 Payee name Picos Restaurant		
6 Amount (\$) 183.91	7 Payee address; City; State; Zip Code 3601 Kirby  Houston TX 77098		
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event Meeting reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/10/2015	5 Payee name Uber	
6 Amount (\$) 8.75	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Uber reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/13/2015	5 Payee name Uber	
6 Amount (\$) 14.1	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/13/2015	5 Payee name Chevron	
6 Amount (\$) 60.49	7 Payee address; City; State; Zip Code 6001 Bollinger Canyon Rd.  San Ramon CA 94583	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/14/2015	5 Payee name Uber		
6 Amount (\$) 6.33	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/15/2015	5 Payee name Shipley Donuts	
6 Amount (\$) 8.45	7 Payee address; City; State; Zip Code 1001 McKinney St  Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Food Expenses reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/18/2015	5 Payee name Uber	
6 Amount (\$) 9.72	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/23/2015	5 Payee name Gratifi	
6 Amount (\$) 50	7 Payee address; City; State; Zip Code 302 Fairview St  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign meeting Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/25/2015	5 Payee name Uber		
6 Amount (\$) 16.2	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/27/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 11.56	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/27/2015	<b>5</b> Payee name Davis Street Restaurant	
<b>6</b> Amount (\$) 209.14	<b>7</b> Payee address; City; State; Zip Code 5925 Almeda Rd  Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  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 Campaign Meeting Meal reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/27/2015	<b>5</b> Payee name 3rd Floor	
<b>6</b> Amount (\$) 25.65	<b>7</b> Payee address; City; State; Zip Code 2303 Smith St #300 Houston TX 77006	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Event Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/6/2015	5 Payee name Brooklyn Athletic Club		
6 Amount (\$) 217.12	7 Payee address; City; State; Zip Code 601 Richmond Ave.  Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Event Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/9/2015	5 Payee name Uber	
6 Amount (\$) 11.16	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/9/2015	5 Payee name Uber	
6 Amount (\$) 11.67	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/10/2015	5 Payee name Gulfgate Dodge	
6 Amount (\$) 323.89	7 Payee address; City; State; Zip Code 7250 Gulf Fwy.  Houston TX 77017	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/11/2015	5 Payee name Uber		
6 Amount (\$) 11.74	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/12/2015	5 Payee name Uber	
6 Amount (\$) 6	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/12/2015	5 Payee name Uber	
6 Amount (\$) 9.93	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 8/12/2015	5 Payee name Uber	
6 Amount (\$) 20.96	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/13/2015	5 Payee name Canopy		
6 Amount (\$) 227.44	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Event Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/13/2015	5 Payee name Tonys Mexican Restaurant	
6 Amount (\$) 127.58	7 Payee address; City; State; Zip Code 2222 Ella Blvd  Houston TX 77008	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Event reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/14/2015	5 Payee name Uber	
6 Amount (\$) 17.61	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/15/2015	5 Payee name Uber	
6 Amount (\$) 19.27	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/16/2015	5 Payee name Brooklyn Athletic Club		
6 Amount (\$) 82.89	7 Payee address; City; State; Zip Code 601 Richmond Ave.  Houston TX 77006		
8 PURPOSE OF EXPENDITURE	(a) Category  Food/Beverage Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/21/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 17.18	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/24/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 12.74	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/27/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 18.24	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/27/2015	5 Payee name Uber		
6 Amount (\$) 19.72	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Cab reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/28/2015	5 Payee name Chrysler Dodge	
6 Amount (\$) 350	7 Payee address; City; State; Zip Code 7250 Gulf Fwy. Houston TX 77017	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/7/2015	5 Payee name Target	
6 Amount (\$) 37.88	7 Payee address; City; State; Zip Code 8500 S Main Houston TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category  Office Overhead/Rental 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 Office Supplies reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/7/2015	5 Payee name US Post Office	
6 Amount (\$) 49	7 Payee address; City; State; Zip Code 8205 Braesmain Dr Houston TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Office Overhead/Rental Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/8/2015	5 Payee name Lucilles		
6 Amount (\$) 70.83	7 Payee address; City; State; Zip Code 5512 La Branch St Houston TX 77004		

8 PURPOSE OF EXPENDITURE	(a) Category Food/Beverage Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Meeting reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/9/2015	5 Payee name Uber	
6 Amount (\$) 13.43	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/9/2015	5 Payee name Uber	
6 Amount (\$) 14.33	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/10/2015	5 Payee name Federal Grill	
6 Amount (\$) 60.34	7 Payee address; City; State; Zip Code 510 Shepherd Dr.  Houston TX 77007	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Food/Beverage Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising Lunch reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  7/11/2015	5 Payee name  Aqua Car Wash		
6 Amount (\$)  30	7 Payee address;                      City;                      State;                      Zip Code  1013 Montrose Blvd.  Houston TX 77019		

8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/11/2015	5 Payee name PFLAG	
6 Amount (\$) 100	7 Payee address; City; State; Zip Code 2700 Albany St.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Donation reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/11/2015	5 Payee name Kroger Fuel Center	
6 Amount (\$) 51.44	7 Payee address; City; State; Zip Code 1990 Old Spanish Trl.  Houston TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense  Travel Costs reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/18/2015	5 Payee name Uber	
6 Amount (\$) 17.94	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/19/2015	5 Payee name Uber		
6 Amount (\$) 20.07	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/19/2015	5 Payee name Uber	
6 Amount (\$) 19.92	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/21/2015	5 Payee name Ristorante Sorrento	
6 Amount (\$) 65.12	7 Payee address; City; State; Zip Code 415 Westheimer Rd.  Houston TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category  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 Campaign Meeting reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/21/2015	5 Payee name Parking Meter Houston	
6 Amount (\$) 2	7 Payee address; City; State; Zip Code 8000 N Stadium Dr. #2 Houston TX 77054	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Parking reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  7/22/2015	5 Payee name  Uber		
6 Amount (\$)  15.17	7 Payee address; City; State; Zip Code  182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/23/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 23.15	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/25/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 26.16	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/25/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 26.66	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/25/2015	5 Payee name Uber		
6 Amount (\$) 10.34	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/25/2015	<b>5</b> Payee name Petromart	
<b>6</b> Amount (\$) 37.33	<b>7</b> Payee address; City; State; Zip Code 1820 Brittmoore Rd.  Houston TX 77043	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/28/2015	<b>5</b> Payee name Parking Meter Houston	
<b>6</b> Amount (\$) 1	<b>7</b> Payee address; City; State; Zip Code 8000 N Stadium Dr. #2 Houston TX 77054	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 6/29/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 18.43	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 6/29/2015	5 Payee name Uber		
6 Amount (\$) 12.7	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 6/29/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 12.03	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 6/30/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 12.91	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/2/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 9.59	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date  7/2/2015	5 Payee name  Uber		
6 Amount (\$)  15.98	7 Payee address; City; State; Zip Code  182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/2/2015	5 Payee name Uber	
6 Amount (\$) 9.62	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/9/2015	5 Payee name Uber	
6 Amount (\$) 17.73	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/10/2015	5 Payee name Uber	
6 Amount (\$) 12.35	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/10/2015	5 Payee name Uber		
6 Amount (\$) 13.05	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/18/2015	5 Payee name Uber	
6 Amount (\$) 11.21	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/18/2015	5 Payee name Uber	
6 Amount (\$) 11.51	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/20/2015	5 Payee name Uber	
6 Amount (\$) 13.33	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/20/2015	5 Payee name Uber		
6 Amount (\$) 12.75	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/21/2015	5 Payee name Uber	
6 Amount (\$) 13.89	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/22/2015	5 Payee name Uber	
6 Amount (\$) 17.25	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/23/2015	5 Payee name Uber	
6 Amount (\$) 12.89	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/23/2015	5 Payee name Uber		
6 Amount (\$) 16.46	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/24/2015	5 Payee name Uber	
6 Amount (\$) 17.98	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/25/2015	5 Payee name Uber	
6 Amount (\$) 10.77	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/27/2015	5 Payee name Uber	
6 Amount (\$) 12.9	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/28/2015	5 Payee name Uber		
6 Amount (\$) 15.2	7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Chris Bell
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)	
4 Date 7/20/2015		5 Payee name Chrysler Dodge			
6 Amount (\$) 350		7 Payee address; City; State; Zip Code 7250 Gulf Fwy.  Houston TX 77017			
8 PURPOSE OF EXPENDITURE		(a) Category  Travel in District		(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Chris Bell	
9 Complete ONLY if direct expendituree to benefit C/OH		Candidate / Officeholder name		office sought office held	

4 Date 7/20/2015		5 Payee name Verizon			
6 Amount (\$) 250		7 Payee address; City; State; Zip Code 3817 Southwest Fwy.  Houston TX 77027			
8 PURPOSE OF EXPENDITURE		(a) Category  Office Overhead/Rental 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 Office Expenses reimbursed to Chris Bell	
9 Complete ONLY if direct expendituree to benefit C/OH		Candidate / Officeholder name		office sought office held	

4 Date 8/5/2015		5 Payee name Uber			
6 Amount (\$) 40.35		7 Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105			
8 PURPOSE OF EXPENDITURE		(a) Category		(b) Description	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Travel in District	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Kris Sharp
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/5/2015	5 Payee name United Airlines		
6 Amount (\$) 25	7 Payee address; City; State; Zip Code 600 Jefferson St.  Houston TX 77002		
8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Kris Sharp
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/10/2015	<b>5</b> Payee name Uber	
<b>6</b> Amount (\$) 42.34	<b>7</b> Payee address; City; State; Zip Code 182 Howard St. Suite 8 San Francisco CA 94105	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Taxi Service reimbursed to Kris Sharp
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/10/2015	<b>5</b> Payee name United Airlines	
<b>6</b> Amount (\$) 11.2	<b>7</b> Payee address; City; State; Zip Code 600 Jefferson St.  Houston TX 77002	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel Costs reimbursed to Kris Sharp
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Franz Brotzen-Smith	
<b>6</b> Amount (\$) 438	<b>7</b> Payee address; City; State; Zip Code 5913 Annapolis  Houston TX 77005	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/15/2015	5 Payee name Mary Katherine Clement		
6 Amount (\$) 1629.55	7 Payee address; City; State; Zip Code 2030 Winrock Blvd. Apt 544 Houston TX 77057		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/15/2015	<b>5</b> Payee name Patrick Devney	
<b>6</b> Amount (\$) 2808.18	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Catherine Flowers	
<b>6</b> Amount (\$) 1268.84	<b>7</b> Payee address; City; State; Zip Code 12015 Merewood Ln.  Houston TX 77071	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Erica Foster	
<b>6</b> Amount (\$) 1412.22	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/15/2015	5 Payee name Christopher Pisano		
6 Amount (\$) 1097.15	7 Payee address; City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/15/2015	<b>5</b> Payee name Pearl Shapland	
<b>6</b> Amount (\$) 832.09	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Andre Wagner	
<b>6</b> Amount (\$) 438	<b>7</b> Payee address; City; State; Zip Code 3100 Cleburne Houston TX 77004	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/15/2015	<b>5</b> Payee name Maryann Young	
<b>6</b> Amount (\$) 1218.84	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/1/2015	5 Payee name Franz Brotzen-Smith		
6 Amount (\$) 438	7 Payee address; City; State; Zip Code 5913 Annapolis  Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 9/1/2015	<b>5</b> Payee name Mary Katherine Clement	
<b>6</b> Amount (\$) 1629.55	<b>7</b> Payee address; City; State; Zip Code 2030 Winrock Blvd. Apt 544 Houston TX 77057	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/1/2015	<b>5</b> Payee name Patrick Devney	
<b>6</b> Amount (\$) 2808.17	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 9/1/2015	<b>5</b> Payee name Catherine Flowers	
<b>6</b> Amount (\$) 1075.47	<b>7</b> Payee address; City; State; Zip Code 12015 Merewood Ln.  Houston TX 77071	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 9/1/2015	5 Payee name Erica Foster		
6 Amount (\$) 1412.21	7 Payee address;      City;      State;      Zip Code		

8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> <input type="checkbox"/> Staff salary
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 9/1/2015	5 Payee name Christopher Pisano	
6 Amount (\$) 1097.15	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/1/2015	5 Payee name Pearl Shapland	
6 Amount (\$) 832.09	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/1/2015	5 Payee name Andre Wagner	
6 Amount (\$) 438	7 Payee address; City; State; Zip Code 3100 Cleburne Houston TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/1/2015	5 Payee name Maryann Young		
6 Amount (\$) 1218.84	7 Payee address; City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/15/2015	5 Payee name Franz Brotzen-Smith	
6 Amount (\$) 438	7 Payee address; City; State; Zip Code 5913 Annapolis  Houston TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/15/2015	5 Payee name Mary Katherine Clement	
6 Amount (\$) 1629.55	7 Payee address; City; State; Zip Code 2030 Winrock Blvd. Apt 544 Houston TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/15/2015	5 Payee name Patrick Devney	
6 Amount (\$) 2808.18	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description



**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/15/2015	5 Payee name Catherine Flowers		
6 Amount (\$) 1075.46	7 Payee address; City; State; Zip Code 12015 Merewood Ln.  Houston TX 77071		

8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/15/2015	<b>5</b> Payee name Erica Foster	
<b>6</b> Amount (\$) 1520.54	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/15/2015	<b>5</b> Payee name Christopher Pisano	
<b>6</b> Amount (\$) 1097.15	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 8/15/2015	<b>5</b> Payee name Pearl Shapland	
<b>6</b> Amount (\$) 832.09	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/15/2015	5 Payee name Andre Wagner		
6 Amount (\$) 438	7 Payee address; City; State; Zip Code 3100 Cleburne Houston TX 77004		
8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/15/2015	5 Payee name Maryann Young	
6 Amount (\$) 1218.84	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/1/2015	5 Payee name Franz Brotzen-Smith	
6 Amount (\$) 438	7 Payee address; City; State; Zip Code 5913 Annapolis  Houston TX 77005	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/1/2015	5 Payee name Mary Katherine Clement	
6 Amount (\$) 1629.55	7 Payee address; City; State; Zip Code 2030 Winrock Blvd. Apt 544 Houston TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/1/2015	5 Payee name Patrick Devney		
6 Amount (\$) 2808.17	7 Payee address; City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 8/1/2015	5 Payee name Erica Foster	
6 Amount (\$) 1412.22	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/1/2015	5 Payee name Christopher Pisano	
6 Amount (\$) 1698.92	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/1/2015	5 Payee name Maryann Young	
6 Amount (\$) 1218.84	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date 07/21/15	5 Payee name Kristopher Sharp		
6 Amount (\$) 1089.14	7 Payee address;      City;      State;      Zip Code 8010 Blair Mill Way Unit 611E Silver Spring MD 20910		
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 7/15/2015	<b>5</b> Payee name Mary Katherine Clement	
<b>6</b> Amount (\$) 1629.55	<b>7</b> Payee address; City; State; Zip Code 2030 Winrock Blvd. Apt 544 Houston TX 77057	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name Patrick Devney	
<b>6</b> Amount (\$) 2808.18	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff salary
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name Erica Foster	
<b>6</b> Amount (\$) 1218.84	<b>7</b> Payee address; City; State; Zip Code	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		

4 Date  7/15/2015	5 Payee name  Maryann Young		
6 Amount (\$)  1218.84	7 Payee address;      City;      State;      Zip Code		

8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	<input type="checkbox"/> <input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff salary
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name      office sought      office held		
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**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/23/15	<b>5</b> Payee name Catherine Flowers	
<b>6</b> Amount (\$) 175	<b>7</b> Payee address; City; State; Zip Code 12015 Merewood Ln.  Houston TX 77071	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel Costs
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/23/15	<b>5</b> Payee name Catherine Flowers	
<b>6</b> Amount (\$) 100	<b>7</b> Payee address; City; State; Zip Code 12015 Merewood Ln.  Houston TX 77071	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Travel Costs
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 08/25/15	<b>5</b> Payee name Daniel Arguijo	
<b>6</b> Amount (\$) 5138	<b>7</b> Payee address; City; State; Zip Code 824 Stuart St.  Houston TX 77006	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Communications consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  09/22/15	5 Payee name  Mary Katherine Clement		
6 Amount (\$)  565.16	7 Payee address;                      City;                      State;                      Zip Code  2030 Winrock Blvd. Apt 544 Houston TX 77057		

8 PURPOSE OF EXPENDITURE	(a) Category  Travel in District	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense staff relocation expenses
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 Date 7/2/2015	5 Payee name United States Treasury	
6 Amount (\$) 723.34	7 Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 7/1/2015	5 Payee name United States Treasury	
6 Amount (\$) 2172.62	7 Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176	
8 PURPOSE OF EXPENDITURE	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/15/2015	5 Payee name United States Treasury	
6 Amount (\$) 3954.46	7 Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

**POLITICAL EXPENDITURES  
FROM POLITICAL CONTRIBUTIONS**

**SCHEDULE F1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/1/2015	5 Payee name United States Treasury		
6 Amount (\$) 3870.48	7 Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176		

8 PURPOSE OF EXPENDITURE	(a) Category Salaries/Wages/Contract Labor	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert C. Bell	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 8/14/2015	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) 3923.62	<b>7</b> Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/31/2015	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) 3384.31	<b>7</b> Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category  Salaries/Wages/Contract Labor	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 7/15/2015	<b>5</b> Payee name United States Treasury	
<b>6</b> Amount (\$) 2600.96	<b>7</b> Payee address; City; State; Zip Code PO Box 37941 Hartford CT 06176	
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Robert C. Bell		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/10/2015	5 Payee name MAC Cosmetics		
6 Amount (\$) 50.00	7 Payee address; City; State; Zip Code 2411 Times Blvd #130 Houston TX 77005		
8 PURPOSE OF EXPENDITURE	(a) Category  Event Expense	<input type="checkbox"/>	(b) Description  Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Makeup for televised debate
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

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

# UNPAID INCURRED OBLIGATIONS

# SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME Robert C. Bell	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$	
5 Date 8/13/2015	6 Payee name Global Strategy Group	
7 Amount (\$) 29,700.00	8 Payee address; City; State; Zip Code 215 Park Ave. S.  New York NY 10003	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category  Polling 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 Campaign research
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

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