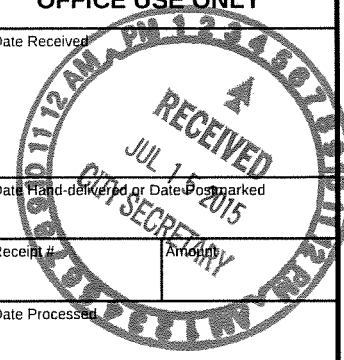


**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 23	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Karla			
	NICKNAME LAST SUFFIX Cisneros			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 623 Omar Houston, TX 77009			Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
		Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ann ✓			
	NICKNAME LAST SUFFIX Grandich			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 714 Pecore St. Houston TX 77009			
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 713 817 7014			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 04/10/2015	THROUGH	Month Day Year 06/30/2015	
10 ELECTION	ELECTION DATE Month Day Year 11/03/2015	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) District H		

**GO TO PAGE 2**

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

**FORM C/OH  
COVER SHEET PG 2**  
2 of 23

<b>13 C / OH NAME</b> Cisneros, Karla	<b>14 Filer ID</b>
---------------------------------------	--------------------

<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
	<b>COMMITTEE ADDRESS</b>	
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 25.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,367.60
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 13,956.30
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 24,647.10
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**17 AFFADAVIT**



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.

Karla Cisneros  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said KARLA CISNEROS, this the 15<sup>TH</sup> day of JULY, 2015, to certify which, witness my hand and seal of office.

Alice V Castro  
Signature of officer administering

ALICE V. CASTRO  
Printed name of officer administering

NOTARY  
Title of officer administering oath

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

3 of 23

<b>18 FILER NAME</b> Cisneros, Karla		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 30,095.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 5,272.60
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 13,956.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/9 Rpt: 4/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/25/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 5401 Lawndale LLC <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002	<b>7</b> Amount of Contribution (\$)  \$5,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alaniz, Armando Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alaniz , Laura Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Paula Contributor address; City; State; Zip Code  Houston, TX 77008	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asakura, Keiji Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/9 Rpt: 5/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 05/21/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berg, Fran and Mark <hr/> <b>6</b> Contributor address; City; State; Zip Code  Dallas, TX 75220-6435	<b>7</b> Amount of Contribution (\$)  \$7,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Volunteer and EVP Corporate		<b>9</b> Employer (See Instructions) Pioneer Natural Resources
Date 06/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caram, Dorothy <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-2132	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castillo, Mario <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro, Dorian and Alice <hr/> Contributor address; City; State; Zip Code  Houston, TX 77018	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Senior Policy Analyst & Office Manager		Employer (See Instructions) City of Houston & Cisneros Design Studio
Date 05/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cisneros, Charlotte <hr/> Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/9 Rpt: 6/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/30/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cisneros Design Studio Architects, LLC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77007-3387	<b>7</b> Amount of Contribution (\$)  \$750.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Emily <hr/> Contributor address; City; State; Zip Code  Houston, TX 77008-7064	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/09/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corser, Christine <hr/> Contributor address; City; State; Zip Code  Clinton, NJ 08809	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellender, Elaine <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Greenwood King Properties
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerbode, Linda <hr/> Contributor address; City; State; Zip Code  Houston, TX 77025-4130	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/9 Rpt: 7/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/24/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Roberto <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77098-1722	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grandich, Ann and Mark <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Law Offices of Jay H. Dushkin and Lone Star Legal Aid
Date 05/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grandich, Ann and Mark <hr/> Contributor address: City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Law Offices of Jay H. Dushkin and Lone Star Legal Aid
Date 04/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grandich, Ann and Mark <hr/> Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Attorneys		Employer (See Instructions) Law Offices of Jay H. Dushkin and Lone Star Legal Aid
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guyre, Emily <hr/> Contributor address: City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/9 Rpt: 8/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/24/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartzell, Matthew	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77009		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Becky	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77009		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacqueline McPherson Magazine Street	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code  New Orleans, LA 70112		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirby, Julie	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77009		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Brigette	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77009		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Greenwood King Properties



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/9 Rpt: 9/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/08/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marlene, Marker	<b>7</b> Amount of Contribution (\$) \$5,000.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77055		
<b>8</b> Principal occupation / Job title (See Instructions) CEO		<b>9</b> Employer (See Instructions) Marker Group
Date 05/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noriega, Melissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77023		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noriega, Melissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77023		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Sue Ann	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Montgomery, TX 77536		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REVIVECO, LLC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Houston, TX 77270		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/23
2 FILER NAME Cisneros, Karla		3 Filer ID
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ristema, Justin 6 Contributor address; City; State; Zip Code  Houston, TX 77007	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robbins, Brad and Mary Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired & Homemaker		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Gunn Properties Contributor address; City; State; Zip Code  Houston, TX 77266-6626	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaff, John Contributor address; City; State; Zip Code  Houston, TX 77023	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sivestri, Dan Contributor address; City; State; Zip Code  Houston, TX 77055	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/9 Rpt: 11/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/24/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, Sarah	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77008		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swartz, Arnold	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  San Antonio, TX 78209-6266		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swartz, Mimi	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77009		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tharp, Barbara	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vastakis, Anne	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Houton, TX 77009		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/9 Rpt: 12/23
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID
<b>4</b> Date 06/30/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson & Elkins Texas Political Action Committee <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77002-6760	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, William <hr/> Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Louis and Shirleen <hr/> Contributor address; City; State; Zip Code  Houston, TX 77059-3742	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Owners		Employer (See Instructions) Alamo Tamale
(This area is intentionally left blank for additional information or signatures.)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/2 Rpt: 13/23	
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>	
<b>5</b> Date 05/31/2015	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alamo Tamale Company, L.P. <b>7</b> Contributor address; City; State; Zip Code  Houston, TX 77026	<b>8</b> Amount of contribution (\$) \$4,577.00	<b>9</b> In-kind contribution description Campaign Kickoff Sponsorship
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Arcy, Anne Marie Contributor address; City; State; Zip Code  Houston, TX 77006	Amount of contribution (\$) \$500.00	In-kind contribution description Photography
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Photographer		Employer (FOR NON-JUDICIAL) (See instructions) Self	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) El Cantina Superior Contributor address; City; State; Zip Code  Houston, TX 77007	Amount of contribution (\$) \$95.60	In-kind contribution description Reception Food
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 2/2 Rpt: 14/23	
<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>	
<b>5</b> Date 04/30/2015	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Taylor	<b>8</b> Amount of contribution (\$) \$100.00	<b>9</b> In-kind contribution description Graphic Design
<b>7</b> Contributor address; City; State; Zip Code  Oakland, CA 94611		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/9 Rpt: 15/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
<b>4</b> Date 04/29/2015	<b>5</b> Payee name AMSYS Innovative Solutions, LLC	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 8300 Bissonnet, Ste.570  Houston, TX 77074	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 06/29/2015	Payee name AMSYS Innovative Solutions, LLC	
Amount (\$) \$5,224.38	Payee address; City; State; Zip Code 8300 Bissonnet, Ste.570  Houston, TX 77074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Website Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 05/31/2015	Payee name Alamo Tamale	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 809 Berry Rd.  Houston, TX 77022	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Gratuity
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/9 Rpt: 16/23		<b>2</b> FILER NAME Cisneros, Karla		<b>3</b> Filer ID	
<b>4</b> Date 04/30/2015		<b>5</b> Payee name Amegy Bank			
<b>6</b> Amount (\$) \$8.00		<b>7</b> Payee address; City; State; Zip Code 2105 Taylor  Houston, TX 77007			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Account Maintenance	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/21/2015		Payee name Campos, Marc			
Amount (\$) \$4,000.00		Payee address; City; State; Zip Code 816 Ralfallen  Houston, TX 77008			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/10/2015		Payee name City of Houston			
Amount (\$) \$0.50		Payee address; City; State; Zip Code P.O. Box 1562  Houston, TX 77251			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/9 Rpt: 17/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
<b>4</b> Date 05/21/2015	<b>5</b> Payee name City of Houston	
<b>6</b> Amount (\$) \$2.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 1562  Houston, TX 77251	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/21/2015	Payee name City of Houston	
Amount (\$) \$1.00	Payee address; City; State; Zip Code P.O. Box 1562  Houston, TX 77251	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	
Date 06/18/2015	Payee name Corner Store	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 7129 Lawndale  Houston, TX 77023	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/9 Rpt: 18/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
<b>4</b> Date 06/13/2015	<b>5</b> Payee name Corner Store	
<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 7129 Lawndale  Houston, TX 77023	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name                      Office sought                      Office held	
Date 06/03/2015	Payee name Corner Store	
Amount (\$) \$22.50	Payee address; City; State; Zip Code 730 S. Wayside  Houston, TX 77023	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name                      Office sought                      Office held	
Date 05/30/2015	Payee name Corner Store	
Amount (\$) \$24.10	Payee address; City; State; Zip Code 6909 Airline  Houston, TX 77076-2429	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Travel In District	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name                      Office sought                      Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/9 Rpt: 19/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
<b>4</b> Date 06/10/2015	<b>5</b> Payee name Cox Hardware	
<b>6</b> Amount (\$) \$1.60	<b>7</b> Payee address; City; State; Zip Code 1923 Wayside  Houston, TX 77011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sign Supplies
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/31/2015	Payee name Facebook	
Amount (\$) \$7.07	Payee address; City; State; Zip Code 1601 Willow Road  Menlo Park, TX 94025-1452	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 06/04/2015	Payee name Facebook	
Amount (\$) \$1.00	Payee address; City; State; Zip Code 1601 Willow Road  Menlo Park, TX 94025-1452	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 20/23		2 FILER NAME Cisneros, Karla		3 Filer ID	
4 Date 06/30/2015		5 Payee name Facebook			
6 Amount (\$) \$10.79		7 Payee address; City; State; Zip Code 1601 Willow Road  Menlo Park, TX 94025-1452			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Advertising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/30/2015		Payee name Guitar Center			
Amount (\$) \$54.13		Payee address; City; State; Zip Code 195 Yale, Ste. 200  Houston, TX 77007			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Sound System Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/09/2015		Payee name Johnston Campaigns			
Amount (\$) \$1,014.19		Payee address; City; State; Zip Code 2978 Rising Tide  League City, TX 77573			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/9 Rpt: 21/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
<b>4</b> Date 06/24/2015	<b>5</b> Payee name Lindale Park Civic Club	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 218 Joyce St.  Houston, TX 77009	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2015	Payee name Office of Mike Sullivan	
Amount (\$) \$40.00	Payee address; City; State; Zip Code 1001 Preston St., Room 200  Houston, TX 77002	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Maps
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2015	Payee name Sam Houston Mariachi	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 9400 Irvington  Houston, TX 77076-5224	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Kickoff Participants
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/9 Rpt: 22/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
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<b>4</b> Date 05/26/2015	<b>5</b> Payee name Sprint 2 Print
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<b>6</b> Amount (\$) \$1,580.45	<b>7</b> Payee address; City; State; Zip Code 8748 Clay Rd., Ste. 300  Houston, TX 77080
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/02/2015	Payee name Staples
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Amount (\$) \$29.21	Payee address; City; State; Zip Code 1919 Taylor St.  Houston, TX 77007
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2015	Payee name Teotihuacan Mexican Cafe
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Amount (\$) \$279.38	Payee address; City; State; Zip Code 1511 Airline Dr.  Houston, TX 77009
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/9 Rpt: 23/23	<b>2</b> FILER NAME Cisneros, Karla	<b>3</b> Filer ID
<b>4</b> Date 05/04/2015	<b>5</b> Payee name U.S. Postmaster	
<b>6</b> Amount (\$) \$56.00	<b>7</b> Payee address; City; State; Zip Code 634 W. Cavalcade  Houston, TX 77249	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense P.O. Box Rental
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought  Office held