

**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	<b>OFFICE USE ONLY</b>	
	Mr.	Robert			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY;	STATE;	ZIP CODE
	PO Box 230087		Houston	TX	77223
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Received	
	(713)	256-3953		10/26/2015	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI	Receipt #	Amount
	Mr.	James	Richard	Date Processed	
7 CAMPAIGN TREASURER ADDRESS (Business)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY;	STATE;	ZIP CODE
	PO Box 230087		Houston	TX	77223
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	Date Imaged	
	(832)	609-4496			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input 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 checked="" 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
		9/25	2015		10/24/2015
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known)		
	City Council - District I		City Council - District I		

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

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

14 FILER NAME Robert Gallegos 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	\$0.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$9,775.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00
	4	TOTAL POLITICAL EXPENDITURES	\$52,386.12
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$51,251.74
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

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.

Robert Gallegos

\_\_\_\_\_  
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 Gallegos		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	9775
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	0
4.	SCHEDULE E: LOANS	0
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	44579.32
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	0
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	0
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	7806.8
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	0
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	0

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

**FORM C/OH  
ADDENDUM**

C/OH NAME Robert Gallegos

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:
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2 FILER NAME Robert Gallegos	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# )				
	Yolanda Navarro						
	6 Contributor address;			City;	State;	Zip Code	
09/25/2015			Houston	TX	77023-1414		7 Amount of contributions (\$)  \$100.00

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# )				
	Kristen Capps						
	6 Contributor address;			City;	State;	Zip Code	
09/25/2015			Houston	TX	77,061.00		7 Amount of contributions (\$)  \$100.00

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# )				
	Gloria Rodriguez						
	6 Contributor address;			City;	State;	Zip Code	
09/25/2015			Houston	TX	77,049.00		7 Amount of contributions (\$)  \$25.00

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# )				
	James Dinkins						
	6 Contributor address;			City;	State;	Zip Code	
09/25/2015			Houston	TX	77,007.00		7 Amount of contributions (\$)  \$25.00

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 Gallegos		3	Filer ID (Ethics Commission filers)
09/25/2015	Andrew Wright ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77,002.00	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
09/25/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Sammy Gallegos ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77020	7	Amount of contributions (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/09/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Kathryn McNeil ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77,219.00	7	Amount of contributions (\$) \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/09/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Thompson & Horton LLP ----- 6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77,027.00	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# )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert Gallegos		3 Filer ID (Ethics Commission filers)	
	Linebarger, Goggan, Blair & Sampson LLP	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Austin TX 78760-7428	\$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# ) Greater Houston Restaurant Association PAC	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77,007.00	\$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# ) Evangelina Hammonds	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77,004.00	\$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# ) Edmond Wulfe	7 Amount of contributions (\$)	
10/09/2015	6 Contributor address; City; State; Zip Code Houston TX 77056-3963	\$1,000.00	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Wulfe & Company	
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 Gallegos		3 Filer ID (Ethics Commission filers)	
10/09/2015	Houston Federation of Teachers COPE  6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77027-5752	7 Amount of contributions (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Steven Guthrie  6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77,008.00	7 Amount of contributions (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lindsay Horne  6 Contributor address;                      City;                      State;                      Zip Code Houston TX 77,061.00	7 Amount of contributions (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date                      5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Lee Vela  6 Contributor address;                      City;                      State;                      Zip Code Sugar Land TX 77,479.00	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# )		



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Robert Gallegos		3 Filer ID (Ethics Commission filers)	
10/15/2015	Wes Hart ----- 6 Contributor address; City; State; Zip Code Houston TX 77,292.00	7	Amount of contributions (\$)  \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Gloria Moreno ----- 6 Contributor address; City; State; Zip Code Houston TX 77,003.00	7	Amount of contributions (\$)  \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ianne Fasthoff ----- 6 Contributor address; City; State; Zip Code Houston TX 77,002.00	7	Amount of contributions (\$)  \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Audrey Reed ----- 6 Contributor address; City; State; Zip Code Houston TX 77,005.00	7	Amount of contributions (\$)  \$25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/15/2015	4 Date 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# C00199711 )		

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:	
2 FILER NAME Robert Gallegos		3 Filer ID (Ethics Commission filers)	
10/23/2015	Health Care Service Corporation Employees' PAC  6 Contributor address; City; State; Zip Code Chicago IL 60601-5014	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/23/2015	5 Full name of contributor Ali Davari  6 Contributor address; City; State; Zip Code Houston TX 77257-0427	7	Amount of contributions (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Nightclub owner		9 Employer (See Instructions) Self	
10/23/2015	5 Full name of contributor Keith Hamm  6 Contributor address; City; State; Zip Code Houston TX 77,023.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/19/2015	5 Full name of contributor Nathelyne Kennedy  6 Contributor address; City; State; Zip Code Houston TX 77,036.00	7	Amount of contributions (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4	Date	5 Full name of contributor	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 Gallegos		3	Filer ID (Ethics Commission filers)
09/29/2015	Texas Taxi PAC ----- 6 Contributor address; City; State; Zip Code Austin TX 78,701.00	7	Amount of contributions (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
09/25/2015	4 Date 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# C00428391 ) Republic Services Better Government PAC ----- 6 Contributor address; City; State; Zip Code Phoenix AZ 85,054.00	7	Amount of contributions (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/17/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Ruben Mercado ----- 6 Contributor address; City; State; Zip Code Houston TX 77,092.00	7	Amount of contributions (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/13/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Eva Loreda ----- 6 Contributor address; City; State; Zip Code Houston TX 77012-1139	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# )		

# 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 Gallegos	3 Filer ID (Ethics Commission filers)
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	John W. Lodge III	7 Amount of contributions (\$)
10/07/2015	6 Contributor address; City; State; Zip Code Houston TX 77,013.00	\$500.00

8 Principal occupation / Job title (See Instructions) President	9 Employer (See Instructions) Lodge Lumber Co., Inc.
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID# ) Laura Spanjian	7 Amount of contributions (\$)
10/22/2015	6 Contributor address; City; State; Zip Code Houston TX 77,006.00	\$100.00

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# ) Michael Sachs	7 Amount of contributions (\$)
10/23/2015	6 Contributor address; City; State; Zip Code Houston TX 77,002.00	\$350.00

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

# 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 Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 09/30/15	<b>5</b> Payee name Campaign Strategies, Inc.	
<b>6</b> Amount (\$) \$3,346.22	<b>7</b> Payee address; City; State; Zip Code P.O. Box 3308  Houston TX 77253	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 Vote by mail program
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 09/30/15	<b>5</b> Payee name SFA High School	
<b>6</b> Amount (\$) \$125.00	<b>7</b> Payee address; City; State; Zip Code 1314 Texas Avenue #1120 Houston TX 77002	
<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 Golf Hole Sponsor
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/01/15	<b>5</b> Payee name InFocus Campaigns	
<b>6</b> Amount (\$) \$906.04	<b>7</b> Payee address; City; State; Zip Code P.O. Box 10726  Fort Worth TX 76114	
<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 Gallegos		3 Filer ID (Ethics Commission filers)
	Printing Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Vote by mail program
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/01/15	5 Payee name Talafero Media Group, Inc.		
6 Amount (\$) \$350.00	7 Payee address; City; State; Zip Code 7322 Southwest Freeway #805 Houston TX 77074		
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 Advertising
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 Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/04/15	<b>5</b> Payee name Bison Signs	
<b>6</b> Amount (\$) \$1,621.04	<b>7</b> Payee address; City; State; Zip Code 10100 Clay Road Suite G Houston TX 77080	
<b>8 PURPOSE OF EXPENDITURE</b>	(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 Campaign signs
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/04/15	<b>5</b> Payee name Lillie Schechter Consulting	
<b>6</b> Amount (\$) \$1,250.00	<b>7</b> Payee address; City; State; Zip Code 1 Greenway Plaza Suite 470 Houston TX 77046	
<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 Fundraising consulting
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/07/15	<b>5</b> Payee name InFocus Campaigns	
<b>6</b> Amount (\$) \$1,809.64	<b>7</b> Payee address; City; State; Zip Code P.O. Box 10726  Fort Worth TX 76114	
<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 Gallegos		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 phone bank program
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/09/15	5 Payee name Bison Signs		
6 Amount (\$) \$795.64	7 Payee address; City; State; Zip Code 10100 Clay Road Suite G Houston TX 77080		
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 Campaign signs
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 Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/09/15	5 Payee name Sprint 2 Print	
6 Amount (\$) \$339.91	7 Payee address; City; State; Zip Code 8748 Clay Rd. Suite 300 Houston TX 77080	
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 Campaign materials
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/10/15	5 Payee name J. Dinkins Consulting	
6 Amount (\$) \$380.00	7 Payee address; City; State; Zip Code P.O. Box 992 Houston TX 77001	
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 General consulting
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/11/15	5 Payee name V & M Solutions	
6 Amount (\$) \$1,080.00	7 Payee address; City; State; Zip Code 12727 Cooper Break Dr. Houston TX 77346	
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 Gallegos		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 Field staff
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/14/15	5 Payee name V & M Solutions		
6 Amount (\$) \$792.00	7 Payee address; City; State; Zip Code 12727 Cooper Break Dr.  Houston TX 77346		
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 Field staff
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 Gallegos	3 Filer ID (Ethics Commission filers)
4 Date 10/19/15	5 Payee name Campaign Strategies, Inc.	
6 Amount (\$) \$31,074.97	7 Payee address; City; State; Zip Code P.O. Box 3308  Houston TX 77253	
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 of mail pieces
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 10/22/15	5 Payee name V&M Solutions	
6 Amount (\$) \$432.00	7 Payee address; City; State; Zip Code 12727 Cooper Break Dr.  Houston TX 77346	
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 Field staff
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/28/2015	5 Payee name Piryx	
6 Amount (\$) 63.26	7 Payee address; City; State; Zip Code 649 Mission Street, #204  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 Gallegos		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 Online contribution processing fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held		

4 Date  9/29/2015	5 Payee name  Piryx		
6 Amount (\$)  25.88	7 Payee address;                      City;                      State;                      Zip Code  649 Mission Street, #204  San Francisco CA 94105		

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 contribution processing 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 Gallegos		<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/5/2015	<b>5</b> Payee name Piryx		
<b>6</b> Amount (\$) 43.14	<b>7</b> Payee address; City; State; Zip Code 649 Mission Street, #204  San Francisco CA 94105		
<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 Online contribution processing fees	
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held		

<b>4</b> Date 10/8/2015	<b>5</b> Payee name Piryx		
<b>6</b> Amount (\$) 1.44	<b>7</b> Payee address; City; State; Zip Code 649 Mission Street, #204  San Francisco CA 94105		
<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 Online contribution processing fees	
	<b>9</b> Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held		

<b>4</b> Date 10/13/2015	<b>5</b> Payee name Piryx		
<b>6</b> Amount (\$) 14.38	<b>7</b> Payee address; City; State; Zip Code 649 Mission Street, #204  San Francisco CA 94105		
<b>8 PURPOSE OF EXPENDITURE</b>	(a) Category	(b) Description	
	(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 contribution processing fees		

# 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 Gallegos		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 Online contribution processing fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 10/16/2015	5 Payee name Piryx		
6 Amount (\$) 14.38	7 Payee address; City; State; Zip Code 649 Mission Street, #204  San Francisco CA 94105		
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 contribution processing 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> Date 10/19/2015	<b>5</b> Payee name Piryx	
<b>6</b> Amount (\$) 14.38	<b>7</b> Payee address; City; State; Zip Code 649 Mission Street, #204  San Francisco CA 94105	
<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 Online contribution processing fees
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>4</b> Date 10/22/15	<b>5</b> Payee name Nelly Fraga	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 5501 Brady  Houston TX 77011	
<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 Ambassadors International Ballet Folklorico Sponsorship
<b>9</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

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

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 09/28/15	6 Payee name El Tiempo	
7 Amount (\$) \$139.71	8 Payee address; City; State; Zip Code 2814 Navigation Blvd.  Houston TX 77003	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 09/30/15	6 Payee name East End Table	
7 Amount (\$) \$132.87	8 Payee address; City; State; Zip Code 6701 Capitol Street  Houston TX 77011	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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  Dinner with Community
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 09/30/15	6 Payee name Net Victories	
7 Amount (\$)	8 Payee address; City; State; Zip Code	



# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
\$18.31	309 NW 46th St.  Seattle WA 98107	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 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  Website
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date	6 Payee name
10/01/15	Net Victories
7 Amount (\$)	8 Payee address; City; State; Zip Code
\$0.18	309 NW 46th St.  Seattle WA 98107
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
10 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  Website
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held

5 Date	6 Payee name
10/02/15	Lowe's
7 Amount (\$)	8 Payee address; City; State; Zip Code
\$21.56	1000 Gulfgate Center Mall  Houston TX 77087

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> 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  Office supplies
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/03/15	<b>6</b> Payee name  Dona Chela Taqueria		
<b>7</b> Amount (\$)  \$29.15	<b>8</b> Payee address;            City;            State;            Zip Code  1112 76th St.  Houston TX 77012		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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  Breakfast with volunteers	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>5</b> Date  10/04/15	<b>6</b> Payee name  Office Depot		
<b>7</b> Amount (\$)  \$33.95	<b>8</b> Payee address;            City;            State;            Zip Code  1576 West Gray Street  Houston TX 77019		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Office Overhead/Rental Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/05/15	<b>6</b> Payee name  Carroll Printing
<b>7</b> Amount (\$)  \$822.70	<b>8</b> Payee address;            City;            State;            Zip Code  2907 Canal Street  Houston TX 77003

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Printing Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing campaign materials

<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 10/05/15	6 Payee name Carroll Printing	
7 Amount (\$) \$487.13	8 Payee address; City; State; Zip Code 2907 Canal Street  Houston TX 77003	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 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 campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/05/15	6 Payee name Cricket	
7 Amount (\$) \$100.00	8 Payee address; City; State; Zip Code 6816 Harrisburg Blvd  Houston TX 77011	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 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  Campaign phones
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/06/15	6 Payee name Little Buddy	
7 Amount (\$)	8 Payee address; City; State; Zip Code	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$3.00	2001 S Wayside  Houston TX 77023	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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 Drinks for block walkers
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/07/15	<b>6</b> Payee name  Net Victories		
<b>7</b> Amount (\$)  \$50.00	<b>8</b> Payee address;                      City;                      State;                      Zip Code  309 NW 46th St.  Seattle WA 98107		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> 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 Website	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>5</b> Date  10/8/2015	<b>6</b> Payee name  Harris County Democratic Party		
<b>7</b> Amount (\$)  500.00	<b>8</b> Payee address;                      City;                      State;                      Zip Code  1445 North Loop W  Houston TX 77008		

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> 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 Sponsorship of JRR Dinner
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/08/15	<b>6</b> Payee name  CallFire		
<b>7</b> Amount (\$)  \$250.00	<b>8</b> Payee address;      City;      State;      Zip Code  1410 2nd Street Suite 200 Santa Monica CA 90401		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> 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 Campaign phone program	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>5</b> Date  10/08/15	<b>6</b> Payee name  Net Victories		
<b>7</b> Amount (\$)  \$0.18	<b>8</b> Payee address;      City;      State;      Zip Code  309 NW 46th St.  Seattle WA 98107		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Advertising Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/08/15	<b>6</b> Payee name  Net Victories
<b>7</b> Amount (\$)  \$18.29	<b>8</b> Payee address;            City;            State;            Zip Code  309 NW 46th St.  Seattle WA 98107

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website

<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
5 Date 10/08/15	6 Payee name Vista Print	
7 Amount (\$) \$275.69	8 Payee address; City; State; Zip Code 95 Hayden Avenue  Lexington MA 0.2421	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 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 campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/09/15	6 Payee name Vista Print	
7 Amount (\$) \$24.82	8 Payee address; City; State; Zip Code 95 Hayden Avenue  Lexington MA 0.2421	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 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 campaign materials
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

5 Date 10/11/15	6 Payee name CallFire	
7 Amount (\$)	8 Payee address; City; State; Zip Code	



# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
\$500.00	1410 2nd Street Suite 200 Santa Monica CA 90401	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 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 Campaign phone program
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

5 Date	6 Payee name
10/11/15	CallFire
7 Amount (\$)	8 Payee address; City; State; Zip Code
\$500.00	1410 2nd Street Suite 200 Santa Monica CA 90401
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
10 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 Campaign phone program
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name                      office sought                      office held

5 Date	6 Payee name
10/12/15	Tejano Democrats
7 Amount (\$)	8 Payee address; City; State; Zip Code
\$300.00	2314 Tannehill Drive  Houston TX 77008

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> 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 Sponsorship of Roast & Toast
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/13/15	<b>6</b> Payee name  Montrose Counseling		
<b>7</b> Amount (\$)  \$250.00	<b>8</b> Payee address;      City;      State;      Zip Code  401 Branard St #2  Houston TX 77006		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>5</b> Date  10/14/15	<b>6</b> Payee name  El Tiempo		
<b>7</b> Amount (\$)  \$93.26	<b>8</b> Payee address;      City;      State;      Zip Code  2814 Navigation Blvd.  Houston TX 77003		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
	Food/Beverage Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Juliet Stipeche fundraiser
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/14/15	<b>6</b> Payee name  El Tiempo
<b>7</b> Amount (\$)  \$228.56	<b>8</b> Payee address;            City;            State;            Zip Code  2814 Navigation Blvd.  Houston TX 77003

<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	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 Juliet Stipeche fundraiser

<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
<b>5</b> Date  10/17/15	<b>6</b> Payee name  Kelley's Country Kitchen	
<b>7</b> Amount (\$)  \$70.60	<b>8</b> Payee address; City; State; Zip Code  8015 Park Place  Houston TX 77087	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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 with block walkers
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>5</b> Date  10/18/15	<b>6</b> Payee name  Luby's	
<b>7</b> Amount (\$)  \$91.80	<b>8</b> Payee address; City; State; Zip Code  5335 Gulf Freeway  Houston TX 77023	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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  Dinner with block walkers
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>5</b> Date  10/18/15	<b>6</b> Payee name  Lowe's	
<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$13.88	1000 Gulfgate Center Mall  Houston TX 77087	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> 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  Office supplies
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/19/15	<b>6</b> Payee name  Ruchi's Mexican Restaurant		
<b>7</b> Amount (\$)  \$38.30	<b>8</b> Payee address;                      City;                      State;                      Zip Code  6969 Gulf Freeway #270 Houston TX 77087		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held	

<b>5</b> Date  10/19/15	<b>6</b> Payee name  Academy		
<b>7</b> Amount (\$)  \$337.65	<b>8</b> Payee address;                      City;                      State;                      Zip Code  10414 Gulf Fwy  Houston TX 77034		

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> 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  Tents for voting locations
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

<b>5</b> Date  10/20/15	<b>6</b> Payee name  CallFire		
<b>7</b> Amount (\$)  \$500.00	<b>8</b> Payee address;      City;      State;      Zip Code  1410 2nd Street Suite 200 Santa Monica CA 90401		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> 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  Campaign phone program	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

<b>5</b> Date  10/20/15	<b>6</b> Payee name  CallFire		
<b>7</b> Amount (\$)  \$250.00	<b>8</b> Payee address;      City;      State;      Zip Code  1410 2nd Street Suite 200 Santa Monica CA 90401		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description  <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	

# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Robert Gallegos	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
	Advertising Expense	<input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/> Campaign phone program
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought                      office held

5 Date  10/21/15	6 Payee name  Facebook
7 Amount (\$)  25.19	8 Payee address;                      City;                      State;                      Zip Code  1 Hacker Way  Menlo Park CA 94025

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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10 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 Facebook advertising
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11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$0.00	
<b>5</b> Date  10/15/15	<b>6</b> Payee name  Carroll Printing	
<b>7</b> Amount (\$)  \$1,531.74	<b>8</b> Payee address; City; State; Zip Code  2907 Canal Street  Houston TX 77003	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> 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 campaign materials
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>5</b> Date  10/22/15	<b>6</b> Payee name  Fresh Spirit Wellness for Women, Inc.	
<b>7</b> Amount (\$)  \$100.00	<b>8</b> Payee address; City; State; Zip Code  4 Riverway  Houston TX 77056	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>5</b> Date  10/10/15	<b>6</b> Payee name  Oak Leaf Smokehouse	
<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code	



# EXPENDITURES MADE BY CREDIT CARD

# SCHEDULE F4

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4:	<b>2</b> FILER NAME Robert Gallegos	<b>3</b> Filer ID (Ethics Commission filers)
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$0.00
\$40.65	1000 Telephone Road  Houston TX 77023	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political
<b>10</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  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
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

<b>5</b> Date  10/22/15	<b>6</b> Payee name  Lowe's		
<b>7</b> Amount (\$)  \$27.63	<b>8</b> Payee address; City; State; Zip Code  1000 Gulfgate Center Mall  Houston TX 77087		
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political	<input type="checkbox"/> Non-Political	
<b>10</b> 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 Office supplies	
<b>11</b> Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

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