

Official Public Records of Harris County Stan Stanart County Clerk

Campaign Finance Report



COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo:

2018164

Received By Clerk:

1/19/2018

File Date:

January 16, 2018

Office:

County School Trustee, Position 3, At Large

Candidate:

Wallenstein, Josh

Treasurer:

Wallenstein, Luciana

Category:

Contributions And Expenditures

Delivered By:

Certified Mail

Type:

COR

Harris County No Fee

	3000000	E / OFFICEHOLDER I FINANCE REPORT			COVER SH	RM C/OH HEET PG 1
Th	e C/OH Instruction 0	Guide explains how to complete this	1 Filer ID		2 Total pages file 15	
3	CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	Г	МІ	OFFICE U	SE ONLY
	NAME	Josh NICKNAME LAST		SUFFIX	Date Received	
		Walle	enstein			
4	CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX: APT / SUITI 13543 N TRACEWOOD BND	E#; CITY;	ZIP CODE	Date Hand-delivered or D	Date Postmarked
	ADDRESS Change of Address	HOUSTON, TX 77077		-	Date Processed	
		•			Date Imaged	
5	CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST	iciana	MI		
		NICKNAME LAST	len Stein	SUFFIX		
6	CAMPAIGN TREASURER ADDRESS (Rosidence or Business)	13543 NT	rease); APT	SUITE#; CITY; JBend 7077	STAT	E; ZIP CODE
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM 713 - 598	HBER EXTENSION - 458			
8	REPORT TYPE			tunoff	15th day after cam appointment (office Final Report (Attac	holder only)
9	PERIOD COVERED	Month Day Year 07/01/2017	THROUGH	Month Day 12/31/2017	Year	
10	ELECTION	ELECTION DATE Month Day Year 03/06/2018	X Primary General	ELECTION TYPE Runoff Special	Other	
11	OFFICE	OFFICE HELD (if any) None Harris		12 OFFICE SOUGHT Harris Co Dept of		t - Large
			GO TO PAGE 2			
Foi	rms provided by Te	xas Ethics Commission	www.ethics.state.tx.us			Version V1.0.5389

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

SUPPORT	& IOIALS			N SHEET	2 of 15
13 C / OH NAME	Wallenstein, Josh		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or of consent. Candidates and officeholders are required to report this information only if they receive				edge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME			
COMMITTEE ADDRESS SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	iS		
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER 1 ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$	0.00
	(OTHER THAN I	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS		\$	5,422.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	ITEMIZED	\$	0.00
		AL EXPENDITURES		\$	1,751.30
CONTRIBUTION BALANCE	REPORTING PE			\$	9,086.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	5,416.00
17 AFFADAVIT	KENNETH STE NOTARY ID#1282 Tenas Notary 6 My Comm. Exp.: 05	WART	y of perjury, that the accelling information required to	be reported b	port is by me
	OTARY STAMP / SEAL AB	Tack Wallen de	this the	-t-	day
Signature of off	icer administering	Printed name of officer administering	Title of officer	2. NS / administering	<u> </u>

SUBTOTALS - C/OH	FORM VER SHEE	C/OH T PG 3 3 of 15	
	9 Filer ID		
Wallenstein, Josh 20 SCHEDULE SUBTOTALS	1		
NAME OF SCHEDULE		SUBTOTAL	AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,422.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. X SCHEDULE E: LOANS		\$	5,416.00
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	1,511.18
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$.	· · · · · · · · · · · · · · · · · · ·
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9. X SCHEDULE GI: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	******	5	240.12
10 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	r C/OH	\$	
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION		\$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RE	ETURNED	\$	
			ion V1 0 5386

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/15		
2	FILER NAME Wallenstein,	Josh		3 Filer ID		
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Durante, Mark (Mr.) 6 Contributor address; City; State; Zip Code 1310 Hadley Houston, TX 77002			7 Amount of Contribution (\$) \$100.00		
8	·	pation / Job title (See Instructions) Devlopemt Eng	9 Employer (See Instructions SAP)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/31/2017 Fonte, Erin (Ms.) Contributor address; City; State; Zip Code 13225 Hymeadow Cir Austin, TX 78729			Amount of Contribution (\$) \$250.00		
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Dykema Gossett PLLC			
	Date 12/06/2017 Full name of contributor out-of-state PAC (ID#: 1/2/06/2017 Gregg K. Farris Trust Contributor address; City; State; Zip Code 150 Vieux Carre Dr Houston, TX 77009		Amount of Contribution (\$) \$50.00			
	Principal occu Trust	pation / Job title (See Instructions)	Employer (See Instructions Gregg K. Farris Trust	5)		
	Date 09/17/2017			Amount of Contribution (\$) \$250.00		
	Principal occu Attorney	Austin, TX 78703 upation / Job title (See Instructions)	Employer (See Instructions CBTX Capital	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/27/2017 Jastrow II, Kenneth (Mr.) Contributor address; City; State; Zip Code 1242 Pt Ranch Rd Round Mtn, TX 78663		Amount of Contribution (\$) \$1,000.00			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions Jastrow Foundation	3)		

MONEI	ARY POLITICAL CONTRIBUT	IONS		SCHEDUL	E A1
The Instruc	tion Guide explains how to complete this	s form.	1	ges Schedule A1: 4 Rpt: 5/15	
FILER NAME Wallenstein, J			3 Filer ID		
Date 10/15/2017	5 Full name of contributor out-of-state PAC (ID Johansen, Steven (Mr.) 6 Contributor address; City; State; Zip Code 14354 Carolcrest St Houston, TX 77079	o#:)	7 Amount	of Contribution (\$)	\$150.00
Principal occup Retired	nation / Job title (See Instructions)	9 Employer (See Instruction Retired	s)	=	
Date 09/25/2017	Full name of contributor out-of-state PAC (ID Kralj, Elliot (Mr.) Contributor address; City; State; Zip Code 3809 Gaines Ct Austin, TX 78735		Amount	of Contribution (\$)	\$127.00
Principal occup Owner	eation / Job title (See Instructions)	Employer (See Instruction Riolimpio.com	s)		
Date 11/10/2017	Full name of contributor out-of-state PAC (ID Manchester, Robert (Mr.) Contributor address; City; State; Zip Code 3402 Mount Vernon St	D#:	Amount	of Contribution (\$)	\$300.0
	Houston, TX 77006				
Principal occup Dir	eation / Job title (See Instructions)	Employer (See Instruction Indegent Cremations, I			
Date 12/07/2017	Full name of contributor Out-of-state PAC (IE Matula, Sherrie (Mrs.) Contributor address; City; State; Zip Code 15918 Cavendish Dr Houston, TX 77069	O#:		of Contribution (\$)	\$250.0
Principal occup Retired	eation / Job title (See Instructions)	Employer (See Instruction Retired	is)		
Date 12/06/2017	Full name of contributor out-of-state PAC (ID McGehee, Jack (Mr.) Contributor address; City; State; Zip Code 10370 Richmond Ave Ste 1300 Houston, TX 77042			of Contribution (\$)	\$500.0
Principal occup Attorney	nation / Job title (See Instructions)	Employer (See Instruction McGehee Chang Barne			
·					

MONET	ARY POLITICAL CONTRIBUTION	vs	SCHEDUL	E A1
The Instru	tion Guide explains how to complete this for	rm.	Total pages Schedule A1: Sch: 3/4 Rpt: 6/15	
2 FILER NAME Wallenstein,	Josh	3	Filer ID	
4 Date 11/01/2017	Full name of contributor	7	Amount of Contribution (\$)	\$100.00
	6 Contributor address; City; State; Zip Code 510 River Plantation Dr Conroe, TX 77302			
8 Principal occu		Employer (See Instructions)	.,	
Attorney		McDermott Intl, Inc.		
Date 12/06/2017	Full name of contributor out-of-state PAC (ID#: Park, Adam (Mr.) Contributor address; City; State; Zip Code 1200 Clear Lake City Blvd		Amount of Contribution (\$)	\$100.00
	Houston, TX 77062	***************************************	· · · · · · · · · · · · · · · · · · ·	
Principal occu Financial Ad	pation / Job title (See Instructions) visor	Employer (See Instructions) JP Morgan Securitites LLi	c	
Date 12/06/2017	Full name of contributor out-of-state PAC (ID#:Shannonhouse, Hugh & Fernando (Mr.) Contributor address; City; State; Zip Code 2702 Andrew Springs Ln Spring, TX 77386		Amount of Contribution (\$)	\$100.00
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions) Retired		
Date 12/28/2017	Full name of contributor out-of-state PAC (IDI): Starr, Linda (Mrs.) Contributor address; City; State; Zip Code 3262 Westheimer Rd Ste 155 Houston, TX 77098		Amount of Contribution (\$)	\$100.00
•	pation / Job title (See Instructions)	Employer (See Instructions)		
Retired		Retired		
Date 10/16/2017	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$2,000.00
Principal occu Mgr	pation / Job title (See Instructions)	Employer (See Instructions) WFP Dallas Grp LLC		
orms provided	by Texas Ethics Commission www.ethics.	state.tx.us	Versio	on V1.0.538

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MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 4/4 Rpt: 7/15
2 FILER NAME Wallenstein, Josh	3 Filer ID
4 Date 09/23/2017	7 Amount of Contribution (\$) \$20.00
Austin, TX 78702 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	s)
Teacher Texas State Univ	
Date Full name of contributor out-of-state PAC (ID#:) 11/12/2017 Warren, Katherine (Ms.) Contributor address; City; State; Zip Code 2503 Commonwealth St. Houston, TX 77006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)

LOANS				SCHEDULE E
The Instruction	on Guide explains how to complete this f	orm.		ges Schedule E: 2 Rpt: 8/15
2 FILER NAME Wallenstein, Jos	sh		3 Filer ID	
4 TOTAL OF UN	NITEMIZED LOANS	,		\$
5 Date of loan 08/03/2017	7 Name of lender out-of-state PA Wallenstein, Josh (Mr.)	C (ID#:		9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution?	8 Lender address; City; State; 13543 North Tracewood Bend	Zip Code	***	10 Interest Rate 11 Maturity Date
110	Houston, TX 77077			11/06/2018
12 Principal occupati Attorney	on / Job title (See Instructions)	13 Employer (See Instructions Self-Employed	3)	1
14 Description of Col	lateral	15 Check if personal funds we	ere deposited	l into political account (See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State;	Zip Code		HON
20 Principal occupati	on	21 Employer (See Instructions	3)	
Date of loan 09/17/2017	Name of lender out-of-state PA Wallenstein, Josh (Mr.)	AC (ID#:)	Loan Amount (\$) \$250.00
Is lender a financial institution?	Lender address; City; State; 13543 North Tracewood Bend	Zip Code		Interest Rate
No	Houston, TX 77077			Maturity Date 11/06/2018
Principal occupati Attorney	on / Job title (See Instructions)	Employer (See Instructions Self-Employed	5)	
Description of Col	lateral	Check if personal funds we	ere deposited	l into political account (See Instructions)
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
X not applicable	Guarantor address; City; State;	Zip Code		
Principal occupati	ion	Employer (See Instructions	5)	1

LOANS			SCHEDULE E
The Instruction	on Guide explains how to complete this form.	1 Total pages S Sch: 2/2 Rpt	
2 FILER NAME Wallenstein, Jos	sh	3 Filer ID	
TOTAL OF UN	NITEMIZED LOANS	\$	
5 Date of loan 12/06/2017	7 Name of lender cut-of-state PAC (ID#:	9 L	oan Amount (\$) \$166.00
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code 13543 North Tracewood Bend	10 ir	nterest Rate
No	Houston, TX 77077	t e	Maturity Date 1/06/2018
12 Principal occupati Attorney	ion / Job title (See Instructions) 13 Employer (See Inst Self-Employed	ructions)	
14 Description of Co X None	llateral 15 Check if personal fi	nds were deposited into (political account See Instructions)
16 GUARANTOR INFORMATION	17 Name of guarantor	19 A	Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State; Zip Code		
20 Principal occupat	ion 21 Employer (See Inst	ructions)	
			:
			:
Forms provided by	Texas Ethics Commission www.ethics.state.tx.us		Version V1.0.5389

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Panking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense dy - Glit/Awards/Memorials Expense Legal Services	CORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID
Sch: 1/4 Rpt: 10/15	Wallenstein, Josh		
4 Date	5 Payee name		
09/17/2017	ActBlue		

6 Amount (\$) \$19.76	PO Box 441146	tate; Zip Code	
	Somerville, MA 02144		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Accounting/Banking	Check if travel out	side of Texas. Complete Schedule T. X., officeholder living expense SVCS
9 Complete QNLY if direct expenditure to benefit C/O	Candidate/Officeholder name)H	Office sought	Office held
Date	Payee name		
09/24/2017	ActBlue	y	
Amount (\$) \$0.79	Payee address; City; S PO Box 441146 Somerville, MA 02144	State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Accounting/Banking	Chack if travel ou	side of Texas. Complete Schedule T. X. officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name DH	Office sought	Office held
Date	Payee name		
11/05/2017	ActBlue		*
Amount (\$) \$3.95		State; Zip Code	
	Somerville, MA 02144		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Accounting/Banking	Check if travel out	tside of Texas. Complete Schedule T. X, officeholder living expense I SVCS
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name DH	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 Politing Expense Printing Expense Salarles/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Coi	nmittee	Legal Se	rds/Memorials Experiences struction Guide			tges/	/Contract Labor		Out of Distri R (enter a ca	ict ategory not liste	d above)
1	Total pages Schedule F1:	2	FILER NAME				-			3 Filer	ID.		
	Sch: 2/4 Rpt: 11/15		Wallenstein							. ,,,,,,			
4	Date	5	Payee name										<u> </u>
	11/12/2017		ActBlue							***************************************		•	
6	Amount (\$)	7	Payee addre	ss;	City;	State;	Zip Cod	le					
	\$0.99		PO Box 44:	1146							/		

			Somerville,	MA 02	2144								
8	PURPOSE	(a)	Category (S	ee Catego	ories listed at the to	p of this sche	edule) (b)	Description				
	OF EXPENDITURE	ļ	Accounting	/Bankir	ng						-	ete Schedule T.	
		Ì							CC Procesir		older living e	expense	
		l						.	CC Processir	iy avus			
_		L				.200s	<u> </u>		***		Office to t		
9	Complete <u>QNLY</u> if direct expenditure to benefit C/OI		Candidate/Off	cenoide	er name	0	office soug	nt			Office held		
	Date		Payee name										
	12/31/2017		ActBlue			7	`						
	Amount (\$)	<u> </u>	Payee addre	ss;	City;	State;	Zip Cod	le					
	\$9.88		PO Box 44	1146			- ///						
						~ 2	7						
			Somerville,	MA 02	2144								
	PURPOSE	(a)			ories listed at the to	n at the	adula) [d	(p)	Description			 	
	OF	`~'	Accounting			ho⊪anaa 2006	edule)			outside of T	exas. Comple	ete Schedule T,	
	EXPENDITURE						- 1		Check if Austin				
			d						CC Processi	ng Svcs			
L		L		*									
	Complete ONLY if direct		Candidate/Off	icehold	er name	0	office soug	ht		(Office held	d	
	expenditure to benefit C/Oi	- I			*****								
	Date		Payee name				-						
	10/25/2017		ConstantCo	ontact.	com								
<u> </u>	Amount (\$)		Payee addre	ss;	City;	State;	Zip Cod	le				·	
	\$234.62		1601 Trape		-	•	•						
		``~	3rd FL										
			Waltham, N	/A 024	51								
\vdash	PURPOSE	<u> </u>					L	(h)	Depoiled	i.			
	OF	(a)			ories listed at the to	p of this sche	edule)	(u)	Description Check if travel	Dutside of T	exas Compli	ete Schedule T.	
	EXPENDITURE		Advertising	⊏xper	156				Check if Austin				
		ľ							Voter Outrea		-		
			>										
	Complete ONLY if direct		Candidate/Off	icehold	er name	O	Office soug	jht			Office hel	d	
	expenditure to benefit C/O						•						

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense		EXPENDITI Event Expense	JRE CATEGO	Loan Repay	ment/Reimbursement		ation/Fundraising Exp	
Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Exp Glft/Awards/Memor Legal Services		Polling Expo Printing Exp		Travel Travel	ortation Equipment & in District Out of District R (enter a category no	·
Credit Card Payment		- 🐱	Guide explains		plete this form.			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1 Total pages Schedule F1:	2 FILER NAM	E				3 Filer	ID O	· · · · · · · · · · · · · · · · · · ·
Sch: 3/4 Rpt: 12/15	Wallenstei							
4 Date	5 Payee name					<u></u>		
12/26/2017		Mgmt Svcs						
6 Amount (\$)	7 Payee addre	ess; City;	State	; Zip Cod	e		·	
\$250.00	3510 Ruth	St						
	Houston, 7			T				
8 PURPOSE OF		See Categories listed	at the top of this sch	nedute)	b) Description	al equeide of To	ıxas. Complete Scher	tula T
EXPENDITURE	Consulting	Expense		[older living expense	zuid 1.
				- 1	Compliance	Audit		
9 Complete ONLY if direct expenditure to benefit C/O		ficeholder name	(Office soug	ht	(Office held	
			***	······································				
Date 10/18/2017	Payee name	e Guadalajara						
			Stote	; Zip Cod	10			
Amount (\$) \$9,31	Payee addr 3522 Irving		State	r, zap Coc	ie			;
Φ9.31	3522 11 1111	gon		*				
	Houston, 1	TX 77009						
PURPOSE	(a) Category (See Categories listed	at the top of this sci	hedule)	(b) Description	<u> </u>	 	
OF EXPENDITURE		erage Expense			- 100	,0000007	exas. Complete Scher	dule T.
					Meeting	in, +X, omcen	older living expense	
					Miccuilg			
Complete ONLY if direct	Candidate/O	fficeholder name		Office sour	iht	-	Office held	
expenditure to benefit C/O			· · · · · · · · · · · · · · · · · · ·		,			
Date	Payee nam	e						***
11/15/2017	Harris Co	Dem Party						4
Amount (\$)	Payee addr	ess; City;	State	; Zip Coo	ie			
\$750.00	1445 N Lo	op W						
	Ste 110							
	Houston,	ΓX 77008						
PURPOSE	(a) Category	See Categories listed	at the top of this sc	hedule)	(b) Description			
OF EXPENDITURE	Office Ove	erhead/Rental	Expense	1			exas. Complete Sche older living expense	dule T.
					Campaign F			
					- annpaign i			
Complete ONLY if direct	Candidate/O	fficeholder name		Office sou	ht		Office held	
expenditure to benefit C/O					•		•	
								
Forms provided by Texas E	thics Commis	sion	www.ethics.	state.tx.u	\$			Version V1.0.5389

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Ever Fees Food Gift/ mittee Legs	EXPENDITURE (at Expense diffeeverage Expense Awards/Memorials Exp at Services to Instruction Guide	ense	Loan Repayn Office Overho Polling Exper Printing Expe Salaries/Wag	nent/Re ead/Ren inse inse jes/Con	imbursement ntal Expense		Transportation Travel in District Travel Out of D		elated Expense	
_				THIOST GOLD COLOR	oxpiailio i			7110 1011111	1_				
1	Total pages Schedule F1: Sch: 4/4 Rpt: 13/15		FILER NAME Wallenstein, Jo	sh					3	Filer ID			
4	Date	5	Payee name										
	09/13/2017		Monarch Printir	ng Co, Inc.									
6	Amount (\$)	7	Payee address;	City;	State;	Zip Code)						
	\$211.08	,	6605 McGrew										
			Houston, TX 77	7087									
8	PURPOSE						, De	a a vintian			 	- 1177	
	OF			ategories listed at the to	op of this sch	edule) (יי טפ ריין	scription Check if travel	l nutsi	de of Texas. Co	mplete Schedule	т.	
	EXPENDITURE		Printing Expens	56			Ħ			officeholder livir	•		
	<u> </u>						Ca	ımpaign M	late	rials			
								, -					
9	Complete ONLY if direct expenditure to benefit C/Oh		andidate/Officeh	older name	C	office sough	nt			Office I	neld		
	experialitate to periodic over												·
	Date		Payee name									•••	
	09/28/2017		NameTagCoun	ntry.com									
	Amount (\$)		Payee address:	City;	State;	Zip Code	•						
	\$20.80		PO Box 15068	***			.						
			Chattanooga, 1	TN 37415									
	D. 100.005					10	<u> </u>						
	PURPOSE OF			ategories listed at the t	op of this sch	edule) (F	,	scription	اعتسم ا	de of Texas. Co	malata Cahaduli	, T	
	EXPENDITURE		Printing Expens	se		1	************	87		afficeholder livir		: 1.	
							السب	ampaign M		*****			
											>		
	Complete ONLY if direct		andidate/Officeh	older name		Office sough	nt .		**	Office I	neld		
•	expenditure to benefit C/O		andicator of ficer	older Harrie		omea sougi	ı.		`				
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POLITICAL EX	PENDITU	IRES FROM PEI	RSON	AL FUNDS	S SCHEDULE G			
EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense								
Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services	Polling Ex Printing Ex Salaries/M	pense pense lages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
•		The Instruction Guide explain	s how to co	mplete this form.				
1 Total pages Schedule G: Sch: 1/2 Rpt: 14/15	2 FILER NAME Wallenstein			3 Filer ID				
4 Date 5 Payee name 12/31/2017 Shell								
6 Amount (\$) \$25.00	Amount (\$) 7 Payee address; City; State; Zip Code							
Reimbursement from political contributions intended	Houston, T	× 7 7077						
8 PURPOSE OF	1	es Categories listed at the top of this s		(b) Description	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Transporta	tion Equipment & Related	Expense	Fuel	Check if Austin, TX, officeholder living expense			
Complete QNLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held			

Date 12/15/2017	Payee name Shell			·				
Amount (\$) \$50.00 Reimbursement from	Payee addre		ie; Zip Co	de				
political contributions intended	Houston, T	x 77077						
PURPOSE OF	1 .	ee Categories listed at the top of this s	•	Description	Check if travel outside of Texas Complete Schedule T. Check if Austin, TX, officeholder living expense			
EXPENDITURE	Transporta	tion Equipment & Related	Expense	Fuel				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held			
Date	Payee name							
11/30/2017	Shell							
Amount (\$) \$50.00	Payee addre		te; Zip Co	de				
X Reimbursement from political contributions intended	Houston, T	X 77077						
PURPOSE OF EXPENDITURE		ee Categories listed at the top of this s tion Equipment & Related	•	Description Fuel	Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder flying expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought	Office held			

POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS	SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Fees Office O Food/Beverage Expense Polling E Gitt/Awards/Memorials Expense Printing (payment/Reimbursement rerhead/Rental Expense xpense xpense wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
1 Total pages Schedule G: Sch: 2/2 Rpt: 15/15	2 FILER NAME Wallenstein, Josh		3 Filer ID					
4 Date 11/15/2017	5 Payee name Shell							
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip C 11414 Richmond Ave	ode						
Reimbursement from political contributions intended	Houston, TX 77077							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description [Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ON Y if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					
Date								
Amount (\$) \$50.00 Reimbursement from political contributions intended	Payee address; City; State; Zip C 11414 Richmond Ave Houston, TX 77077 .	ode						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	Description [Fuel	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH								
Date	Payee name	••••						
12/20/2017	Underbelly		RECORDER'S MEMORANDUM:					
Amount (\$) Payee address; City; State; Zip Code \$15.12 1100 Westheimer Rd Reimbursement from Reimbursement from additions and changes were crescrible the time additions and changes were crescrible the time additions and changes were crescribed.								
x political contributions intended	Houston, TX 77006	the int	trument was filed and recorded.					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description [[Meeting	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held					

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