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2018164

Official Public Records of  
Harris County  
Stan Stanart  
County Clerk

## Campaign Finance Report



*Stan Stanart*

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

# 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: 15	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI		OFFICE USE ONLY		
	NICKNAME LAST SUFFIX		Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #; CITY; ZIP CODE		Date Hand-delivered or Date Postmarked		
	13543 N TRACEWOOD BND		Receipt # Amount		
	HOUSTON, TX 77077		Date Processed		
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI				
	NICKNAME LAST SUFFIX				
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
	13543 N Tracewood Bend Houston, TX 77077				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	713	598	4581		
8 REPORT TYPE	<input checked="" 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 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    Month Day Year 07/01/2017    THROUGH    12/31/2017				
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE		
	03/06/2018		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) None Harris		12 OFFICE SOUGHT (if known) Harris Co Dept of Ed Position 3 - at - Large		
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 15

13 C / OH NAME Wallenstein, Josh

14 Filer ID

15 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

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 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) \$ 5,422.00

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 1,751.30

CONTRIBUTION  
BALANCE

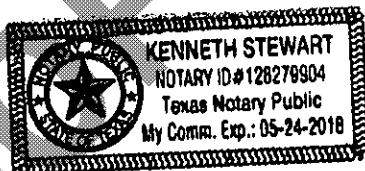
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 9,086.70

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 5,416.00

17 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.



*[Signature]*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Josh Wallenstein, this the 15th day of Jan, 20 18, to certify which, witness my hand and seal of office.

*[Signature]*

Signature of officer administering

Kenneth D Stewart

Printed name of officer administering

CNSA

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3  
3 of 15

18 FILER NAME Wallenstein, Josh		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,422.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,416.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,511.18
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 F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 240.12
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/4 Rpt: 4/15
2 FILER NAME Wallenstein, Josh		3 Filer ID
4 Date 10/05/2017	5 Full name of contributor <input type="checkbox"/> 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 Principal occupation / Job title (See Instructions) Sr Software Developemt Eng		9 Employer (See Instructions) SAP
Date 12/31/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fonte, Erin (Ms.) Contributor address; City; State; Zip Code 13225 Hymeadow Cir Austin, TX 78729	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Dykema Gossett PLLC
Date 12/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gregg K. Farris Trust Contributor address; City; State; Zip Code 150 Vieux Carre Dr Houston, TX 77009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Trust		Employer (See Instructions) Gregg K. Farris Trust
Date 09/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haley, Brian (Mr.) Contributor address; City; State; Zip Code 2224 Parkway Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) CBTX Capital
Date 12/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 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 occupation / Job title (See Instructions) ED		Employer (See Instructions) Jastrow Foundation

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

2018164

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 5/15
2 FILER NAME Wallenstein, Josh		3 Filer ID
4 Date 10/15/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johansen, Steven (Mr.) 6 Contributor address; City; State; Zip Code 14354 Carolcrest St Houston, TX 77079	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/25/2017	Full name of contributor <input type="checkbox"/> 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 occupation / Job title (See Instructions) Owner		Employer (See Instructions) Riolimpio.com
Date 11/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manchester, Robert (Mr.) Contributor address; City; State; Zip Code 3402 Mount Vernon St Houston, TX 77006	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Dir		Employer (See Instructions) Indegent Cremations, Inc.
Date 12/07/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Sherrie (Mrs.) Contributor address; City; State; Zip Code 15918 Cavendish Dr Houston, TX 77069	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/06/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGehee, Jack (Mr.) Contributor address; City; State; Zip Code 10370 Richmond Ave Ste 1300 Houston, TX 77042	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McGehee Chang Barnes Landgraf

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# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

Sch: 3/4 Rpt: 6/15

2 FILER NAME

Wallenstein, Josh

3 Filer ID

4 Date

11/01/2017

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Olson, Justin (Mr.)

7 Amount of Contribution (\$)

\$100.00

6 Contributor address; City; State; Zip Code

510 River Plantation Dr

Conroe, TX 77302

8 Principal occupation / Job title (See Instructions)

Attorney

9 Employer (See Instructions)

McDermott Intl, Inc.

Date

12/06/2017

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Park, Adam (Mr.)

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

1200 Clear Lake City Blvd

Houston, TX 77062

Principal occupation / Job title (See Instructions)

Financial Advisor

Employer (See Instructions)

JP Morgan Securities LLC

Date

12/06/2017

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Shannonhouse, Hugh & Fernando (Mr.)

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

2702 Andrew Springs Ln

Spring, TX 77386

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

12/28/2017

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Starr, Linda (Mrs.)

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

3262 Westheimer Rd

Ste 155

Houston, TX 77098

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

10/16/2017

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Wallenstein, David (Mr.)

Amount of Contribution (\$)

\$2,000.00

Contributor address; City; State; Zip Code

2727 LBJ Fwy

Ste 600

Dallas, TX 75234

Principal occupation / Job title (See Instructions)

Mgr

Employer (See Instructions)

WFP Dallas Grp LLC

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2018164

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	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallenstein, Eric (Mr.) 6 Contributor address; City; State; Zip Code 705 Waller St Austin, TX 78702	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Texas State Univ
Date 11/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 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) Consultant		Employer (See Instructions) Boxley Grp

UNOFFICIAL COPY

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# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/2 Rpt: 8/15	
2 FILER NAME Wallenstein, Josh		3 Filer ID	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 08/03/2017	7 Name of lender Wallenstein, Josh (Mr.) <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$) \$5,000.00	
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 13543 North Tracewood Bend  Houston, TX 77077	10 Interest Rate	
		11 Maturity Date 11/06/2018	
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self-Employed	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	
Date of loan 09/17/2017	Name of lender Wallenstein, Josh (Mr.) <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$) \$250.00	
Is lender a financial institution? No	Lender address; City; State; Zip Code 13543 North Tracewood Bend  Houston, TX 77077	Interest Rate	
		Maturity Date 11/06/2018	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed	
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
Principal occupation		Employer (See Instructions)	

LOANS		SCHEDULE E	
The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/2 Rpt: 9/15	
2 FILER NAME Wallenstein, Josh		3 Filer ID	
4 TOTAL OF UNITEMIZED LOANS		\$	
5 Date of loan 12/06/2017	7 Name of lender Wallenstein, Josh (Mr.) <input type="checkbox"/> out-of-state PAC (ID#:	9 Loan Amount (\$) \$166.00	
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 13543 North Tracewood Bend  Houston, TX 77077	10 Interest Rate	
		11 Maturity Date 11/06/2018	
12 Principal occupation / Job title (See Instructions) Attorney		13 Employer (See Instructions) Self-Employed	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	

# 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  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 10/15		2 FILER NAME Wallenstein, Josh		3 Filer ID
4 Date 09/17/2017		5 Payee name ActBlue		
6 Amount (\$) \$19.76		7 Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Processing Svcs
9 Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 09/24/2017		Payee name ActBlue		
Amount (\$) \$0.79		Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Processing Svcs
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name Office sought Office held				
Date 11/05/2017		Payee name ActBlue		
Amount (\$) \$3.95		Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Processing Svcs
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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/4 Rpt: 11/15	<b>2</b> FILER NAME Wallenstein, Josh	<b>3</b> Filer ID
<b>4</b> Date 11/12/2017	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$0.99	<b>7</b> Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Processing Svcs
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
Date 12/31/2017	Candidate/Officeholder name Office sought Office held	
Payee name ActBlue		
Amount (\$) \$9.88	Payee address; City; State; Zip Code PO Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CC Processing Svcs
Complete ONLY if direct expenditure to benefit C/OH		
Date 10/25/2017	Candidate/Officeholder name Office sought Office held	
Payee name ConstantContact.com		
Amount (\$) \$234.62	Payee address; City; State; Zip Code 1601 Trapelo Rd 3rd FL Waltham, MA 02451	
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 Voter Outreach
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  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/4 Rpt: 12/15		<b>2</b> FILER NAME Wallenstein, Josh		<b>3</b> Filer ID	
<b>4</b> Date 12/26/2017		<b>5</b> Payee name Domestic Mgmt Svcs			
<b>6</b> Amount (\$) \$250.00		<b>7</b> Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004			
<b>8</b> 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 Compliance Audit	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
<b>Date</b> 10/18/2017		<b>Payee name</b> Fiesta en Guadalajara			
<b>Amount (\$)</b> \$9.31		<b>Payee address; City; State; Zip Code</b> 3522 Irvington  Houston, TX 77009			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meeting	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
<b>Date</b> 11/15/2017		<b>Payee name</b> Harris Co Dem Party			
<b>Amount (\$)</b> \$750.00		<b>Payee address; City; State; Zip Code</b> 1445 N Loop W Ste 110 Houston, TX 77008			
<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 Campaign Filing Fee	
Complete <b>ONLY</b> 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  
Credit Card Payment

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

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

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

The instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 13/15		2 FILER NAME Wallenstein, Josh		3 Filer ID	
4 Date 09/13/2017		5 Payee name Monarch Printing Co, Inc.			
6 Amount (\$) \$211.08		7 Payee address; City; State; Zip Code 6605 McGrew  Houston, TX 77087			
8 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 Campaign Materials	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/28/2017		Payee name NameTagCountry.com			
Amount (\$) \$20.80		Payee address; City; State; Zip Code PO Box 15068  Chattanooga, TN 37415			
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 Campaign Materials	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/2 Rpt: 14/15		<b>2</b> FILER NAME Wallenstein, Josh		<b>3</b> Filer ID
<b>4</b> Date 12/31/2017		<b>5</b> Payee name Shell		
<b>6</b> Amount (\$) \$25.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address; City; State; Zip Code 11414 Richmond Ave Houston, TX 77077		
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Fuel
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/15/2017		Payee name Shell		
Amount (\$) \$50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 11414 Richmond Ave Houston, TX 77077		
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 11/30/2017		Payee name Shell		
Amount (\$) \$50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 11414 Richmond Ave Houston, TX 77077		
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule 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 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 11414 Richmond Ave Houston, TX 77077		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Fuel
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/31/2017		Payee name Shell		
Amount (\$) \$50.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 11414 Richmond Ave Houston, TX 77077		
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fuel
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 12/20/2017		Payee name Underbelly		
Amount (\$) \$15.12 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1100 Westheimer Rd Houston, TX 77006		RECORDER'S MEMORANDUM: At the time of recording, the instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		





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