

Official Public Records of Harris County Stan Stanart County Clerk

Campaign Finance Report



Stan Stanart

COUNTY CLERK
HARRIS COUNTY, TEXAS

FileNo:

201742

**Received By Clerk:** 

1/17/2017

File Date:

1/17/2017 10:41:41 AM

Office:

Justice Of The Peace Pct. 3, Place 2

Candidate:

Coffey, Don

Treasurer:

, Jenice

Category:

**Contributions And Expenditures** 

**Delivered By:** 

Personal Appearance

Type:

COR

**Harris County No Fee** 

### CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

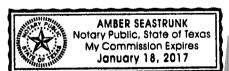
### FORM C/OH COVER SHEET PG 1

		•	OOVER OHEEL TO
The C/OH Instruction Guir	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE# 1 of 49
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Don  NICKNAME LAST	MI	OFFICE USE ONLY Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	Coffey  ADDRESS / PO BOX: APT / SUITE #;  P.O. Box 37 Baytown, TX 77522	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked
			Receipt # Amount
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST  Mrs. Jenice		Date Processed  Date Imaged
	NICKNAME LAST Coffey	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	P. O. Box 37 Baytown, TX 77522	T / SUITE #; CITY: STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (281) 798-5343	EXTENSION	
8 REPORT TYPE	X January 15 30th day before	e election Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 Sth day before	election Exceeded \$500 limit	Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year	Month Day THROUGH 12/31/20	Year 16
10 ELECTION	Manufic Days Vers   F	ION TYPE Primary Runoff	General Special
11 OFFICE	OFFICE HELD (if any)  Justice of Peace 3-2	12 OFFICE SOUGHT (if known	
	GO	TO PAGE 2	,

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

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

13 C/OH NAME Coffe	y, Don (Mr.)		14 ACCOUNT # 00000001	(Ethics Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the out the candidate's or officeholder's knowledge or consent. Candidate y receive notice of such expenditures		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	•	
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	2,312.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	50,125.00
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	\$	0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$	26,323.42
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	64,906.00
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THAY OF THE REPORTING PERIOD	HE \$	0.00
17 AFFIDAVIT				
		I swear, or affirm, under pena	alty of perjury, that the	e accompanying report



is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said

this the

to certify which, witness my hand and seal of office

Print name of officer administering oath

Title of officer administering oath

OTHER	OTHER THAN PLEDGES OR LOANS					
The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 1/4	11 Report: 3/49		
2 FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4 Date	5 Full name of contributor  ut-of-state PAC (ID: Abshire, Adelina		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
10/03/2016	6 Contributor address; City; State; Zip Code 2901 Sens Road La Porte, TX 77572-1704		\$100.00	 		
			(if travel outside of	Texas, complete Schedule T)		
9 Principal occup	eation / Job title (See Instructions)	10 Employer (See In:	structions)			
Date	Full name of contributor  out-of-state PAC (ID# Amaro, Hugo	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
10/03/2016	Contributor address; City; State; Zip Code 201 West Wye Drive Baytown, TX 77521		\$155.00	 		
			(if travel outside of	Texas, complete Schedule T)		
Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/27/2016	Contributor address; City; State; Zip Code 5106 Bayou Blvd. Baytown, TX 77521		\$500.00	 		
	,,		(if travel outside of	Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	<b>;</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/26/2016	Contributor address; City; State; Zip Code PO Box 570 Baytown, TX 77522		\$500.00	Texas, complete Schedule T)		
Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/15/2016	Contributor address; City; State; Zip Code 1700 Clinton Drive Galena Park, TX 77547	• • • • • • • • • • • • • • • • • • • •	\$100.00	! ! !		
D.J.				Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			

OTHER	THAN PLEDGES OR LOAN	NS .		
The Instructi	ON GUIDE explains how to complete this form.	1 PAG	E# edule: 2/41	Report: 4/49
2 FILER NAME	Coffey, Don (Mr.)	3 ACC		thics Commission filers)
4 Date	5 Full name of contributor  ut-of-state PAC (ID# Arthur, Steele (Mr.)	7 Amo	ount of   8 oution (\$)	In-kind contribution description (if applicable)
10/11/2016	6 Contributor address; City; State; Zip Code 9707 El Chaco Street Baytown, TX 77521		100.00     	
		(if travel	outside of Tex	as, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See Instructions	)	
Date	Full name of contributor		ount of   oution (\$)	In-kind contribution description (if applicable)
09/27/2016	Contributor address; City; State; Zip Code 4201 Garth Road Baytown, TX 77521		\$100.00   	
		· .	/////	as, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	.)	UIT
Date	Full name of contributor Autoarch Architects, LLC	Am	ount of   oution (\$)	In-kind contribution description (if applicable)
09/19/2016	Contributor address; City; State; Zip Code 6200 Savoy Suite No. 100 Houston, TX 77036		\$500.00   	
				as, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	·)	
Date	Full name of contributor  ut-of-state PAC (ID# Bailey, Larry		ount of   oution (\$)	In-kind contribution description (if applicable)
09/21/2016	Contributor address; City; State; Zip Code 621 Schilling Baytown, TX 77520		\$100.00 <mark> </mark> 	
		(If trave	l outside of Tex	as, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor		ount of   bution (\$)	In-kind contribution description (if applicable).
10/28/2016	Contributor address; City; State; Zip Code 3205 N Main Baytown, TX 77521		\$100.00     	
		(If trave	i outside of Tex	as, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)	·
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	OTHER	THAN PLEDG	ES OR LOAI	40		
	The Instruction	N Guide explains how to corr	plete this form.		1 PAGE# Schedule: 3/4	41 Report: 5/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Ballard, Johnny (Mr.)	out-of-state PAC (ID#	<u>;                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/11/2016	6 Contributor address; 14354 Wallisville Houston, TX 77049	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Bartz, Carol	out-of-state PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/05/2016	Contributor address; 1705 East Texas Avenue Baytown, TX 77520-7439	City; State; Zip Code		\$100.00	   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	· . · . · . · . · . · . · . · . ·
	Date	Full name of contributor Baughman, Bruce	out-of-state PAC (ID		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/12/2016	Contributor address; 1109 W Baker Baytown, TX 77521	City; State; Zip Code	<b>U</b> )	\$100.00	†  - 
					·	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Bent, Roy	☐ out-of-state PAC (ID	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/29/2016	Contributor address; 104 West Baker Road Baytown, TX 77521	City; State; Zip Code		\$550.00	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	L	Texas, complete scripture 1)
	Date	Full name of contributor Blomstrom, Karen	out-of-state PAC (IDa	<b>*</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 510 Church Crosby, TX 77532	City; State; Zip Code		\$100.00	 
		,,			lif traval autable -4	Toyan complete Schools T
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	<u>L </u>	Texas, complete Schedule T)
		•			•	

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	The INSTRUCTIO	N Guide explains how to con	nplete this form.		1 PAGE # Schedule: 4/4	41 Report: 6/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Bluitt, Jerry	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/21/2016	6 Contributor address; PO Box 3003 Crosby, TX 77532	City; State; Zip Code		\$100.00	 
					(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Bluitt, Jerry	out-of-state PAC (ID	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/21/2016	Contributor address; PO Box 3003 Crosby, TX 77532	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Boothe, David (Mr.)	out-of-state PAC (ID:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/15/2016	Contributor address; 207 W. Archer Road Baytown, TX 77521	City; State; Zlp Code	İ	\$350.00	, 
					(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Boothe, David (Mr.)	out-of-state PAC (IDa	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 207 W. Archer Road Baytown, TX 77521	City; State; Zip Code		\$245.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Bosse, Fred	out-of-state PAC (ID	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/05/2016	Contributor address; 13410 Holly Park Houston, TX 77015	City; State; Zip Code		\$100.00	! ! !
					(if travel outside of	Texas, complete Schedule T)
	Principal occup	l eation / Job title (See Instruction	ns)	Employer (See In		Toxas, complete schedule 1)
		,	,		<b>/</b>	

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 5/4	11 Report: 7/49	
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor  ut-of-state PAC (ID# Brackin, Bill (Mr.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/29/2016	<b>6</b> Contributor address; City; State; Zip Code 320 Highway 146 Bypass Liberty, TX 77575		\$100.00	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See Inc	structions)	<u> </u>	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; City; State; Zip Code 2201 Center Deer Park, TX 77536		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Briles, Raymond (Mr.)		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/19/2016	Contributor address; City; State; Zip Code 1006 W. Sterling St. Baytown, TX 77520-4201	<b></b>	\$300.00	  -  -	
	Dringing!	otion / Joh titlo (Soo leatered and	Employer (Co. )	1 . <u>'</u>	Texas, complete Schedule T)	
	enncipal occup	eation / Job title (See Instructions)	Employer (See In	istructions)		
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; City; State; Zip Code 2000 Plantation Drive Friendswood, TX 77546-8905		\$125.00	!   	
	Delmain		Employee (Oct.)	<u> L'</u>	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	nstructions)		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/30/2016	Contributor address; City; State; Zip Code 5130 Cotton Lake Drive Cove, TX 77523-9426		\$100.00	 	
<u> </u>	D-11	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		<del></del>	Texas, complete Schedule T)	
	Huncibal occut	pation / Job title (See Instructions)	Employer (See in	nstructions)		

	The INSTRUCTION	on Guide explains how to complete this form.		1 PAGE# Schedule: 6/4	11 Report: 8/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor  ut-of-state PAC (ID# Broussard, Wilfred	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/07/2016	6 Contributor address; City; State; Zip Code 11811 E Freeway Houston, TX 77029		\$100.00	Town complete Oaks data To C
Ļ	Dringing ones	otion / Joh title (Con Instructions)	40 5		Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID# Brown, Dennis (Mr.)	*	Amount of contribution (\$)	in-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip Code 509 Dwinnell St Baytown, TX 77520		\$125.00	<b> </b> 
				<u> </u>	Texas, complete Schedule T)
L	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/20/2016	Contributor address; City; State; Zip Code 6427 E. Wallisville Rd. Baytown, TX 77521	<b>)</b>	\$100.00	; 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/18/2016	Contributor address; City; State; Zip Code 3718 Decker Drive Baytown, TX 77520	• • • • • • • • • • • • • • • • • • • •	\$500.00	 
				<u> 1 -                                  </u>	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/04/2016	Contributor address; City; State; Zip Code P. O. Box 1499 Mont Belvieu, TX 77580		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	nation / Job title (See Instructions)	Employer (See In		

P.O.Box 12070

			19		
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/4	41 Report: 9/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Campana, Ron (Mr.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/27/2016	6 Contributor address; City; State; Zip Code 807 Nashua Houston, TX 77008		\$200.00	 
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	<u> </u>	<del></del>
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	in-kind contribution description (if applicable)
	09/29/2016	Contributor address; City; State; Zip Code 1301 Telephone Rd Houston, TX 77023		\$100.00	 
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/22/2016	Contributor address; City; State; Zip Code 4808 East Freeway Baytown, TX 77521		\$100.00	 
<u> </u>	Principal occur	ation / Job title (See Instructions)	Employer (See In	1. '	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID:	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/06/2016	Contributor address; City; State; Zip Code PO Box 958 Baytown, TX 77522		\$100.00	   
				1 .	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Chambers, Gilbert	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/19/2016	Contributor address; City; State; Zip Code 4317 Country Club View Baytown, TX 77521		\$130.00	!   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
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	The Instruction	ON GUIDE explains how to con	nplete this form.		1 PAGE# Schedule: 8/4	11 Report: 10/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Chatham, Michael (Mr.)	□ out-of-state PAC (ID	*	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/13/2016	6 Contributor address; 1617 Cedar Bayou Road Baytown, TX 77520	City; State; Zip Code		\$100.00	 
						Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructio	ns)	10 Employer (See In	nstructions)	
	Date	Full name of contributor Clausen, Mike	out-of-state PAC (ID	#	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/21/2016	Contributor address; 10431 Carlow Lane	City; State; Zip Code		\$100.00	 
		La Porte, TX 77572			(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See Ir	nstructions)	
	Date	Full name of contributor Conley, Lisa	□ out-of-state PAC (ID:	*	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/14/2016	Contributor address; 11815 Oakner Drive Tomball, TX 77377-7943	City; State; Zip Code	)	\$100.00	 
_	Principal occur	 pation / Job title (See Instructio	ne)	Employer (See Ir	<u> </u>	Texas, complete Schedule T)
	· moper cood,		,,,,	Employer (Gee II	isti dellorio)	
	Date	Full name of contributor Cooper, Fern	out-of-state PAC (ID	<u>*</u>	Amount of contribution (\$)	In-kind contribution description (If applicable)
	09/17/2016	Contributor address; 2304 French Place Baytown, TX 77520	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See Ir	nstructions)	
	Date	Full name of contributor Corbin, Tommy	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/08/2016	Contributor address; PO Box 826 Channelview, TX 77530	City; State; Zip Code		\$160.00	!   
					(If travel outside of	Texas, complete Schedule T)
	Principal occuj	pation / Job title (See Instruction	ns)	Employer (See Ir	nstructions)	
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P.O.Box 12070

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	N Guide explains how to com	nplete this form.		1 PAGE# Schedule: 9/4	41 Report: 11/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor Corrigan, Daniel	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/04/2016	6 Contributor address; 201 Pecore Street Houston, TX 77009-5415	City; State; Zip Code		\$200.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In:	structions)	
	Date	Full name of contributor Dagley, Ryan	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2016	Contributor address; 3834 Madison Ave Baytown, TX 77523	City; State; Zip Code		\$200.00	! 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In		Total of the second of the sec
	Date	Full name of contributor Daniele, Steven (Mr.)	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 6201 Bayway Dr Baytown, TX 77520	City; State; Zip Code		\$100.00	! 
L					·	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Daspit, David (Mr.)	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/13/2016	Contributor address; 1118 Milford Houston, TX 77006	City; State; Zip Code		\$100.00	 
					fif travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In		Total, composit conductor,
	Date	Full name of contributor	ut-of-state PAC (ID#		Amount of	In-kind contribution
		Davidson, Vaughn			contribution (\$)	description (if applicable)
	09/14/2016	Contributor address; 5223 Garth Road Baytown, TX 77521	City; State; Zip Code	50	\$100.00	   
Г	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In		, , ,
					r	

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 10	/41 Report: 12/49	
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Davis, J. (Mr.)	· · · · · · ·	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/28/2016	6 Contributor address; City; State; Zip Code 1213 Ashland Blvd Channelview, TX 77530-2613		\$500.00	 	
				(if travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	08/31/2016	Contributor address; City; State; Zip Code 717 Cedar Bayou Road	•••••	\$100.00		
L		Baytown, TX 77520-2985			Texes, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/20/2016	Contributor address; City; State; Zip Code P. O. Box 299 Baytown, TX 77522		\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	·		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/14/2016	Contributor address; City; State; Zip Code 3904 Allenbrook Drive Baytown, TX 77521		\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Dever, Pete (Mr.)	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/14/2016	Contributor address; City; State; Zip Code P. O. Box 400 Channelview, TX 77530		\$100.00	!   	
				(if travel outside of	Texas, complete Schedule T)	
H	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>		
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	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 11/	/41 Report: 13/49	
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Dominy, Jerry (Mr.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/02/2016	6 Contributor address; City; State; Zip Code 855 Uvalde Suite D Houston, TX 77015		\$100.00	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; City; State; Zip Code 3520 Hwy 90 Liberty, TX 77575		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID) Eagleton, Sherman		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/23/2016	Contributor address; City; State; Zip Code P. O. Box 1723 Baytown, TX 77522		\$100.00		
	Diam'r at	- ( A - L 100 - O - L 1 - D - L 1		1 -	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/27/2016	Contributor address; City; State; Zip Code 4701 I-10 East Baytown, TX 77521		\$125.00	!   	
L				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<b>*</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/21/2016	Contributor address; City; State; Zip Code 4721 Garth Road Suite H		\$100.00	 	
		Baytown, TX 77521-2153			' —	
<u> </u>	Dringing age	nation / Job title (Con Instructions)	Empleyer (Co. 1)	<u> </u>	Texas, complete Schedule T)	
	Filicipal occup	pation / Job title (See Instructions)	Employer (See Ir	isuucuons)		

	The Instruction	N Guide explains how to com	piete this form.		1 PAGE#			
					Schedule: 12	/41 Report: 14/49		
2	FILER NAME	Coffey, Don (Mr.)	·		3 ACCOUNT#	(Ethics Commission filers)		
					00000001			
4	Date	<b>5</b> Full name of contributor Fallin, Richard	out-of-state PAC (ID	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/26/2016	6 Contributor address; 17106 Faring Road Houston, TX 77049	City; State; Zip Code		\$100.00	1 		
					(if travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In		· · · · · · · · · · · · · · · · · · ·		
			Bosses					
	Date	Full name of contributor Fayle, Victoria	out-of-state PAC (ID)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/03/2016	Contributor address; 1224 Kilgore Baytown, TX 77520	City; State; Zip Code		\$200.00	   		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Ferris, Jim (Mr.)	out-of-state PAC (ID:	<b>"</b> ————————————————————————————————————	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/03/2016	Contributor address; 600 South Main Street Baytown, TX 77520	City; State; Zip Code		\$33.00	   		
				2000000		Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Floyd, J. J.	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/26/2016	Contributor address; 4404 Allenbrook Drive Baytown, TX 77521	City; State; Zip Code		\$200.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Fontenot, Daryl (Mr.)	out-of-state PAC (ID	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/07/2016	Contributor address; 5207 E. Wallisville Baytown, TX 77521	City; State; Zip Code		\$100.00	! 		
					(if travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)			
l								

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/41 Report: 15/49			
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Fontenot, Daryl (Mr.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/03/2016	6 Contributor address; 5207 E. Wallisville Baytown, TX 77521		\$150.00	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See in		Texas, complete scriedure 1)		
	Date	Full name of contributor  ut-of-state PAC (ID)  Forrest, Harland	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/12/2016	Contributor address; City; State; Zlp Code 9606 Garth Road Baytown, TX 77521		\$650.00	   		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID: Franklin, Wendell (Mr.)	*	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/22/2016	Contributor address; City; State; Zip Code 903 W. Archer Road Baytown, TX 77521		\$100.00	! ! !		
	BUILDING		E	<u> </u>	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/15/2016	Contributor address; City; State; Zip Code P. O. Box 327 Highlands, TX 77562		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir	structions)			
	Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/30/2016	Contributor address; City; State; Zip Code 11906 Wind Cove Place Court Humble, TX 77346		\$600.00	] 		
L	Partie de la company		F1 2		Texas, complete Schedule T)		
	Principal occuj	pation / Job title (See Instructions)	Employer (See In	ISTRUCTIONS)			

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	The Instruction	N GUIDE explains how to com	plete this form.		1 PAGE # Schedule: 14	/41 Report: 16/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Frazier, David (Mr.)	out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/07/2016	6 Contributor address; 4365 Pebble Beach Drive Beaumont, TX 77707	City; State; Zip Code		\$100.00	 
					. •	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Fuller, Roy (Mr.)	□ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/19/2016	Contributor address; 1300 Rollingbrook Dr Ste 608	City; State; Zip Code		\$100.00	 
		Baytown, TX 77521			<u></u>	! Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Gallagher, Brian	□ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution   description (if applicable)
	10/03/2016	Contributor address; 1703 N. Wayside Houston, TX 77020	City; State; Zip Code		\$400.00	1 1 1 · ·
					<u> </u>	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Garcia, Gloria (Mrs.)	out-of-state PAC (ID#	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/04/2016	Contributor address; 501 Avenue of Oaks Houston, TX 77009	City; State; Zip Code		\$150.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instruction	ns)	Employer (See In	estructions)	
	Date	Full name of contributor Garcia, Sylvia	out-of-state PAC (IDa	F	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2016	Contributor address; P. O. Box 8530 Houston, TX 77249-8530	City; State; Zip Code		\$100.00	! !
<u> </u>	Dringing!	ation / Job title (See Instructio	nel	Employer (See Ir	<del>  `</del>	f Texas, complete Schedule T)
	r inicipal occup	PERMITS TOO TIME (SEE MISHACIIO	110)	Embloset (288 II.	iou ucuUHS)	

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	The Instruction	พ Guide explains how to com	nplete this form.		1 PAGE# Schedule: 15/	/41 Report: 17/49		
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	<b>5</b> Full name of contributor Gayle, Rosalyn (Ms.)	out-of-state PAC (ID)	·	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/29/2016	6 Contributor address; 1674 W. Baker Road Suite A Baytown, TX 77521	City; State; Zip Code		\$100.00			
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In:	structions)			
	Date	Full name of contributor Gibson, Les (Mr.)	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/08/2016	Contributor address; 1302 N. Pruett Street	City; State; Zip Code		\$100.00	 		
	:	Baytown, TX 77520			(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See instruction	ns)	Employer (See In	structions)			
	-	·			ŕ			
	Date	Full name of contributor Gray, Eddie	out-of-state PAC (ID:	,	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/28/2016	Contributor address; P. O. Box 638 Baytown, TX 77522	City; State; Zip Code		\$100.00	       Texas, complete Schedule T)		
	Principal occur	eation / Job title (See Instruction	ns)	Employer (See In		Texas, complete scriedate ()		
	Date	Full name of contributor GreBNESOR I LLC	☐ out-of-state PAC (ID	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/22/2016	Contributor address; 4601 Garth Road Suite 101 Baytown, TX 77521-2418	City; State; Zip Code		<b>\$100.00</b> .	 		
				T = : : ::	<u> </u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructio	ns)	Employer (See In	structions)			
	Date	Full name of contributor Green, Gene (Mr.)	out-of-state PAC (ID	#	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/02/2016	Contributor address; P. O. Box 16128	City; State; Zip Code		\$100.00	! !		
		Houston, TX 77222				I		
_	D.J. da b					Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See In	structions)			

Texas Ethics Commission

Electronic Filling Version 3.4.5

# POLITICAL CONTRIBUTIONS

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	N Guide explains how to con	nplete this form.		1 PAGE # Schedule: 16	i/41 Report: 18/49	
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	<b>5</b> Full name of contributor Haddox, Ronald (Mr.)	out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/15/2016	6 Contributor address; 1215 N. Pruett St. Baytown, TX 77520	City; State; Zip Code		\$500.00	1 	
						Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)		
	Date	Full name of contributor Harpword LLC	out-of-state PAC (IDa		Amount of contribution (\$)	In-kind contribution description (If applicable)	
	09/26/2016	Contributor address; 623 West Texas Avenue Baytown, TX 77520	City; State; Zip Code		\$100.00	! ! !	
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	L.	Texas, complete Schedule T)	
	Employer (See instructions)						
	Date	Full name of contributor Harris, Tim	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; 201 South Post Oak Morgans Point, TX 77571	City; State; Zip Code		\$1,455.00	 	
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In		Texas, complete Schedule T)	
	Date	Full name of contributor Hawkins, Mark (Mr.)	out-of-state PAC (ID		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/30/2016	Contributor address; 2615 Grace Lane Highlands, TX 77562	City; State; Zip Code		\$100.00	  -  -	
-	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In		Texas, complete Schedule T)	
					·		
	Date	Full name of contributor Hays, Patsy	out-of-state PAC (ID	-	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/14/2016	Contributor address; 720 Sheldon Road Channelview, TX 77530	City; State; Zip Code		\$100.00	1       Texas, complete Schedule T)	
Γ	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)		

Texas Ethics Commission

P.O.Box 12070

Austin, Texas 78711-2070 (512)463-5800

TDD 1-800-735-2989

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 17/	/41 Report: 19/49		
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hazel, Reese (Mr.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/29/2016	6 Contributor address; City; State; Zip Code 3021 N. Main Street Baytown, TX 77521-4107		\$100.00	      Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Heinlein, Donna (Ms.)	<del>;</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/13/2016	Contributor address; City; State; Zip Code P. O. Box 1446 Crosby, TX 77532		\$100.00	I I		
					Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/22/2016	Contributor address; City; State; Zip Code 3118 Ronnie Drive Baytown, TX 77523		\$100.00	 		
匚					Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/03/2016	Contributor address; City; State; Zip Code 1233 Mercury Drive Houston, TX 77029		\$150.00	   		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/06/2016	Contributor address; City; State; Zip Code 14329 Alderson St. Houston, TX 77015		\$100.00	 		
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$\vdash$	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
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	The Instruction	N Guide explains how to con	nplete this form.		1 PAGE# Schedule: 18/	/41 Report: 20/49	
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	<b>5</b> Full name of contributor Holloway, Trent	out-of-state PAC (ID#	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/10/2016	6 Contributor address; 6110 Rapid Creek Court Kingwood, TX 77345	City; State; Zip Code		\$100.00		
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)		
	Date	Full name of contributor Homan, Robbin (Mr.)	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2016	Contributor address; 12711 Mystery Lane Baytown, TX 77523	City; State; Zip Code		\$100.00		
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructio	ns)	Employer (See In	structions)		
	Date	Full name of contributor Hoover Slovacek LLP	□ out-of-state PAC (ID#	<b>,</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/14/2016	Contributor address; P. O. Box 4547 Houston, TX 77210-4547	City; State; Zip Code		\$500.00		
L	District				<u> </u>	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructio		Employer (See In	structions)		
	Date	Full name of contributor Hoskins, Bob (Mr.)	□ out-of-state PAC (ID#	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/16/2016	Contributor address; 3701 Del Oro Baytown, TX 77521	City; State; Zip Code		\$100.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See Ir	structions)		
	Date	Full name of contributor Hotchkiss, Ronald (Mr.)	Out-of-state PAC (ID		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/22/2016	Contributor address; 3803 Del Oro Baytown, TX 77521	City; State; Zip Code	7	<u> </u>	i         Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	nstructions)		

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	The Instruction	on Guide explains how to com	plete this form.		1 PAGE#	444 Daniel 04/40		
2	FILER NAME	Coffey, Don (Mr.)	······································		3 ACCOUNT # 00000001	/41 Report: 21/49 (Ethics Commission filers)		
4	Date	5 Full name of contributor Hotchkiss, Ronald	out-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	10/03/2016	6 Contributor address; 3803 Del Oro Baytown, TX 77521	City; State; Zip Code		\$700.00	   		
					(if travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)			
	Date	Full name of contributor Houston Apartment Assoc	out-of-state PAC (ID# ciation	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/16/2016	Contributor address; 4810 Westway Park Blvd. Houston, TX 77041	City; State; Zip Code		\$500.00	 		
					(if travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Hughes, Bobby (Mr.)	out-of-state PAC (ID		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/14/2016	Contributor address; 1300 E. James Street #1	City; State; Zip Code		\$100.00	! [ 		
		Baytown, TX 77520			(If traval outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In		Texas, complete schedule ()		
	Date	Full name of contributor Hutto, Rhonda	☐ out-of-state PAC (ID#	<u></u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/29/2016	Contributor address; 6956 Garth Road Baytown, TX 77521	City; State; Zip Code		\$100.00			
					(if travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Hutto, Richard (Mr.)	out-of-state PAC (ID	*	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/03/2016	Contributor address; 6956 Garth Road Baytown, TX 77521	City; State; Zip Code		\$160.00	1   		
					(if travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)			

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	The Instruction	N Guide explains how to com	nplete this form.		1 PAGE# Schedule: 20	)/41 Report: 22/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor I.L.A. Local 28	out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/08/2016	6 Contributor address; 213 E. Shaw Ave. Pasadena, TX 77506	City; State; Zip Code		\$600.00	 
					(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor IBarra, Roland	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/30/2016	Contributor address; 7529 Bayway Drive Baytown, TX 77520	City; State; Zip Code		\$500.00	 
					<u> Lii</u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor IBEW #716	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/07/2016	Contributor address; 900 Seventh Street, N.W. Washington, DC 20001	City; State; Zip Code		\$600.00	[ 
					(if travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor IBEW #716	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/09/2016	Contributor address; 900 Seventh Street, N.W. Washington, DC 20001	City; State; Zip Code		\$600.00	 
_						f Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See Ir	estructions)	
	Date	Full name of contributor International Union of Ope	out-of-state PAC (ID# erating Engineers		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/06/2016	Contributor address; 8441 Gulf Freeway Suite 302	City; State; Zip Code		\$600.00	1 ] !
		Houston, TX 77017			ilf traval autolds -	f Texas, complete Schedule T)
$\vdash$	Principal occur	Loation / Job title (See Instructio	ns)	Employer (See Ir	<u> </u>	Tokas, complete schedule (/
					<b>-</b>	

_	The Instruction	N GUIDE explains how to complete this form.			1 PAGE# Schedule: 21/	/41 Report: 23/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC Jackson, Daniel (Mr.)	C (1D#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/16/2016	6 Contributor address; City; State; Zip C 400 Garth Road Suite 150 Baytown, TX 77521	ode		\$100.00   	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See Ins	structions)	
7	Date	Full name of contributor	C (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/22/2016	Contributor address; City; State; Zip C 3218 Minnesota Baytown, TX 77520	ode		\$115.00	
					•	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor	C (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip C 4803 Mill Creek Baytown, TX 77521	Code		\$110.00	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor	C (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/07/2016	Contributor address; City; State; Zip C 3 Thunderbird Circle Baytown, TX 77521	Code		\$500.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor	C (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip C 2978 Rising Tide Lane League City, TX 77573	Code		\$400.00	1   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)		Employer (See In	<u> </u>	· · · · · · · · · · · · · · · · · · ·

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	N Guide explains how to com	plete this form.		1 PAGE# Schedule: 22	/41 Report: 24/49	
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	<b>5</b> Full name of contributor Judge, Dwight (Mr.)	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/14/2016	6 Contributor address; 34 Reuben White Drive Crosby, TX 77532	City; State; Zip Code		\$100.00	!   	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)		
	Date	Full name of contributor Keeler, John	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; 3925 Southwestern Street Houston, TX 77005	City; State, Zip Code		\$100.00	 	
					(if travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See in	structions)		
	Date	Full name of contributor Kesler, Rex	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/13/2016	Contributor address; 2311 Canal Street Houston, TX 77003	City; State; Zip Code		\$250.00	 	
<u> </u>	Principal occur	 pation / Job title (See Instruction	20)	Employer (See In	<u> </u>	Texas, complete Schedule T)	
	rilliapai occu	varion / 300 title (See Histriction			structions)		
	Date	Full name of contributor Kubosh, Paul	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/11/2016	Contributor address; 1619 Lubbock Houston, TX 77007	City; State; Zip Code		\$100.00	<b>!</b>	
		,			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)		
	Date	Full name of contributor Lan-PAC	out-of-state PAC (IDa		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/19/2016	Contributor address; 2925 Briarpark Drive Fourth Floor Houston, TX 77042	City; State; Zip Code	1	<u> </u>	       Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)		

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 23	/41 Report: 25/49		
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Larrabee, Charles (Mr.)		7 Amount of contribution (\$)	8		
	10/17/2016	6 Contributor address; City; State; Zip Code 5517 East Road Baytown, TX 77521		\$200.00	 		
				(if travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/22/2016	Contributor address; City; State; Zip Code 3311 Richmond Avenue Suite 305 Houston, TX 77098		\$600.00	!   		
		110051011, 12 77000		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Law Offices of Robert W. Eutsler		Amount of contribution (\$)	In-kind contribution description (If applicable)		
	09/12/2016	Contributor address; City; State; Zip Code 9219 Katy Freeway Suite 220 Houston, TX 77024-1514		\$100.00	;   		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/02/2016	Contributor address; City; State; Zip Code 400 Garth Road Suite 150 Baytown, TX 77521		\$100.00	 		
					Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/12/2016	Contributor address; City; State; Zip Code P. O. Box 17428 Austin, TX 78760		\$500.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 37	/41 Report: 39/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	6 Full name of contributor ☐ out-of-state PAC (ID: The Linebaugh Law Firm	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/19/2016	6 Contributor address; City; State; Zip Code 13 Rollingbrook Sulte 601 Baytown, TX 77521		\$820.00	 
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See Ins	`	rozao, compiete acheunie ()
Ĺ					
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/08/2016	Contributor address; City; State; Zip Code 1300 Rollingbrook Suite 610 Baytown, TX 77521		\$205.00	1   
L				(if travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2016	Contributor address; City; State; Zip Code 4517 Briarbend Dr. Houston, TX 77035		\$100.00	 
L	Data also also also a			<u> </u>	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip Code 1300 Rollingbrook Drive Sulte 410 Baytown, TX 77521		\$325.00	;   
		Daytowii, 17/1/321		(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	Principal occup				In-kind contribution description (if applicable)
		pation / Job title (See instructions)  Full name of contributor	)	Amount of contribution (\$)	L In-kind contribution

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	The Instruction	on Guide explains how to com	nplete this form.		1 PAGE# Schedule: 24	/41 Report: 26/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Matthies, Elaine (Mrs.)	out-of-state PAC (ID#	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/03/2016	6 Contributor address; 1723 Country Club Cove Driv Baytown, TX 77521	City; State; Zip Code		\$105.00	 
		:			(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In:	structions)	
	Date	Full name of contributor Mayo, Pi Yi	out-of-state PAC (IDa	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 5223 Garth Road Baytown, TX 77521	City; State; Zip Code		\$195.00	1 
					<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor McClosky, Frank (Mr.)	out-of-state PAC (ID		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2016	Contributor address; 3003 North Main Baytown, TX 77521	City; State; Zip Code		\$560.00	 
	Oring!1	otlan / Jah Mila (O			<u> </u>	Texas, complete Schedule T)
	rnncipal occup	pation / Job title (See Instruction		Employer (See In	structions)	
	Date	Full name of contributor McClosky, Frank (Mr.)	☐ out-of-state PAC (ID	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 3003 North Main	City; State; Zip Code		\$490.00	1 
		Baytown, TX 77521			(If travel outside of	·       Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor McCoy, L.	out-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2016	Contributor address; 313 Highway 146 Baytown, TX 77520	City; State; Zip Code		\$145.00	
	Principal occup	I pation / Job title (See Instruction	ns)	Employer (See In	<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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	The Instruction	พ Guide explains how to com	plete this form.		1 PAGE# Schedule: 25	5/41 Report: 27/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor McKay, LaNelle (Mrs.)	out-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/03/2016	6 Contributor address; 1000 Massey Tompkins Baytown, TX 77521	City; State; Zip Code		\$100.00	 
					(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	is)	10 Employer (See In	structions)	
	Date	Full name of contributor McVay, Randall	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 9955 FM 2354 Baytown, TX 77523	City; State; Zip Code		\$200.00	
					(If travel outside o	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	18)	Employer (See In	structions)	
	Date	Full name of contributor Mes, Rudolf	out-of-state PAC (ID)		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2016	Contributor address; 1205 Butler Road League City, TX 77573-4873	City; State; Zip Code	***************************************	\$600.00	 
					(if travel outside o	f Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	1 .	
	Date	Full name of contributor Miller, Eddie (Mr.)	out-of-state PAC (ID#	<b>!</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/18/2016	Contributor address; 12815 Woodforest Houston, TX 77015	City; State; Zip Code		\$100.00	 
					(If travel outside o	f Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	<u> </u>	
	Date	Full name of contributor Milner, Susan	out-of-state PAC (ID	<del> </del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/14/2016	Contributor address; 5615 John Martin Road Baytown, TX 77521	City; State; Zip Code		\$200.00	
					(If travel outside o	f Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instruction	18)	Employer (See In	<u> </u>	· · · · · · · · · · · · · · · · · · ·

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 26	/41 Report: 28/49	
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Moore, Brenda (Ms.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/03/2016	6 Contributor address; City; State; Zip Code 3427 Anchor Cove Richmond, TX 77469		\$630.00		
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Moreno, Casey	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; City; State; Zip Code 4540 Kendrick Plaza Houston, TX 77032		\$500.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Morman, Jim (Mr.)		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/01/2016	Contributor address; City; State; Zip Code 11011 W. Fairmont Pkwy. LaPorte, TX 77571-6001		\$600.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; City; State; Zip Code 11011 W. Fairmont Pkwy. LaPorte, TX 77571-6001		\$1,150.00		
		·		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Morrison, Tommy	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/20/2016	Contributor address; City; State; Zip Code 15608 Brentwood Channelview, TX 77530		\$100.00	 	
				(if traval autolds of	Toyon complete Schodule To	
$\vdash$	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)	
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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 27	/41 Report: 29/49			
2 FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)			
4 Date	5 Full name of contributor ☐ out-of-state PAI Mosqueda, Gabe	C (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
10/03/2016	6 Contributor address; City; State; Zip C 714 Willow Creek Drive La Porte, TX 77571	Code	\$150.00	 			
		•	(if travel outside of	Texas, complete Schedule T)			
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In	nstructions)				
Date	Full name of contributor	C (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/02/2016	Contributor address; City; State; Zip 0 3500 N. Main Street Baytown, TX 77521	Code	\$100.00	 			
			(If travel outside of	Texas, complete Schedule T)			
Principal occup	ation / Job title (See Instructions)	Employer (See In	nstructions)				
Date	Full name of contributor	C (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/28/2016	Contributor address; City; State; Zip ( 15204 Bohemian Hall Road Crosby, TX 77534	Code	\$200.00	 			
Principal occur	pation / Job title (See Instructions)	Employer (See In	<u>. L </u>	Texas, complete Schedule T)			
Date	Full name of contributor	.C (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/26/2016	Contributor address; City; State; Zip ( P. O. Box 7061 Baytown, TX 77522	Code	\$100.00	YOL			
Dringle of a court	Land to the title (Co. Lands et land)			Texas, complete Schedule T)			
Principal occup	pation / Job title (See Instructions)	Employer (See II	nstructions)				
Date	Full name of contributor	C (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
10/03/2016	Contributor address; City; State; Zip ( P. O. Box 7081 Baytown, TX 77522	Code	\$650.00	 			
Diagram			<u> </u>	Texas, complete Schedule T)			
rnncipal occu	pation / Job title (See Instructions)	Employer (See II	nstructions)				

	The Instruction	N Guide explains how to com	plete this form.		1 PAGE# Schedule: 28	/41 Report: 30/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Navarre, Dee Anne	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/03/2016	6 Contributor address; P. O. Box 1705 Baytown, TX 77522	City; State; Zip Code		\$900.00	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	es)	10 Employer (See In	4	
	Date	Full name of contributor Newsome, John (Mr.)	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/14/2016	Contributor address; 2303 Eaves Drive Baytown, TX 77520	City; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	is)	Employer (See In	structions)	
	Date	Full name of contributor Nichols, Wayne (Mr.)	out-of-state PAC (ID#		Amount of contribution (\$)	in-kind contribution description (if applicable)
	10/03/2016	Contributor address; 11502 Lane Street Houston, TX 77029	City; State; Žip Code		\$160.00	
_	Principal occur	eation / Job title (See Instruction	ie) I	Employer (See In		Texas, complete Schedule T)
					ou ucuoris)	
	Date	Full name of contributor Nino, Donald	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/07/2016	Contributor address; 15055 E. Freeway A10 Channelview, TX 77530	City; State; Zip Code		\$100.00	1 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Norris, Linda (Mr.)	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2016	Contributor address; 14014 Woodforest Blvd. Houston, TX 77015-3020	City; State; Zip Code		\$100.00	1 
		<b>y</b>			(if travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	<u> </u>	
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	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 29	/41 Report: 31/49	
2	FILER NAME	Coffey, Don (Mr.)	·	3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDa O'Brien, Randal	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/16/2016	6 Contributor address; City; State; Zip Code 4701 Spring Lane Baytown, TX 77521		\$250.00	! ! !	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	4.00	
	Date	Full name of contributor	<del>!</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/01/2016	Contributor address; City; State; Zip Code 202 Blue Castle Lane Houston, TX 77015		\$100.00	! !	
		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/16/2016	Contributor address; City; State; Zip Code 4001 Garth Road Suite 107 Baytown, TX 77521-3115		\$300.00	 	
L	Dringing age	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	Fillicipal occup	varion / Job title (See instructions)	Employer (See III	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/03/2016	Contributor address; City; State; Zip Code 1235 N. Loop W. #600 Houston, TX 77008		\$200.00	1 	
		Tribusion, 12 77000		(if travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/06/2016	Contributor address; City; State; Zip Code 1301 West 13th Street Suite A Deer Park, TX 77536	•••••	\$1,000.00		
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	1 -	Texas, complete Schedule T)	
	. inisparocou	waller The fine fore mentioners	Employer (Gee III	ou doublib)		

### PAGE ### Schedule: 30/41 Report: 32/49  #### Coffey, Don (Mr.)  ### Coffey, Don (Mr.)	UITER	OTHER THAN PLEDGES OR LOANS						
Principal occupation / Job title (See instructions)   Service   Chip: State: Zip Code   S100.00   S100.0	The INSTRUCTION	N GUIDE explains how to complete this form.			41 Report: 32/49			
Plumbers Local Union No. 68  09/20/20/16  Positive Contributor address: City: State; Zip Code	2 FILER NAME	Coffey, Don (Mr.)			(Ethics Commission filers)			
P. C. Box 8746   Houston, TX 77249-8746	4 Date	•	:					
Principal occupation / Job title (See Instructions)    Date   Full name of contributor   Out-of-state PAC (ID#	09/20/2016	P. O. Box 8746		\$1,000.00   				
Date   Full name of contributor   Out-of-state PAC (ID#   Online				(If travel outside of	Texas, complete Schedule T)			
Ratliff, Gary (Mr.)  O9/15/2016  Oontributor address: Oily: State: Zip Code 8100.00   \$100.00	9 Principal occup	ation / Job title (See Instructions)	10 Employer (See Ins	structions)				
Principal occupation / Job title (See Instructions)   Employer (See Instructions)	Date		:)					
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date  Full name of contributor	09/15/2016	606 Rollingbrook Drive		\$100.00				
Date   Full name of contributor   Contributor   Reed, Dennis (Mr.)   Contribution (S)   C	Deineland		5		Texas, complete Schedule T)			
Reed, Dennis (Mr.)  Contributor address; 7318 Pine Shadows Ln Baytown, TX 77521  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date Full name of contributor Carlot, Strickland & Gillette, L.L.P.  Contributor address; City; State; Zip Code Paytown, TX 77522  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of contribution (\$) In-kind contribution description (if applicable)  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Full name of contributor address; City; State; Zip Code Pincipal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  In-kind contribution description (if applicable)  Amount of contribution (\$) In-kind co	Principal occup	nation / Job title (See Instructions)	Employer (See Ins	structions)				
Principal occupation / Job title (See Instructions)   Employer (See Instructions)	Date							
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date  Full name of contributor	09/01/2016	7318 Pine Shadows Ln		\$100.00				
Date   Full name of contributor   Out-of-state PAC (ID#				(if travel outside of	Texas, complete Schedule T)			
Reid, Strickland & Gillette, L.L.P.  Contributor address; City; State; Zip Code P.O. Box 809 Baytown, TX 77522  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of contribution (§) description (if applicable)  Total Pull name of contributor Contributor Robertson, Peggy  Contributor address; City; State; Zip Code 3915 Roberts Blvd. Baytown, TX 77521  (If travel outside of Texas, complete Schedule T) (If travel outside of Texas, complete Schedule T) (If travel outside of Texas, complete Schedule T)	Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)				
P. O. Box 809 Baytown, TX 77522  (If travel outside of Texas, complete Schedule T)  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date  Full name of contributor Robertson, Peggy  Contributor address; City; State; Zip Code 3915 Roberts Blvd. Baytown, TX 77521  (If travel outside of Texas, complete Schedule T)	Date		<u> </u>		In-kind contribution description (if applicable)			
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date  Full name of contributor Robertson, Peggy  10/06/2016  Contributor address; 3915 Roberts Blvd. Baytown, TX 77521  Employer (See Instructions)  Amount of contribution (\$) description (if applicable)  **Good of Texas, complete Schedule T)	09/26/2016	P. O. Box 809			Texas, complete Schedule T)			
Robertson, Peggy  Contribution (\$) description (if applicable)  Contributor address; City; State; Zip Code 3915 Roberts Blvd. Baytown, TX 77521  (If travel outside of Texas, complete Schedule T)	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u></u>	70,			
3915 Roberts Blvd. Baytown, TX 77521  (If travel outside of Texas, complete Schedule T)	Date	•	<u> </u>					
	10/06/2016	3915 Roberts Blvd.		\$600.00	 			
Principal occupation / Job title (See Instructions)  I Employer (See Instructions)				(If travel outside of	Texas, complete Schedule T)			
Employer (ood manufacture)	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)				

	OTHER THAN PLEDGES OR LOANS					
	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 31	/41 Report: 33/49	
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Robey, Murphy (Mr.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/20/2016	6 Contributor address; City; State; Zip Code 403 W. Sterling St. Baytown, TX 77520-4500		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Rogers, Sharon (Ms.)	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/28/2016	Contributor address; City; State; Zip Code 4515 B Garth Road Baytown, TX 77521		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#Rosenkranz, Jeremy (Mr.)  Contributor address; City; State; Zip Code		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/19/2016	440 South Main Highlands, TX 77562		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/11/2016	Contributor address; City; State; Zip Code 11931 Wickchester Ln Suite 205 Houston, TX 77043		\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See in	structions)		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/11/2016	Contributor address; City; State; Zip Code 815 Walker Suite 250		\$150.00	1 	
		Houston, TX 77002		lif travel outside of	Texas, complete Schedule T)	
$\vdash$	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	TOAGS, COMPINE SCHOOLIS ()	
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The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 32	/41 Report: 34/49			
2 FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT# 00000001	(Ethics Commission filers)			
4 Date	6 Full name of contributor ☐ out-of-state PAC (ID Russell, Mistie	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
09/28/2016	6 Contributor address; City; State; Zip Code 5434 Sjolander Baytown, TX 77521		\$100.00	 			
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In	•	Todas, complete solicated 17			
Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/15/2016	Contributor address; City: State; Zip Code P. O. Box 1273 Baytown, TX 77522		\$100.00	!   			
			(if travel outside of	Texas, complete Schedule T)			
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
Date	Full name of contributor  ut-of-state PAC (ID Sanchez, Elvia	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/16/2016	Contributor address; City; State; Zip Code 112 Live Oak Avenue Baytown, TX 77520		\$300.00	! ! !			
			I. *	Texas, complete Schedule T)			
Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)				
Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/12/2016	Contributor address; City; State; Zip Code 8220 Fisher Rd Baytown, TX 77520		\$100.00	40,			
Principal cour	pation / Job title (See Instructions)	Franksia (Saa Ia	L	Texas, complete Schedule T)			
Frincipal occup	audi / Jub title (See Instructions)	Employer (See In	structions)				
Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
10/12/2016	Contributor address; City; State; Zip Code 300 West Texas 507		\$100.00	 			
	Baytown, TX 77520		lif traval autable -4	Toyon complete Schodule Ti			
Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)			
			<b>,</b>				

	The Instruction	N Guide explains how to complete this form.		1 PAGE#	
				Schedule: 33	/41 Report: 35/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT#	(Ethics Commission filers)
				00000001	
4	Date	5 Full name of contributor  ut-of-state PAC (	54	<del> </del>	8 In-kind contribution
"	Date	5 Full name of contributor ☐ out-of-state PAC (I Schutte, Sean	.#)	contribution (\$)	8 In-kind contribution description (if applicable)
					!
	10/03/2016	6 Contributor address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	\$325.00	1
	10/03/2010	2306 Winchester Lake	•	ψ323.00	1
		Rosenburg, TX 77471			
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	<u> </u>	
-		,	(	,,	
L					
	Date	Full name of contributor  ut-of-state PAC (I	D#)	Amount of	In-kind contribution
		Seastrunk, Amber		contribution (\$)	description (if applicable)
ĺ					
l	10/04/2016	Contributor address; City; State; Zip Code	•	\$225.00	
		18706 Racquet Sports Way Humble, TX 77346-8204			
					<u> </u>
L					Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	D# )	Amount of	I In-kind contribution
		Seastrunk, Gary		contribution (\$)	description (if applicable)
					•
	10/03/2016	Contributor address; City; State; Zip Code	•	\$125.00	1
		18706 Racquet Sports Way Humble, TX 77346-8204		·	i
		Tidifible, 17.77340-0204			l
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
F	Date	Full name of contributor	I	Amount of	In-kind contribution
	20.0	Seastrunk, Gary	J	contribution (\$)	description (if applicable)
					1
	10/05/2016	Contributor address; City; State; Zip Code	<del> </del>	\$535.00	!
П		18706 Racquet Sports Way Humble, TX 77346-8204			!
		Humble, 1X //346-8204			I
1				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
			ļ		
H	7 D-4-				
	Date	Full name of contributor  out-of-state PAC (I	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		Sinclair, Wade			Tatanipus (ii approadio)
	00/45/0046	Contributor addresses City States 75-0-4		0400.00	1
	09/15/2016	Contributor address; City; State; Zip Code 700 Rollingbrook	3	\$100.00	1
		Baytown, TX 77521			Í
				444	. <del>.</del>
-	Principal accur	pation / Job title (See Instructions)	Employer/Con In	<u> </u>	Texas, complete Schedule T)
	i inicipal occup	auton 7000 title (Ode metractions)	Employer (See In	ionachono)	
			i .		

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 34/4	41 Report: 36/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor ☐ out-of-state PAC (I Singh, Preet (Mr.)	D#	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/12/2016	6 Contributor address; City; State; Zip Cod 822 Chance Lane Baytown, TX 77521-3494	9	\$115.00	exas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In		
	Date	Full name of contributor  ut-of-state PAC ( Smith, B.	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/05/2016	Contributor address; City; State; Zip Cod 98 Meadowmist Court The Woodlands, TX 77381		\$500.00	
				(If travel outside of 1	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor  ut-of-state PAC (	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip Cod 2609 West Main Baytown, TX 77520	9	\$100.00	
				(If traval outside of 3	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ir		oxad, complete contounts 1/ Lad
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2016	Contributor address; City; State; Zip Cod P. O. Box 1457 Baytown, TX 77522-1457	e	\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ir	nstructions)	
	Date	Full name of contributor  ut-of-state PAC ( Smith, Donlee	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip Cod 4721 Garth Road #400	e	\$325.00	
		Baytown, TX 77521		(if travel outside of	Texas, complete Schedule T)
-	Principal occup	ation / Job title (See Instructions)	Employer (See Ir	<u> </u>	,,
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# POLITICAL CONTRIBUTIONS

	OTHER	THAN PLEDG	ES OR LOA	NS		
	The Instruction	on Guide explains how to con	nplete this form.		1 PAGE # Schedule: 35	/41 Report: 37/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	<b>5</b> Full name of contributor Smith, Luther	out-of-state PAC (ID	*	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/03/2016	6 Contributor address; 20001 FM 2100 Crosby, TX 77532	City; State; Zip Code		\$200.00	1   
						Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Snooks, Daniel (Mr.)	out-of-state PAC (ID	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/07/2016	Contributor address; 11550 Fuqua Suite 370	City; State; Zip Code		\$100.00	1   
		Houston, TX 77034			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Sosa, Mike	□ out-of-state PAC (ID	*	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 107 Bay Oaks La Porte, TX 77571	City; State; Zlp Code		\$400.00	 
				****	(if travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructio	ns)	Employer (See In	structions)	
	Date	Full name of contributor St. Clair, Mark (Mr.)	out-of-state PAC (ID	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/10/2016	Contributor address; P. O. Box 177 Channelview, TX 77530	City; State; Zip Code		\$100.00	 
	. =				(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See In	structions)	
	Date	Full name of contributor Start & Busch, LLC	out-of-state PAC (ID		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2016	Contributor address; 3720 Decker Drive Baytown, TX 77520	City; State; Zip Code	]	\$100.00	
_	Principal occur	pation / Job title (See Instructio	ns)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	. Super Cook	(2.34	•			

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The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 36/	/41 Report: 38/49
2 FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID≴ Stephens, Joe (Mr.)	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/03/2016	6 Contributor address; City; State; Zip Code 250 W. Thom Way Houston, TX 77015-2068	'	\$500.00   	 
			<u> </u>	Texas, complete Schedule T)
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See Ins	structions)	
Date	Full name of contributor  ut-of-state PAC (ID# Strong, Randall	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/28/2016	Contributor address; City; State; Zip Code 407 W. Baker Road Baytown, TX 77521		\$100.00	<b>!</b>
			· ·	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2016	Contributor address; City; State; Zip Code 2020 Southwest Fwy. #300 Houston, TX 77098		\$100.00	 
				Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/03/2016	Contributor address; City; State; Zip Code 832 Evangeline Drive Vidor, TX 77642		\$175.00	
Principal occurs	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
			· T	•
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/03/2016	Contributor address; City; State; Zip Code 832 Evangeline Drive Vidor, TX 77662		\$275.00	1 
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

# POLITICAL CONTRIBUTIONS

	OTHER	THAN PLEDG	ES OR LOAI	<b>N</b> 5		·
	The Instruction	אי Guide explains how to con	plete this form.		1 PAGE# Schedule: 38	/41 Report: 40/49
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Villareal, Carlos	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/03/2016	6 Contributor address; 1475 North Loop West Houston, TX 77008	City; State; Zip Code	······································	\$200.00	 
					(If travel outside of	Texas, complete Schedule 7)
9	Principal occup	ation / Job title (See Instruction	าร)	10 Employer (See Ins	structions)	
	Date	Full name of contributor Vosloh, Wallace	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/13/2016	Contributor address; 15326 Lindstrom Road Crosby, TX 77532	City; State; Zip Code		\$100.00	
					<u> </u>	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Walle, Armando	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; 150 West Parker Road #700 Houston, TX 77076	City; State; Zip Code		\$150.00	   
	Principal occur	ation / Job title (See Instruction	ne)	Employer (See In	·	Texas, complete Schedule T)
	T IIII OGG				an actions)	
	Date	Full name of contributor Walterscheid, Rick	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/08/2016	Contributor address; 12101 Cedar Gully Rd. Beach City, TX 77523	City; State; Zip Code		\$100.00	1   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructio	ns)	Employer (See In	structions)	
	Date	Full name of contributor Walton, LaVern	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/14/2016	Contributor address; 18422 FM 2100 Road Crosby, TX 77532	City; State; Zip Code		\$100.00	]    -
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	Principal occur	Loation / Job title (See Instructio	ns)	Employer (See In		Texas, complete Schedule T)
		(400 1101 4010	··- <b>,</b>			

	The Instruction	א Guide explains how to complete this form.		1 PAGE# Schedule: 39	/41 Report: 41/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT# 0000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Warford, Chris (Mr.)	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/01/2016	6 Contributor address; City; State; Zip Code 301 W. Texas Ave. Baytown, TX 77521		\$100.00	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/21/2016	Contributor address; City; State; Zip Code 3714 Audubon Place Houston, TX 77006		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/06/2016	Contributor address; City; State; Zip Code 321 W. Cowan Drive Houston, TX 77007-5032	·	\$100.00	 
L				1 '	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u>*</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/03/2016	Contributor address; City; State; Zip Code P. O. Box 2082 Dayton, TX 77535		\$325.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2016	Contributor address; City; State; Zip Code 116 W. Baker Road Baytown, TX 77521		\$100.00	 
		,		(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 40/	/41 Report: 42/49
2	FILER NAME	Coffey, Don (Mr.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Williams, Mike (Mr.)	<u>;                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/12/2016	6 Contributor address; City; State; Zip Code 6830 E. Sam Houston Parkway North Suite 150 Houston, TX 77049		\$100.00	       Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
			4		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/26/2016	Contributor address; City; State; Zip Code 8441 Gulf Freeway Ste. 600	7	\$500.00	   
		Houston, TX 77272-1109		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/19/2016	Contributor address; City; State; Zip Code P. O. Box 741109 Houston, TX 77272-1109	<b>)</b>	\$500.00	 
L				<u> </u>	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/20/2016	Contributor address; City; State; Zip Code 8314 Thompson Road Highlands, TX 77562		\$100.00	  -  -
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	
Г	Date	Full name of contributor  ut-of-state PAC (ID:	#)	Amount of	In-kind contribution
		Woodcox, Diane		contribution (\$)	description (if applicable)
	10/03/2016	Contributor address; City; State; Zip Code 3411 Garth Rd #145		\$200.00	 
		Baytown, TX 77521		(If traval outside of	Texas, complete Schedule T)
$\vdash$	Principal occur	Deatlon / Job title (See Instructions)	Employer (See In	<u> </u>	14700) combine equation ()
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	OTHER THAN PLEDGES OR LOANS						
	OTHER	THAN PLEDG	ES OR LOAF	45			
	The Instruction	อง Guide explains how to con	nplete this form.		1 PAGE# Schedule: 41	/41 Report: 43/49	
2	FILER NAME	Coffey, Don (Mr.)			3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	<b>5</b> Full name of contributor Woodcox, Diane (Mrs.)	out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/13/2016	6 Contributor address; 3707 Del Oro Drive Baytown, TX 77521-2625	City; State; Zip Code		\$100.00	 	
9	Principal occup	ation / Job title (See Instructio	ns)	10 Employer (See In		Texas, complete Schedule T)	
_							
	Date	Full name of contributor Wright, Thomas (Mr.)	out-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/21/2016	Contributor address;	City; State; Zip Code		\$125.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructio	ns)	Employer (See In	structions)		
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Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	Printing	Expense		ead/Rental Expense how to complete t	OTHE		tegory not listed a	
1 PAGE#		2 FILER NAME			· · · · · · · · · · · · · · · · · · ·	3	ACCOUNT#	(TEC filers)
Schedule: 1/6 Re	port: 44/49	Coffey, Don (Mr	.)			ا ا	00000001	
4 Date	5 Payee name			<del></del>				
09/27/2016	Alzheimer's	Association						
6 Amount (\$)	7 Payee addres	s City; St	ate; Zip Code	· · · · · · · · · · · · · · · · · · ·				
\$250.00	6055 South Houston, TX							
8	(a) Category (See	e Categories listed at the	top of this schedule)	(b) Descript	tion (If travel	outside of T	exas, complete S	chedule T)
PURPOSE OF	Advertising E	Expense		Ad				**
EXPENDITURE	,							
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Offic	ce sought:		Office held:	
Date 10/28/2016	Payee name Arabia Shrin	ers						
Amount (\$)	Payee addres	s City; St	ate; Zip Code				, .	
\$118.00	P. O. Box 42							
<b>\$110.00</b>	Houston, TX	K 77242						
	Category (Se	e Categories listed at the	top of this schedule)	Descrip	•	l outside of T	exas, complete S	Schedule T)
PURPOSE OF	Contribution	s/Donations Made E Officeholder/Political	Зу	Contrib	oution			
EXPENDITURE	Candidate/C	micenolder/Political	Committee					
Complete ONLY if	Candidate / O	fficeholder name	<del></del>	Offic	ce sought:		Office held:	
direct expenditure	Candidate / O	illocholder flame		Olli	ce sought.		Onice neid.	•
to benefit C/OH								
Date	Payee name	•						
07/06/2016		on Civic League						
Amount (\$)	Payee addres	•	ate; Zip Code					
\$300.00	523 Barrett I Crosby, TX							
DUDDOOF	W W W W W W W W W W W W W W W W W W W	e Categories listed at the	top of this schedule)	Descrip	tion (If trave	l outside of T	exas, complete S	Schedule T)
PURPOSE	Advertising I	Expense		Ad				
EXPENDITURE								
Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	officeholder name		Offi	ce sought:		Office held:	:
Date	Payee name							
08/10/2016	Baytown Ch	amber of Commerc		··-				
Amount (\$)	Payee addres		ate; Zip Code					
\$52.00	1300 Rolling	gbrook						
	Suite 400 Baytown, T	X 77521						
			ton of this selected.	Doord	tion //	l audalda af "	launa namalai- f	Sahadula Ti 🗔
PURPOSE	Advertising	e Categories listed at the Expense	top of this schedule)	Descrip Ad	INDEE (IT TEEVE	i outside of I	Texas, complete S	ocuednie ()
OF	Auvertising	Lypense		^4				
EXPENDITURE								
Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	Officeholder name		Offi	ce sought:	1.11	Office held	•
	<u> </u>							

SCHEDULE F

(512)463-5800 TDD 1-800-735-2989

		EXPENDITURE CATEGO	RIES	
Advertising Exper Accounting/Banki Consulting Expen Event Expense Fees	ng	Gifts/Awards/Memorial Expense Salaries/Wages/Con Legal Services Solicitation/Fundrais Food/Beverage Expense Travel In District Polling Expense Travel Out of District	ntract Labor ing Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1.008		Printing Expense Office Overhead/Rei The Instruction Guide explains how to	•	OTHER (enter a category not listed above)  rm.
1 PAGE# Schedule: 2/6 Re	po	2 FILER NAME	,	3 ACCOUNT # (TEC filers) 00000001
4 Date	_	Payee name		1 = 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
09/27/2016		Baytown Chamber of Commerce		
3 Amount (\$)	7	Payee address City; State; Zip Code		
\$250.00		1300 Rollingbrook Suite 400 Baytown, TX 77521		
BURROSE	(a)	Category (See Categories listed at the top of this schedule)	(b) Description	(If travel outside of Texas, complete Schedule T)
PURPOSE OF		Advertising Expense	Ad	İ
EXPENDITURE	1			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name	Office sou	ight: Office held:
Date		Payee name		
10/07/2016		Baytown Chamber of Commerce		
Amount (\$)		Payee address City; State; Zip Code		
\$175.00		1300 Rollingbrook		
		Suite 400 Baytown, TX 77521		
		Category (See Categories listed at the top of this schedule)	Description	(If travel outside of Texas, complete Schedule T)
PURPOSE OF		Advertising Expense	Ad	, , , , , , , , , , , , , , , , , , ,
EXPENDITURE				
Complete ONLY if	<u></u>	Candidate / Officeholder name	Office sou	ught: Office held:
direct expenditure to benefit C/OH				
Date	一	Payee name		
10/03/2016		Bridgewater Events		
Amount (\$)	Γ	Payee address City; State; Zip Code		
\$1,191.80		2651 S Hwy 146 Baytown, TX 77520		
PURPOSE	Γ	Category (See Categories listed at the top of this schedule) Event Expense	Description Fees	(If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	1			
TAL FIRMI OKE			<u></u>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name	Office sou	ught: Office held:
Date	F	Payee name		
10/06/2016		Bridgewater Events		
Amount (\$)	Γ	Payee address City; State; Zip Code		
\$118.14		2651 S Hwy 146		
		Baytown, TX 77520		
<b>D.</b>	Γ	Category (See Categories listed at the top of this schedule)	Description	(If travel outside of Texas, complete Schedule T)
PURPOSE OF	1	Event Expense	Fees	_
EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name	Office sou	ught: Office held:

Advertising Expense Accounting/Banking Consulting Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Printing Expense Office	Overhead/Rental Expense OTHER (er	te/Officeholder/Political Committee nter a category not listed above)
		lains how to complete this form.	
1 PAGE# Schedule: 3/6 Re	2 FILER NAME Coffey, Don (Mr.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 10/03/2016	5 Payee name Catfish on Wheels	<u> </u>	
6 Amount (\$)	7 Payee address City; State; Zip Coo		
, , ,	15536 South Drive	16	
\$3,800.00	Channelview, TX 77530		
8	(a) Category (See Categories listed at the top of this sche	dule) (b) Description (If travel outs	side of Texas, complete Schedule T)
PURPOSE OF	Event Expense	Catering	
EXPENDITURE			
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
09/27/2016	Channelview ISD Education Foundation		
Amount (\$)	Payee address City; State; Zip Coo	de	
\$100.00	828 Sheldon Road		
	Channelview, TX 77530		
PURPOSE	Category (See Categories listed at the top of this sche	,	side of Texas, complete Schedule T)
OF	Advertising Expense	Hole Sponsor	
EXPENDITURE		· ·	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure	Surface of Surface Sur	Onice sought.	Office field.
to benefit C/OH			
Date	Payee name		
10/03/2016	Eagle Point Golf Course		
Amount (\$)	Payee address City; State; Zip Co	de	
\$4,877.62	P. O. Box 2359		
	Mont Belvieu, TX 77580		
	6-1		
PURPOSE	Category (See Categories listed at the top of this sche		side of Texas, complete Schedule T)
OF	Event Expense	Fees for golf tourname	ш
EXPENDITURE			
Complete ONLY If	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
10/03/2016			
Amount (\$)	Eagle Point Golf Course	<del>:</del>	
1	Payee address City; State; Zip Co	de	
\$467.33	Payee address City; State; Zip Co P. O. Box 2359	de	
1	Payee address City; State; Zip Co	de	
1	Payee address City; State; Zip Co P. O. Box 2359 Mont Belvieu, TX 77580		
\$467.33	Payee address City; State; Zip Co P. O. Box 2359 Mont Belvieu, TX 77580  Category (See Categories listed at the top of this scho	edule) Description (If travel out	side of Texás, completé Schedule T)
\$467.33 PURPOSE OF	Payee address City; State; Zip Co P. O. Box 2359 Mont Belvieu, TX 77580		
\$467.33 PURPOSE	Payee address City; State; Zip Co P. O. Box 2359 Mont Belvieu, TX 77580  Category (See Categories listed at the top of this scho	edule) Description (If travel out	
\$467.33 PURPOSE OF	Payee address City; State; Zip Co P. O. Box 2359 Mont Belvieu, TX 77580  Category (See Categories listed at the top of this scholarst Event Expense	edule) Description (If travel out	

Advertising Expense

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor

Loan Repayment/Reimbursement

Accounting/Banki Consulting Exper Event Expense Fees	se Food/Beverage Expense Polling Expense Printing Expense	Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Guips explains how to complete	Contributions/Donations Made By Candidate/Officeholder/Political Committee e OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 4/6 Re	O-#+ D-= (M-)		0000001
4 Date	5 Payee name		
08/23/2016	Harris County Democratic Party		
6 Amount (\$)	7 Payee address City; State;	Zip Code	
\$1,000.00	1445 North Loop West Suite 110 Houston, TX 77008		
8 PURPOSE OF	(a) Category (See Categories listed at the top Advertising Expense		ription (If travel outside of Texas, complete Schedule T) rdinated Campaign
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	(	Office sought: Office held:
Date	Payee name		
08/10/2016	Harris County Tejano Democrats		
Amount (\$)	Payee address City; State;	Zip Code	
\$250.00	3715 North Main st Houston, TX 77009		
21122005	Category (See Categories listed at the top	of this schedule) Desc	cription (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Ad	
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought: Office held:
Date	Payee name		
	Harris County Tejano Democrats		
10/06/2016	riamo ocamy rejuno bemberate		
	Payee address City; State;	Zip Code	
10/06/2016	*	Zip Code	
10/06/2016 Amount (\$) \$1,750.00	Payee address City; States 3715 North Main st		cription (If travel outside of Texas, complete Schedule T)
10/06/2016 Amount (\$) \$1,750.00	Payee address City; State; 3715 North Main st Houston, TX 77009		ription (If travel outside of Texas, complete Schedule T)
10/06/2016 Amount (\$) \$1,750.00	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top	of this schedule) Desc	cription (If travel outside of Texas, complete Schedule T)
10/06/2016 Amount (\$) \$1,750.00 PURPOSE OF	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top	of this schedule) Desc Ad	cription (if travel outside of Texas, complete Schedule T)
10/06/2016 Amount (\$) \$1,750.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top Advertising Expense	of this schedule) Desc Ad	
10/06/2016 Amount (\$) \$1,750.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top Advertising Expense  Candidate / Officeholder name	of this schedule) Desc Ad	
10/06/2016  Amount (\$) \$1,750.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top Advertising Expense  Candidate / Officeholder name	of this schedule) Desc Ad	
10/06/2016  Amount (\$) \$1,750.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 09/27/2016	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top Advertising Expense  Candidate / Officeholder name  Payee name Highlands Lynchburg Chamber of	of this schedule) Desc Ad	
10/06/2016  Amount (\$) \$1,750.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 09/27/2016  Amount (\$)	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top Advertising Expense  Candidate / Officeholder name  Payee name Highlands Lynchburg Chamber of 6 Payee address City; State 127 San Jacinto Highlands, TX 77562	of this schedule)  Desc Ad  Commerce  ; Zip Code	Office sought: Office held:
10/06/2016  Amount (\$) \$1,750.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 09/27/2016  Amount (\$)	Payee address City; State; 3715 North Main st Houston, TX 77009  Category (See Categories listed at the top Advertising Expense  Candidate / Officeholder name  Payee name Highlands Lynchburg Chamber of the companies of the comp	of this schedule)  Desc Ad  Commerce  ; Zip Code	

SCHEDULE F

(512)463-5800 TDD 1-800-735-2989

	EXP	ENDITURE CATEGORIE
vertising Evnense	Gifte/Awarde/Memorial Evnence	Salaries/Manas/Contract

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial El Legal Services Food/Beverage Expense Politing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a cetagory and listed above)

rees	The Instruction Guide explains how to	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 5/6 Re	port: 48/49 Coffey, Don (Mr.)	0000001
4 Date	5 Payee name	
09/28/2016	J. A. Davis	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$235.36	1213 Ashland Blvd. Channelview, TX 77530	
	Charmerview, 1X 77550	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Event Expense	Shirts
OF EXPENDITURE		
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
09/02/2016	Johnston Campaigns	
Amount (\$)	Payee address City; State; Zip Code	
\$9,741.68	1415 South Voss Houston, TX 77057	
	Troublent, TX Troot	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Solicitation/Fundraising Expense	Mailers
EXPENDITURE		
	0 111 105 111	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
11/12/2016	KONA Printing	
Amount (\$)	Payee address City; State; Zip Code	
\$633.49	5071 Garth Baytown, TX 77521	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Flyers
EXPENDITURE		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
09/02/2016	Lopez, Daniel	
Amount (\$)	Payee address City; State; Zip Code	
\$600.00	932 Sage Street Baytown, TX 77521	
	,,	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Solicitation/Fundraising Expense	Auction item
EXPENDITURE		
Complete OMI 34 14	Condidate / Officeholder news	Office sought
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

Page - 50

# **POLITICAL EXPENDITURES**

SCHEDULE F

Advertising Exper Accounting/Banki Consulting Expen Event Expense Fees	ng Legal Services Solicitation/Fundrals lise Food/Beverage Expense Travel In District Polling Expense Travel Out of Distric Office Overhead/Re The Instruction Guide explains how (	ntract Labor sing Expense Contributions Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee ontal Expense Complete this form.
1 PAGE# Schedule: 6/6 Re	2 FILER NAME Coffey, Don (Mr.)	3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name	1 0000001
09/13/2016 6 Amount (\$)	Postmaster 7 Payee address City; State; Zip Code	
\$188.00	601 W. Baker Baytown, TX 77522	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Postage
OF EXPENDITURE	Constant undraising Expense	i ostago
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/12/2016 Amount (\$)	The Scottish Rite Payee address City; State; Zip Code	
\$125.00	P. O. Box 20788	
, , , , , , , , , , , , , , , , , , , ,	Houston, TX 77225	
PURPOSE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	Description (If travel outside of Texas, complete Schedule T) Contribution
OF EXPENDITURE	Candidate/Officeholder/Political Committee	Soldibution
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: