



Official Public Records of Harris County Stan Stanart County Clerk

Campaign Finance Report



Stan Stanart

COUNTY CLERK HARRIS COUNTY, TEXAS

FileNo:

2017297

Received By Clerk:

7/19/2017

File Date:

July 19, 2017

Office:

County Judge

Candidate:

Williams, Lashawn

Treasurer:

Not Available

Category:

Contributions And Expenditures

Delivered By:

Electronically Filed

Type:

COR

Harris County No Fee

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

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

| | | | | 2 of 12 |
|--|---|--|-------------------|---------------------------------------|
| 13 C / OH NAME | Williams, Lashawn | 14 Filer ID | | |
| 15 NOTICE FROM POLITICAL COMMITTEE(S) | This box is for notice of candidate / officeholder. consent. Candidates and | officeholder's kr | nowledge or | |
| Additional Pages | COMMITTEE TYPE | COMMITTEE NAME | | |
| اسا ٔ | GENERAL | | | |
| | | COMMITTEE ADDRESS | | |
| · | SPECIFIC | | | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | |
| | · | | | |
| 16 CONTIBUTION TOTALS | | AL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, ARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 0.00 |
| | 2. TOTAL POLIT | ICAL CONTRIBUTIONS | \$ | 2,270.00 |
| | | PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | · · · · · · · · · · · · · · · · · · · |
| EXPENDITURE TOTALS | | AL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 0.00 |
| | 4. TOTAL POLIT | ICAL EXPENDITURES | \$ | 709.72 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITIC REPORTING PE | AL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE | \$ | 0.10 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIF OF THE REPOR | PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DA RTING PERIOD | s . | 0.00 |
| 17 AFFADAVIT | | I swear, or affirm, under penalty of perjury, that the true and correct and includes all information requirements under Title 15, Election Code. Signature of Candidate or Office | red to be repor | |
| AFFIX NO | DTARY STAMP / SEAL AB | • | | |
| Sworn to and subs | scribed before me, by the | said, this the | | day |
| of | | ertify which, witness my hand and seal of office. | | , |
| Signature of off | icer administering oath | Printed name of officer administering oath Title of o | officer administe | ering oath |
| | F.1.1. | | 17. | veion V1 0 264 |

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

| 14 JC/OH NAME | | 15 Filer ID (Ethles Co | mmission Filers) | | | | | |
|---|---|--|-------------------|--|--|--|--|--|
| 16 NOTICE FROM POLITICAL COMMITTEE(S) | THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CAMBIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE SEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. | | | | | | | |
| | COMMITTEE TYPE COMMITTEE NAME | | | | | | | |
| *** | GENERAL | | , <u>.</u> | | | | | |
| į | BPECIFIC COMMITTEE ADDRESS | | | | | | | |
| | COMMITTEE CAMPAIGN TREASURER NAME | | | | | | | |
| Additional Pages | | , | | | | | | |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | | | | | | | |
| 17 CONTRIBUTION TOTALS | 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THE PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ | | 0.00 | | | | | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 2,270.00 | | | | | |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ | 0.00 | | | | | |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 709.72 | | | | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD | DAY \$ | 0.10 | | | | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD | THE \$ | 0.00 | | | | | |
| 18 AFFIDAVIT | | | | | | | | |
| Marting and the section of the section of the | l swear, or affirm, under penalty of j true and correct and includes all inf | ,0050000500000000000000000000000000000 | | | | | | |
| | VERONICA DE LEON Itary Public, State of Texas pmm. Expires 04-21-2020 Notary ID 130829042 |)OC | | | | | | |
| | . Signature of Car | ndidate or Officehold | er | | | | | |
| AFFIX NOTARY STAM | P/SEALABOVE | | | | | | | |
| Sworn to and subsc | ribed before me, by the said VCrunica Delican | , this the _ | 17 | | | | | |
| L i | , 20 <u>17</u> , to certify which, witness my hand and seal of office | | | | | | | |
| Veny | Verunia Deteon | Notar | } | | | | | |
| Signature of officer a | dministering oath Printed name of officer administering oath | Title of officer a | dministering oath | | | | | |

| SUBTOTALS - JC/OH | FORM JC/OH COVER SHEET PG 3 3 of 12 |
|--|-------------------------------------|
| 18 FILER NAME 19 Filer ID Williams, Lashawn | |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | SUBTOTAL AMOUNT |
| 1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ 2,270.00 |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ |
| 4. SCHEDULE E(J): LOANS (JUDICIAL) | s |
| 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 459.72 |
| 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | s |
| 8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. X SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 250.00 |
| 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |
| | |
| | Version V1 0 264 |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDULE A | J)1 |
|----------------------------------|--|-------------------------|---------------------------------|---|---------------|
| The Instruc | ction Guide explains how t | to complete this fo | orm. | 1 Total pages Schedule A(J)1: Sch: 1/6 Rpt: 4/12 | |
| 2 FILER NAME Williams, Las | shawn | | | 3 Filer ID | |
| 4 Date 06/01/2017 | 5 Full name of contributor BeCoats, Lewis 6 Contributor address; City; State 100 Harrier Court | out-of-state PAC (ID#:_ | | 7 Amount of Contribution (\$) | \$150.00 |
| | Lavergne, TN 37086 | | | | |
| 8 Contributor's F unk | Principal Occupation | | Contributor's Job Title unk | | |
| 10 Contributor's e | employer/law firm | | 11 Law firm of contributor's sp | oouse (if any) | |
| 12 If contributor is | s a child, law firm of parent(s) (if an | у) | | | • |
| Date | Full name of contributor | out-of-state PAC (ID#:_ | | Amount of Contribution (\$) | |
| 06/01/2017 | Bynum, Quinton | | | | \$100.00 |
| | Contributor address; City; Sta | te; Zip Code | | | |
| Contributor's | l Principal Occupation | | Contributor's Job Title | | |
| Ųnk | | | Unk | | |
| Contributor's | employer/law firm | | Law firm of contributor's sp | pouse (if any) | |
| If contributor i | is a child, law firm of parent(s) (if an | ny) | | | |
| Date | Full name of contributor | out-of-state PAC (ID#: |) | Amount of Contribution (\$) | |
| 06/01/2017 | Johnson, D'ondreia Contributor address; City; Sta 6307 Tuskegee St Houston, TX 77091 | ate; Zip Code | | | \$100.00 |
| | Principal Occupation | | Contributor's Job Title | | _ |
| Accountant | | | Accountant | tit and | |
| Contributor's | employer/law firm | | Law firm of contributor's s | pouse (IT any) | |
| If contributor | is a child, law firm of parent(s) (if ar | ny) | | | |
| | | | | | |
| | | | | | |
| | | | | Vorcion | 10 000 |

| MONETA | ARY POLITICAL C | ONTRIBUTIONS | SCHEDULE A(J)1 | |
|---|---|---|---|--|
| The Instruc | tion Guide explains how | to complete this form. | 1 Total pages Schedule A(J)1: Sch: 2/6 Rpt: 5/12 | |
| 2 FILER NAME Williams, Las | hawn | | 3 Filer ID | |
| 06/01/2017 | Full name of contributor Kimbrough, Joy Contributor address; City; St 306 Gay St 102 Nashville, TN 37201 | Kimbrough, Joy Contributor address; City; State; Zip Code 306 Gay St 102 | | |
| 8 Contributor's P Attorney | rincipal Occupation | 9 Contributor's Job Titl Attorney | е | |
| | • | | or's spouse (if any) | |
| na Date 06/01/2017 | Full name of contributor McBride, Marshall Contributor address; City; St 4503 Cedar Hill Ct | |) Amount of Contribution (\$) \$50.00 | |
| Program Spe | Missouri City, TX 77459 rincipal Occupation ecialist mployer/law firm | Contributor's Job Tit Program Specialis Law firm of contribut | it | |
| | a child, law firm of parent(s) (if a | | or 3 spouse (if why) | |
| Date 06/01/2017 | Full name of contributor McBride, Maurice Contributor address; City; S 11355 Corolla Trail Houston, TX 77066 | out-of-state PAC (ID#: | Amount of Contribution (\$) . \$50.00 | |
| Contributor's F Probation Of | Principal Occupation ficer | Contributor's Job Tit Probation Officer | le | |
| Contributor's e | employer/law firm | Law firm of contribu | tor's spouse (if any) | |
| If contributor is a child, law firm of parent(s) (if any) | | any) | | |
| | | | Version VI 0 264 | |

| MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A(J)1 | |
|---|--|-------------------------|--------------------------------------|---|
| The Instruc | ction Guide explains how | to complete this fo | orm. | 1 Total pages Schedule A(J)1: Sch: 3/6 Rpt: 6/12 |
| 2 FILER NAME Williams, Las | shawn | | | 3 Filer ID |
| 06/01/2017 | 5 Full name of contributor McCall, Samuel | out-of-state PAC (ID#:_ |) | 7 Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; Sta 1134 Ben Hill Blvd. | ite, Zip Code | | |
| | Nashville, TN 37135 | | | |
| 8 Contributor's F Retired | Principal Occupation | | 9 Contributor's Job Title Retired | |
| 10 Contributor's e | employer/law firm | | 11 Law firm of contributor's s | pouse (if any) |
| 12 If contributor is | s a child, law firm of parent(s) (if a | ny) | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ | | Amount of Contribution (\$) |
| 06/01/2017 | McCullough, Bridgette | | | \$100.00 |
| | Contributor address; City; St. 1401 McKinney | ate; Zip Code | | |
| | Housotn, TX 77010 | | | |
| Contributor's F Analyst | Principal Occupation | | Contributor's Job Title Analyst | |
| Contributor's employer/law firm Law firm of contributor's sp | | | pouse (if any) | |
| If contributor is | s a child, law firm of parent(s) (if a | ny) | | |
| Date | Full name of contributor | out-of-state PAC (ID#:_ |) | Amount of Contribution (\$) |
| 06/01/2017 | 111111111111111111111111111111111111111 | | | \$500.00 |
| | Contributor address; City; St 2911 Hardy St | ate; ZIP Code | | |
| | Houston, TX 77009 | | | |
| | Principal Occupation | | Contributor's Job Title | |
| unk Contributor's | employer/law firm | | Law firm of contributor's s | nouse (if any) |
| Continuators | отриувания шш | | Egg and of collaboration as | the and to make the second of |
| If contributor i | s a child, law firm of parent(s) (if a | iny) | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| MONET | ARY POLITICAL CONTRIBU | TIONS | SCHEDULE A(J)1 |
|----------------------------|--|------------------------------------|---|
| The Instruc | tion Guide explains how to complete t | his form. | 1 Total pages Schedule A(J)1: Sch: 4/6 Rpt: 7/12 |
| FILER NAME Williams, Las | hawn | | 3 Filer ID |
| 06/01/2017 | | | 7 Amount of Contribution (\$) \$70.00 |
| | One Century Place Nashville, TN 37214 | | |
| B Contributor's P Sales | rincipal Occupation | 9 Contributor's Job Title Sales | |
| 10 Contributor's e | mployer/law firm | 11 Law firm of contributor's s | pouse (if any) |
| 12 If contributor is | a child, law firm of parent(s) (if any) | | |
| Date | Full name of contributor uut-of-state PAC | C (ID#:) | Amount of Contribution (\$) |
| 06/01/2017 | Satterfield, Kevin | | \$100.00 |
| *** *** | Contributor address; City; State; Zip Code 11903 232 St Kambria Heights, NY 11411 | | |
| Contributor's P Retired | vincipal Occupation | Contributor's Job Title Retired | |
| Contributor's e | mployer/law firm | Law firm of contributor's s | spouse (if any) |
| If contributor is | a child, law firm of parent(s) (if any) | | |
| Date | Full name of contributor Out-of-state PAC | C (ID#:) | Amount of Contribution (\$) |
| 06/01/2017 | Stevens, Guylie | | \$100.00 |
| | Contributor address; City; State; Zip Code 4509 NW Santa Fe Ave | | |
| | Lawton, OK 73505 | | |
| Contributor's F | Principal Occupation | Contributor's Job Title Retired | |
| Contributor's e | employer/law firm | Law firm of contributor's | spousė (if any) |
| If contributor is | s a child, law firm of parent(s) (if any) | | , |
| | | | |
| | | | Version V1.0.26 |

| MONET | ARY POLITICAL CONTRIBUTION | ONS | SCHEDULE A(J)1 |
|---------------------------------|--|---------------------------------|---|
| The Instruc | ction Guide explains how to complete this t | form. | 1 Total pages Schedule A(J)1: Sch: 5/6 Rpt: 8/12 |
| 2 FILER NAME Williams, Las | shawn | | 3 Filer ID |
| 4 Date 06/01/2017 | 5 Full name of contributor out-of-state PAC (ID#:) Wells, Derek 6 Contributor address; City; State; Zip Code 333 Clay St | | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's F Accountant | Houston, TX 77002 Principal Occupation | 9 Contributor's Job Title | |
| 10 Contributor's 6 | employer/law firm | 11 Law firm of contributor's sp | ouse (if any) |
| 12 If contributor is | s a child, law firm of parent(s) (if any) | | |
| Date 06/01/2017 | Full name of contributor out-of-state PAC (ID#: Williams, Anita Contributor address; City; State; Zip Code 15927 Maple Shores | | Amount of Contribution (\$) \$50.00 |
| Contributor's (| Houston, TX 77044 Principal Occupation | Contributor's Job Title Retired | |
| Contributor's | employer/law firm | Law firm of contributor's sp | ouse (if any) |
| If contributor i | s a child, law firm of parent(s) (if any) | | |
| Date 06/01/2017 | Full name of contributor out-of-state PAC (ID#: Williams, Brian Contributor address; City; State; Zip Code 6772 Island Dr Grand Prairie, TX 75054 | | Amount of Contribution (\$) \$100.00 |
| Contributor's Owner | Principal Occupation | Contributor's Job Title Owner | , |
| Contributor's | employer/law firm | Law firm of contributor's sp | pouse (if any) |
| If contributor | is a child, law firm of parent(s) (if any) | | |
| | | | |

| MONETARY POLITICAL CONTRI | BUTIONS | SCHEDULE A | (J)1 |
|---|---|---|----------|
| The Instruction Guide explains how to comple | ete this form. | 1 Total pages Schedule A(J)1: Sch: 6/6 Rpt: 9/12 | |
| 2 FILER NAME Williams, Lashawn | | 3 Filer ID | |
| 4 Date 5 Full name of contributor out-of-state 06/01/2017 Wilson, Clara and David 6 Contributor address; City; State; Zip Code 443 Benetton Drive | Date 5 Full name of contributor out-of-state PAC (ID#:) 06/01/2017 Wilson, Clara and David 6 Contributor address; City; State; Zip Code | | \$600.00 |
| San Antonio, TX 78253 | | | |
| 8 Contributor's Principal Occupation Retired | 9 Contributor's Job Title Retired | | |
| 10 Contributor's employer/law firm | 11 Law firm of contributor's | spouse (if any) | |
| 12 If contributor is a child, law firm of parent(s) (if any) | | | |
| Forms provided by Texas Ethics Commission | | | √1.0.264 |

| EXP | | | | | | |
|---|---|--|--|--|--|--|
| Event Exp Fees Food/Bev . Gift/Awar Committee Legal Ser | erage Expense ds/Memorials Expense vices | Loan Repay Office Overl Po∦ing Exp Printing Exp Salaries/Wa | /ment head/ ense ense iges/(| l/Reimbursement /Rental Expense Contract Labor | ן [[| Solicitation/Fundraising Expense Fransportation Equipment & Related Expense Fravel in District Fravel Out of District DTHER (enter a category not listed above) |
| | l | | | | 3 F | Filer ID |
| 5 Payee name AB Consulting | | | | - | | |
| | • | ate; Zip Coo | le | | | |
| | | schedule) | | Check if travel o | | e of Texas, Complete Schedule T. fficeholder living expense |
| | er name | Office soug | ht | | | Office held |
| Payee name Office Depot | | | | | | |
| Payee address; | City: Sta | ate; Zip Coo | de | | | |
| (a) Category (See Categor Supplies | rives listed at the top of this | s schedule) | | Check if travel of | | e of Texas. Complete Schedule T. Officeholder living expense |
| | er name | Office sour | ght | | | Office held |
| Payee name Victory Fund | | | | | | |
| Payee address; | City; St | ate; Zip Co | de | | | |
| (a) Category (See Category Contributions/Don | ations Made By | | (b) | Check if travel | | ie of Texas. Complete Schedule T. officeholder living expense |
| | The Ins 2 FILER NAME Williams, Lashawn 5 Payee name AB Consulting 7 Payee address; 18482 Kuykendah No. 199 Spring, TX 77379 (a) Category (see Catego Consulting Expens Candidate/Officeholde Payee name Office Depot Payee address; TX (a) Category (see Catego Supplies Candidate/Officeholde Payee name Victory Fund Payee address; TX (a) Category (see Catego Contributions/Dor Candidate/Officeholde | The Instruction Guide explain FILER NAME Williams, Lashawn Payee name AB Consulting Payee address; City; State 18482 Kuykendahl Road No. 199 Spring, TX 77379 (a) Category (See Categories listed at the top of this Consulting Expense Candidate/Officeholder name Office Depot Payee address; City; State 18482 At the top of this Supplies Candidate/Officeholder name Payee name Victory Fund Payee address; City; State 18482 At the top of this Supplies TX (a) Category (See Categories listed at the top of this Supplies Candidate/Officeholder name Victory Fund Payee address; City; State 18482 At the top of this Contributions/Donations Made By Candidate/Officeholder/Political Co Candidate/Officeholder name | The Instruction Guide explains how to com 2 FILER NAME Williams, Lashawn 5 Payee name AB Consulting 7 Payee address; City; State; Zip Coo 18482 Kuykendahl Road No. 199 Spring, TX 77379 (a) Category (see Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office Depot Payee address; City; State; Zip Coo TX (a) Category (see Categories listed at the top of this schedule) Supplies Candidate/Officeholder name Office sour Payee name Victory Fund Payee address; City; State; Zip Coo TX (a) Category (see Categories listed at the top of this schedule) Candidate/Officeholder name Office sour TX (a) Category (see Categories listed at the top of this schedule) Candidate/Officeholder/Political Committee | The Instruction Guide explains how to complete Williams, Lashawn 5 Payee name AB Consulting 7 Payee address; City; State; Zip Code 18482 Kuykendahl Road No. 199 Spring, TX 77379 (a) Category (see Categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office Depot Payee address; City; State; Zip Code TX (a) Category (see Categories listed at the top of this schedule) Supplies Candidate/Officeholder name Victory Fund Payee address; City; State; Zip Code TX (a) Category (see Categories listed at the top of this schedule) TX (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sought | The Instruction Guide explains how to complete this form. FILER NAME Williams, Lashawn Payee name AB Consulting Payee address; City; State; Zip Code 18482 Kuykendahl Road No. 199 Spring, TX 77379 (a) Category (see calegories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sought Payee name Office Depot Payee address; City: State; Zip Code TX (a) Category (see Calegories listed at the top of this schedule) Supplies Candidate/Officeholder name Office sought Payee name Victory Fund Payee address; City: State; Zip Code TX (a) Category (see Calegories listed at the top of this schedule) Candidate/Officeholder name Victory Fund Payee address; City: State; Zip Code TX (a) Category (see Calegories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sought | The Instruction Guide explains how to complete this form. 2 FILER NAME Williams, Lashawn 5 Payee name AB Consulting 7 Payee address; City; State; Zip Code 18482 Kuykendahl Road No. 199 Spring, TX 77379 (a) Category (see categories listed at the top of this schedule) Consulting Expense Candidate/Officeholder name Office sought Payee name Office Depot Payee address; City; State; Zip Code TX (a) Category (see categories listed at the top of this schedule) Supplies Candidate/Officeholder name Office sought Payee address; City; State; Zip Code TX (a) Category (see categories listed at the top of this schedule) Supplies Candidate/Officeholder name Victory Fund Payee address; City; State; Zip Code TX (a) Category (see categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if varied outside Check if Austin, TX, on the contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if Austin, TX, Donation |

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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

| | EXPENDITURE CAT | regories for Box 8(a |
|-------------------|-----------------|----------------------|
| ivenising Expense | Event Expense | Loan Repayment/Reim |

Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | |
|--|---|----|
| 1 Total pages Schedule F1: Sch: 2/2 Rpt: 11/12 | 2 FILER NAME Williams, Lashawn | |
| 4 Date 06/02/2017 | 5 Payee name Vistaprint | _ |
| 6 Amount (\$) \$219.21 | 7 Payee address; City; State; Zip Code | |
| | тх | |
| B PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense banners and stands | |
| 9 Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | _ |
| Date | Payee name | == |
| 06/19/2017 | Wal-Mart | |
| Amount (\$) \$19.51 | Payee address; City; State, Zip Code | |
| | Pearland, TX 77584 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Supplies (b) Description Check if Austin, TX, officeholder living expense Supplies | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held | |
| | | |

| | POLITICAL EX | PENDITURES FROM PER | SONAL FUNDS | SCHEDULE G |
|---|---|---|--|---|
| | Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | EXPENDITURE CATEGO Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains | Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor | Soficitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enfer a category not listed above) |
| 1 | Total pages Schedule G: Sch: 1/1 Rpt: 12/12 | 2 FILER NAME Williams, Lashawn | 3 | Filer ID |
| 4 | Date 05/31/2017 | 5 Payee name Campaign | | · |
| 6 | Amount (\$) \$250,00 Reimbursement from political contributions intended | 7 Payee address; City; State | ; Zip Code | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this sch Loan Repayment/Reimbursement | | heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
| | | | | |
| | | | | |