# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM C/OH COVER SHEET PG 1

| The C/OH Instruction (  | Guide explains how to complete this form.      | 1 Filer ID (Ethics Commission Filers)            | 2 Total pages filed:  |
|---|--|--|---|
| 3 CANDIDATE /<br>OFFICEHOLDER                                 | MS / MRS (MR) FIRST                            | MI<br>R.   | OFFICE USE ONLY   |
| NAME  | NICKNAME LAST                                  | SUFFIX   | Date Received   |
|   | Anders   | ion noi  | 20<br>ELE<br>BY:  |
| 4 CANDIDATE /<br>OFFICEHOLDER<br>MAILING<br>ADDRESS           | ADDRESS / PÖ BÖX: APT / SUITE #: C             | CITY: STATE: ZIP CODE                            | TARRÁNI<br>2016 JAN 15<br>ECTIONS ADI                             |
| Change of Address   | +  |  |   |
| 5 CANDIDATE/<br>OFFICEHOLDER<br>PHONE                         |  | -  | Date Hand-delivered or Date Postmarked                            |
| 6 CAMPAIGN<br>TREASURER                                       | MS/MRS/MR FIRST Rebecc                         | <b>.a</b>  | Receipt # 😭 😘 ount-😜  |
| NAME  | NICKNAME LAST                                  | SUFFIX   | Date Processed  |
|   | Anders   | 50N  | Date Imaged   |
| 7 CAMPAIGN<br>TREASURER<br>ADDRESS<br>(Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE): APT / SL    | LITE #: CITY: STATE:                             | ZIP CODE  |
| 8 CAMPAIGN<br>TREASURER<br>PHONE                              | AREA CODE PHONE NUMBER                         | EXTENSION  |   |
| 9 REPORT TYPE   | January 15 30th day before el                  | lection Runoff                                   | 15th day after campaign treasurer appointment (Officeholder Only) |
| ·   | July 15 Sth day before elec                    | ction Exceeded \$500 limit                       | Final Report (Attach C/OH - FR)                                   |
| 10 PERIOD<br>COVERED  | Month Day Year 7 / 1 / 2015                    |  | Day Year / 2015   |
| 11 ELECTION   | BLECTION DATE  Month Day Year Primary  General | ELECTION TYPE  Runoff Other Description  Special |   |
| 12 OFFICE   | Sheriff of Tarrant<br>County                   | 5heriff of T                                     | _   |
|   | go то  | PAGE 2   |   |

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 2

| 14 C/OH NAME   | ee B. A        | nderson   | 15 Filer ID (Ethics Commission Filers)  |  |
|--|----------------|---|---|--|
| 16 NOTICE FROM POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. |                |   |   |  |
|  | COMMITTEE TYPE | COMMITTEE NAME  |   |  |
|  | GENERAL        |   | TA<br>2016<br>ELEC  |  |
|  | SPECIFIC       | COMMITTEE ADDRESS   | TARRANT  116 JAN 15  FRANK PH  ECTIONS ADD  7:  |  |
| Additional Pages   |                | COMMITTEE CAMPAIGN TREASURER NAME   | ED COUNTY PM 3: 3:  |  |
|  | . **           | COMMITTEE CAMPAIGN TREASURER ADDRESS  | 37<br>10R   |  |
| 17 CONTRIBUTION<br>TOTALS  |                | OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHE<br>S, LOANS, OR GUARANTEES OF LOANS), UNLESS |   |  |
|  |                | POLITICAL CONTRIBUTIONS<br>THAN PLEDGES, LOANS, OR GUARANTEES OF LOA                      | \$ 20, 812.90   |  |
| EXPENDITURE<br>TOTALS  |                | OLITICAL EXPENDITURES OF \$100 OR LESS, ITEMIZED  | \$ 66.00  |  |
|  | 4. TOTAL       | POLITICAL EXPENDITURES  | \$ 5,526.62   |  |
| CONTRIBUTION<br>BALANCE  |                | OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE<br>DRTING PERIOD                              | \$23,289.38   |  |
| OUTSTANDING<br>LOAN TOTALS   |                | RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS A<br>Y OF THE REPORTING PERIOD                   | S OF THE \$   |  |
| 18 AFFIDAVIT   |                |   |   |  |
|  |                | · · · · · · · · · · · · · · · · · · ·   | Ity of perjury, that the accompanying report is all information required to be reported by me |  |
|  |                | Der Ah  | la  |  |
| Signature of Candidate or Officeholder   |                |   |   |  |
| AFFIX NOTARY STAMP / SEALABOVE   |                |   |   |  |
| Sworn to and subscribed before me, by the said, this the   |                |   |   |  |
| day of, 20, to certify which, witness my hand and seal of office.  |                |   |   |  |
|  |                |   |   |  |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath   |                |   |   |  |

# SUBTOTALS - C/OH

#### FORM C/OH COVER SHEET PG 3

|     |        |  |                           |                        | OHELI PG 5         |
|-----|--------|--|---------------------------|------------------------|--------------------|
| 19  | FILERN | Dee B. Anders  | 50n                       | 20 Filer ID (Ethics Co | ommission Filers)  |
|     |        | ULE SUBTOTALS<br>OF SCHEDULE   |                           |                        | SUBTOTAL<br>AMOUNT |
| 1.  | X      | SCHEDULE A1: MONETARY POLITICAL CON  | NTRIBUTIONS               |                        | \$20,812.90        |
| 2.  |        | SCHEDULE A2: NON-MONETARY (IN-KIND)  | POLITICAL CONTRIBUTIONS   |                        | \$ <del>*</del>    |
| 3.  |        | SCHEDULE B: PLEDGED CONTRIBUTIONS  |                           |                        | \$ 0               |
| 4.  |        | SCHEDULE E: LOANS  |                           |                        | \$ &               |
| 5.  | X      | SCHEDULE F1: POLITICAL EXPENDITURE   | S MADE FROM POLITICAL C   | CONTRIBUTIONS          | \$ 5,526.62        |
| 6.  |        | SCHEDULE F2: UNPAID INCURRED OBLIGA  | ATIONS                    |                        | \$ <b>-</b>        |
| 7.  |        | SCHEDULE F3: PURCHASE OF INVESTME  | ENTS MADE FROM POLITICA   | L CONTRIBUTIONS        | \$ 0               |
| 8.  |        | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                  |                           |                        | \$ <del>-</del>    |
| 9.  |        | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS                    |                           |                        | \$ <b>-</b>        |
| 10. |        | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ |                           |                        | \$ 4               |
| 11. |        | SCHEDULE I: NON-POLITICAL EXPENDITUR   | RES MADE FROM POLITICAL ( | CONTRIBUTIONS          | \$ 4               |
| 12. |        | SCHEDULE K: INTEREST, CREDITS, GAINS RETURNED TO FILER                         | S, REFUNDS, AND CONTRIB   | UTIONS                 | \$ \$              |
|     |        |  |                           | ECHORS ADMINIS         | FILED<br>ANT COUN  |
|     |        |  |                           |                        | 17 : 37            |
|     |        |  |                           |                        |                    |

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson 4 Date 7 Amount of contribution (\$) 8 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Date Amount of contribution (\$) R. Denny Alexander Contributor address; City; State; Zip Code 4200 So. Hulen Street - Ste 617 12/16/2015 100.00 Worth Texas 76109-4911 | e Instructions) | Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Mr. 4 Mrs. Bradford Barnes Contributor address; City; State; Zip Code 4450 Harley Avenue Fort Worth Texas 76107 \$1,000.00 Principal occupation / Job title (See Instructions) Date out-of-state PAC (ID#:\_ Amount of contribution (\$) Karen 4 Joseph Jasper Contributor address; City: State; Zip Code 9484 Bella Terra Drive \$ 250.00 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson 7 Amount of contribution (\$) John Jose 12/6/2015 6 Contributor address; City; State; Zip Code 4920 Westbriar Dr. \$500.00 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:\_ Date Amount of contribution (\$) James Powell Contributor address; City; State; Zip Code P. O. Box 444 12/16/2015 \$ 100.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:\_\_\_\_ Date Amount of contribution (\$) 12/16/2015 Steve & Margaret Schwemer Contributor address; City; State; Zip Code 6807 Thornbird Lane Principal occupation / Job title (See mistructions) Remployer (See Instructions) Date Amount of contribution (\$) 12/16/2015 Betsy Price Campaign Contributor address; City; State; Zip Code £ 250.00 P.O. Box 100066 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME B. Anderson Dee 7 Amount of contribution (\$) 12/16/2015 Gib Lewis City; State; Zip Code 2300 Race Street 76111 4 Date \$ 100.00 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Date Amount of contribution (\$) Charles & Kathleen Eckert iddress; City; State; Zip Code Kingslink Circle Lingth Texas 76135-1430 12/16/2015 \$ 1,000.00 Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Date Amount of contribution (\$) 12/16/2015 Contributor address Dominion Drive \$1,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Leticia Sparks \$ 1,000.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson Jay + Gwynna Six 12/16/2015 6 Contributor address; City; State; Zip Code 3+D7 Mone ta Court Texas 76001 7 Amount of contribution (\$) \$500.00 8 Principal occupation / Job title (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Dan Lowrance 12/16/2013 Contributor address; £ 250.00 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) Gary Fickes Campaign Contributor address; City; State; Zip Code \$250.00 Hilltop Prive Principal occupation / Job title (See Instructions) Findipal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_ Amount of contribution (\$) Wayne 4 Ashley Owen \$ 100.00 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) B. Anderson Dee 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#: David d Karen Barrett | 12/16/2015 | 6 Contributor address: City; State; Zip Code | 6750 Elk Trail | Arlington Texas 76002 | 8 Principal occupation / Job title (See Instructions) | 9 Employe \$ 125.00 9 Employer (See Instructions) ut-of-state PAC (ID#: Date Amount of contribution (\$) Rebecca Britton Contributor address; City; State; Zip Code 6614 5abrosa Court E Fort Worth, Texas 76133 12/16/2015 \$ 500.00 Full name of contributor Date Amount of contribution (\$) Reed Pigman, Jr. Contributor address; City; State; Zip Code 200 Texas Way Fort Worth Texas 76106-2782 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$ 500.00 Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) 12/16/2015 State; Zip Code \$ 100.00 Jorth, Texas 76179 uctions) Employer (See Instructions) Principal occupation / Job title (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Dee B. Anderson 5 Full name of contributor 7 Amount of contribution (\$) 4 Date Bob Vititow 6 Contributor address; City; State; Zip Code 1226 Woodland Park Drive Hurst, Texas 76053 \$ 100.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:\_\_\_ Date Amount of contribution (\$) Lynette & Daniel Jensen Contributor address; City; State; Zip Code 4004 Hartwood Drive 100.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date out-of-state PAC (ID#:\_ Amount of contribution (\$) 12/16/2015 Rope, Hardwicke, Christie, Schell + Kelly Contributor address; City; State; Zip Code Soo West 7th Street, Ste. 600 Fort Worth, Texas 76102 250.00 Fort Worth, 7 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) 12/16/2015 1,500.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Dee B. Anderson 4 Date 7 Amount of contribution (\$) 12/16/2015 6 Contributor address; City; State; Zip Code 6462 Woodstock Road \$ 100.00 76116-7340 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Date Amount of contribution (\$) Chris Garcia Contributor address; City; State; Zip Code 12/16/2015 \$ 125.00 8136 Camp Bowie Boulevard Fort Worth, Texas 76116-5260 Full name of contributor Date out-of-state PAC (ID#: Amount of contribution (\$) Jimmy Evans Contributor address; City; State; Zip Code 10917 Goff view Way Benbrook, Texas 7612 Employe 12/16/2015 \$ 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:\_ Amount of contribution (\$) City; State; Zip Code 250.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Dee B. Anderson 4 Date 7 Amount of contribution (\$) out-of-state PAC (ID#:\_ The Colaneri Firm, P.C. 6 Contributor address: City: State; Zip Code 1161 W. Corporate Dr. - Ste. 101 Arlington, Texas 76006 \$500.00 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) out-of-state PAC (ID#:\_ Date Amount of contribution (\$) Greg + Debby Meyer Contributor address; City; State; Zip Code 12/16/2015 \$100.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor Date ut-of-state PAC (ID#: Amount of contribution (\$) \$400.00 Fort Worth, Texas 76102 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) \$500.00 City; State; Zip Code Broadacres Lane Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson 4 Date 5 Full name of contributor 7 Amount of contribution (\$) 12/16/2015 6 Contributor address; Zip Code 3100 W. 2nd St - Ste 420 \$500.00 8 Principal occupation / Job title (See Instructions) Date out-of-state PAC (ID#: Amount of contribution (\$) Contributor address; and St. - State; Zip Code 115 W. 2nd St. - Ste. 202 12/16/2015 \$ 200.00 Principal occupation / Job title (See Instructions) Date out-of-state PAC (ID#:\_ Amount of contribution (\$) Fort Worth, Texas 76136 Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_\_ Amount of contribution (\$) Mike + Patti Simonds Contributor address; City; State; Zip Code 614 Westminster Court \$100.00 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson 4 Date 7 Amount of contribution (\$) 12/16/2015 6 Contributor address; City; State; Zip Code 1000 Ballpark Way #300 Arlington Texas 76011 \$ 100.00 8 Principal occupation / Job title (See Instructions) out-of-state PAC (ID#:\_\_\_ Date Amount of contribution (\$) Thomas A. Bessant, Jr. Contributor address; City; State; Zip Code 2237 Winton Terrace West \$ 250.00 Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Janice Beckom Contributor address; Ci 12/31/2015 City; State; Zip Code \$ 368.10 8817 Turnberry Court Principal occupation / Job title (See Instructions Employer (See Instructions) Date Full name of contributor ut-of-state PAC (ID#:\_\_\_\_ Amount of contribution (\$) 12/26/2015 \$137.85 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson Tim Canas 12/9 2015 6 Contributor address; City; State; Zip Code 5824 Sugar Maple Drive 5824 Worth, Texas 7624 9 Employer (\$ 4 Date 5 Full name of contributor 7 Amount of contribution (\$) \$229.95 out-of-state PAC (ID#: Date Amount of contribution (\$) Alves key, Jr. Contributor address; City; State; Zip Code 5506 Emerald Park Blvd. 12/15/2015 \$460.20 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) 12/7/2015 \$41.80 Worth Texas 76132 Structions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_\_\_ Amount of contribution (\$) Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson 4 Date 5 Full name of contributor 7 Amount of contribution (\$) out-of-state PAC (ID#: 500.00 8 Principal occupation / Job title (See Instruction out-of-state PAC (ID#: Date Amount of contribution (\$) Jack & Janet Stevens Contributor address; City; State; Zip Code 100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) PSEL-PAC 12/28/2015 \$2,500.00 Fort Worth Texas 76102 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of contribution (\$) Michael H. Patterson Contributor address; City; State; Zip Code 2310 W. I-20 - Ste. 100 \$200.00 exas 76017 Principal occupation / Job title (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Dee B. Anderson 7 Amount of contribution (\$) 4 Date 5 Full name of contributor Good Government Fund 6 Contributor address; City; State; Zip Code 201 Main Street 12/28/2015 <sup>4</sup>2,500.00 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions out-of-state PAC (ID#:\_ Full name of contributor Date Amount of contribution (\$) Kassabian, Doyle + Weatherford 12/13/2015 City; State; Zip Code Contributor address; \$ 100.00 2261 Brookhollow Plaza Drive Principal occupation / Job title (See Instructions) Employer (See Instructions) Mike Moncrief Campaign Date Amount of contribution (\$) 12/8/2015 Contributor address; \$ 200.00 City; State; Zip Code Principal occupation / Job title (See Instructions Date Full name of contributor Amount of contribution (\$) ut-of-state PAC (ID#: Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Polling Expense Contributions/Donations Made By Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Dee B. Anderson 4 Date 5 Payee name County Republican Party City: State; Zip Code \$1,250.00 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Check if Austin, TX, officeholder living expense EXPENDITURE Fees - Filing Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Eppstein Group, Inc. 12/30/2015 City; State; Zip Code Amount (\$) Plaza **\$3,544.41** Fort Worth, Texas 76109 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Consulting Expense Check if Austin, TX, officeholder living expense **EXPENDITURE** Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH 12/25/2015 Piryx, Inc. City; State; Zip Code Amount (\$) 649 Mission Street #204 \$132.21 San Francisco, CA Check if travel outside of Texas. Con-**PURPOSE** OF Check if Austin, TX, officeholder EXPENDITURE Fees Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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 B<br>Candidate/Officeholder/Politica<br>Credit Card Payment |   | /ages/Contract Labor Other  | Out Of District<br>(enter a category not listed above) |
|--|---|---|--|
| 1 Total pages Schedule F1:   |   |   | er ID (Ethics Commission Filers)                       |
| 4 Date<br>  2/20/2015<br>6 Amount (\$)   | 7 Payee address; City; State; Zip Code  |   |  |
| \$600.00   | 3832 El Campo Aven<br>Fort Worth, Texas   | 76107   | ,  |
| PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)  Solicitation/ Fundraising Expense | (b) Description  Check if travel outside of Te  Check if Austin, TX, offi | •  |
| 9 Complete ONLY if direct expenditure to benefit C/Oh                                    | Candidate / Officeholder name   | Office sought   | Office held  |
| Date   | Payee name  |   |  |
| Amount (\$)  | Payee address; City; State; Zip Code  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)  | Description Check if travel outside of Te. Check if Austin, TX, office    |  |
| Complete ONLY if direct expenditure to benefit C/OH                                      | Candidate / Officeholder name   | Office sought   | Office held  |
| Date   | Payee name  |   | TARRA  OI6 JAN  FRANI FRANI FRANI                      |
| Amount (\$)  | Payee address; City; State; Zip Code  |   | NT COUNT 15 PH 3: (PHILLIPS ADMINISTRA:                |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)  | Description Check if travel outside of Te Check if Austin, TX, office     | as. Complete Schedule                                  |
| Complete ONLY if direct expenditure to benefit C/OH                                      | Candidate / Officeholder name   | Office sought   | Office held  |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED                                      |   |   |  |