Texas Ethics Commission

Austin, Texas 78711-2070

(512) 463-5800

	TE / OFFICEHOLDER N FINANCE REPORT		FORM C/ COVER SHEET F	-
The C/OH Instruction	Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	-Mesure First Christopher	MI	OFFICE USE ON Date Received	ILY
NAME	NICKNAME LAST	SUFFIX	2012 HAY	WALLE
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	Аропессировох; APT/SUITE#; CITY; P.O. BOX.766 Hemps		Date Hand-delivered or Postmarked	RECEIVE
change of address		77445	Receipt # Amount	SS NA
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (832) 800-4533	EXTENSION	Date Processed 3	LERK
6 CAMPAIGN TREASURER NAME	MS/MRSTME FIRST MYTTE NICKNAME LAST	MI	Date Imaged	WALLER
7 CAMPAIGN TREASURER ADDRESS (residence or business)	Carson street ADDRESS (NO POBOX PLEASE); APT/SUITE #; 1735 10th St, Her	city: state; npstead, TV.	~~!!!! ~	OUNTY CLERK
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (979) 530-5306	EXTENSION		
9 REPORT TYPE	January 15 30th day before election July 15 X 8th day before election	Exceeded \$500	15th day after campaign treasurer appointment (officehokler only) Final report (Attach C/OH - FF	र)
10 PERIOD COVERED	Month Day Year 4 / 19 / 2012 THROUGH	Month Day 5 / 1 9 /	Year 2012	· ·
11 ELECTION	Month ELECTION DATE Day Year 5/29/2012	Runoff C	General Specia	1
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (I'Known) Waller (Commissi	oner, Pct. 1	
<u></u>	GO TO PAG	iE 2		

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PO Box 12070

Austin Texas 78711-2070

(512) 463-5800

(TDD 1-800-735-2989)

lexas Etnics Commission	n P.O. Box	12070 Austin, lexas 78711-2070 (512) 463-58	300 (100 1-800-735-2989)
CANDIDA1 SUPPORT	-	SEHOLDER REPORT:	FORM C/OH COVER SHEET PG 2
14 C/OH NAME	Christa	opher Lee 15 AC	CCOUNT # (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOT	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY P HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY R	S OR OFFICEHOLDER'S KNOWLEDGE OR
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
		COMMITTEE CAMPAIGN TREASURER NAME	
additional pages			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS). UNLESS ITEMIZED	\$ Ø
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 450.00
EXPENDITURE TOTALS	3. TOTAL P	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ Ø
	4. TOTAL	POLITICAL EXPENDITURES	\$ 3,986.64 \$ 519.03
		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY DRTING PERIOD	\$ 519.03
LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$ 1,850.00
No	STACY WEGNE STACY WEGNE tary Public, State of My Commission Exp EBRUARY 29, 2	R me under Title 15, Election Code. Texas ires	nation required to be reported by
AFFIX NOTARY STAM			
SACUNE	or I Val	J., 20 <u>10</u> , to certify which, witness my ha Stacutillaner	ind and seal of office. CSR
Signature of officer admi	nistering oath	Printed name of officer administering oath T	itle of officer administering oath

Texas Ethics Commission

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Austin, Texas 78711-2070

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	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS		SCHEDULE A
The	Instruction Guide explains how to complete this	; form.	1 Total pages Sch	edule A:
2 FILER NAME	Christopher Lee		3 ACCOUNT # (E	thics Commission Filers)
4 Date	5 Full name of contributorout-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
4-21-2012	Mark Lee 6 Contributor address, City, State; Zip Code 5411 Queen sloch DR		\$250.00	
	HOU, TX 77096		(If travel outside	I of Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See	Instructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	C.C. Li Contributor address; City; State; Zip Code)
4-22-2012	Contributor address: City; State; Zip Code 6213 SKyline DR.#200 [100, TX. 77057		\$200.00	
	400,14. 7057		(If travel outside	of Texas, complete Schedule T)
Principal occuj	pátion 7 Job title (See Instructions)	Employer (See	Instructions)	
Date	Full name of contributor 🔲 out-of-state PAC (ID#_)	Amount of	In-kind contribution
			contribution (\$)	description (if applicable)
	Contributor address; City; State; Zip Code			1
				1
			(if travel outside	I of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	•
Date	Full name of contributor 📋 eut-et-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code			
			*	
Principal occu	pation / Job title (See Instructions)	Employer (See		of Texas, complete Schedule T)
Date	Full name of contributor [] out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	Contributor address; City: State; Zip Code			
				1
			(If travel outside	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See	Instructions)	
if (ATTACH ADDITIONAL COPIES (contributor is out-of-state PAC, please see inst			requirements.

Texas Ethics Commissio	on P.O. Box 12070	Austin, Texas 787	11-2070	(512) 463-5800	(TDD 1-800-735-:
POLITICAL	EXPENDITURES	5			SCHEDULE F
	EXPENDIT	URE CATEGORIE	S FOR BOX 8	(a)	
AdvertisIng Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expens Legal Services Food/Beverage Expense Polling Expense Printing Expense		Contract Labor raising Expense strict /Rental Expense	Loan Repayment/ Transportation Equ Contributions/Dona Candidate/Offic OTHER (enter a ca	ipment & Related Expens
1 Total pages Schedule F:	2 FILER NAME	OPHER Y.			# (Ethics Commission Fil
4 Date 4-20-2012	5 Payee name Office Dep				
6 Amount (\$)	7 Payee address; City;				
11.90	H67				
8 PURPOSE	(a) Category (See categories listed at t	he lop of this schedule)	(b) Descriptio	on (If travel outside of Texa:	s, complete Schedule T)
OF EXPENDITURE	office overhead		COPY	Paper	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder na H	ame	Office sou	ght	Office held
Date	Payee name				<u> </u>
4-21-2012	Hemosterd Seafo	of Restaur	ant		
Amount (\$)		State; Zip Code			
78.13	U.S. 290, Hemp	stead, TX.			
PURPOSE	Category (See categories listed at th	e lop of this schedule)	Description	n (If travel outside of Texas	, complete Schedule T)
OF EXPENDITURE	Food/Beverage Expor	×~0	meetin	with const	twents
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder na	me	Office soug	ht	Office held
Date	Payee name				
4-21-2012	Walgreens				
Amount (\$)	Payee address; City;	State; Zip Code			
24.78	Katy, T	×			
PURPOSE	Category (See calegories listed at the	top of this schedule)	Description	(If travel outside of Texas,	complete Schedule T)
EXPENDITURE	office overhead		video to	rpes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder nar	ne	Office soug	nt	Office held
Date	Payee name				
4-23-2012	FedEx Office	<u>ca</u>		·	·
Amount (\$)	Payee address; City;	State; Zip Code			
10.83	Ka	ty.Tr.			
PURPOSE	Category (See categories listed at the	lop of this schedule)	Description	(If travel outside of Texas, c	omplete Schedule T)
EXPENDITURE	Advertising Exp	ense	copie	-5	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officer older nam	e	Office sough	t	Office held

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Texas Ethics Commissi	on P.O. Box 12070	Austin, Texas 78711-2	070 (512)	463-5800	(TDD 1-800-735-2989)
POLITICAL	EXPENDITURES				SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorlals Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	JRE CATEGORIES FC Salaries/Wages/Contr SolicitatIon/Fundraisir Travel In District Travel Out Of District Office Overhead/Ren uide explains how to con	act Labor Loa g Expense Trai Cor al Expense OTh	tributions/Donati Candidate/Office	oment & Related Expense
1 Total pages Schedule F:		OPHER Y. LE	E	3 ACCOUNT #	(Ethics Commission Filers)
4 Date 4-24-2012 6 Amount (\$)	7 Payee address; City;) State; Zip Code			,
57.47	Hempstee				
8 PURPOSE OF EXPENDITURE 9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	(a) Category (See categories listed at th Food Beverse E Candidate / Officeholder na		Description (Iltrav		complete Schedule T)
Date 4-24-2012 Amount (\$)	Payee name TX. Domocrat Payee address; City;	State: Zip Code			
300. ന	Austi				
PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/O	Category (See categories listed at the Contributions/Don Candidate / Officeholder nar	ations	Description (If trave Fundrates		ſ
Date 4-25-2012		s Walmart			
Amount (\$) #7,50		State; Zip Code Stand, TX.			
PURPOSE OF EXPENDITURE	Category (See categories listed at the Office Overhead		Description (If trave		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder nam	ie i	Cimpailor Office sought	- Juppli	Office held
Date 4-27-2012	Payee name Tx. Democ	ratic Party State: Zip Code	· · · · · · · · · · · · · · · · · · ·		
Amount (\$)	Payee address; City; s Austic	•	· ,		ί, Έλληνα τη διατογοριατική τη διατογομική τη διατογομ Για τη διατογομική τη
PURPOSE OF EXPENDITURE	Category (See categories listed at the t Contributions/D	onctions		outside of Texas, con	tim
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder nam	e C	ffice sought		Office held
	ATTACH ADDITIONAL	COPIES OF THIS SCHE	DULE AS NEEDI	ED	

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Texas Ethics Commissio	n P.O. Box 12070	Austin, Texas 787	711-2070 (512) 463-5800	(TDD 1-800-735-29
POLITICAL	EXPENDITURE	5			SCHEDULE F
	EXPENDIT	URE CATEGORIE	S FOR BOX 8(a		
Advertising Expense	Gift/Awards/Memorials Expense			Loan Repayment/F	Reimbursement
Accounting/Banking	Legal Services	Solicitation/Func	Iraising Expense		ipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In Distric	-	Contributions/Dona	ations Made By
Event Expense Fees	Polling Expense Printing Expense	Travel Out Of D	istrict /Rental Expense		eholder/Political Committee
		Guide explains how t			ategory not listed above)
Total pages Schedule F:	2 FILER NAME	FOPHER Y.			# (Ethics Commission Filer
Date	5 Payee name				
4-28-2012	Austi	State: Zip Code	Meters		
Amount (\$)	7 Payee address; City	; State; Zip Code		·	· · · · · · · · · · · · · · · · · · ·
3.50	AUS	tin IX.			
	(a) Category (See categories listed at	the top of this schedule)	(b) Description	(If travel outside of Texa	s, complete Schedule T)
	Transportation E	Lamaa	Parking	Car SD W	notio-
Complete ONLY if direct	Candidate / Officeholder n	ame	Office sough		Officeheld
expenditure to benefit C/OF	l 		<u> </u>		
Date	Payee name		() I ()		
4-28-2012	Austin	Parking State: Zip Code	Meters		
Amount (\$)					
3.00	Aust	inity.			
PURPOSE	Category (See categories listed at t	he lop of this schedule)	Description	(If travel outside of Texas	, complete Schedule T)
EXPENDITURE	ransportation E	xpense	Parkin f	OCSD No	etine
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder na	ame	Office sought		Office held
Date	Payee name		11		·····
4-28-2012	Austin	Parking 1	Hoters.		
Amount (\$)		State; Zip Code			
3.00	Austin	n, TX.			
PURPOSE	Category (See categories listed at th	e top of this schedule)	Description (f travel outside of Texas,	complete Schedule T)
	ransportation E	X Denal	Parking	Pro SD	Mating
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cardidate / Officeholder na	me	Office sought		Office held
Date	Payee name	~ ^	·	······································	
1-29-2012	Home	Depot			
Amount (\$)	Payee address; City;	State; Zip Code			·····
13.49	K	aty.TX.			
PURPOSE	Category (See categories listed at the	top of this schedule)	Description (If	travel outside of Texas, c	omplete Schedule T)
	Office Overhead	k l	Campai	m Suga	lies - since
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder nar	ne	Office sought	0. 2044	Office held
····· ·· _····	ATTACH ADDITIONAL	COPIES OF THIS S	CHEDULE AS NI	EDED	

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Texas Ethics Commissio	on P.O. Box 12070	Austin, Texas 78711-2070	(512) 463-5800	(TDD 1-800-735-29
POLITICAL	EXPENDITURES	;		SCHEDULE F
				·····
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expensi Legal Services Food/Beverage Expense Polling Expense Printing Expense	JRE CATEGORIES FOR BO. Salaries/Wages/Contract Labo Solicitation/Fundraising Expen Travel In District Travel Out Of District Office Overhead/Rental Expen uide explains how to complete t	r Loan Repayment/, se Transportation Eq Contributions/Don Candidate/Offic ise OTHER (enter a c	ipment & Related Expense
1 Total pages Schedule F:	2 FILER NAME			# (Ethics Commission Filer
& qu	······································	OPHER Y. LEE		
4 Date 4-29-2012	5 Payee name	۶ ۲		_
6 Amount (\$)	7 Payee address; City;	State: Zip Code		······
18,97	Kert	YITX.		
8 PURPOSE	(a) Category (See calegories listed at I	he top of this schedule) (b) Descr	iption (If travel outside of Texa	s, complete Schedule T)
OF EXPENDITURE	Office Overhead) Can	paign Suppl	ied -signs
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder na	ume Office	sought	Office held
Date	Payee name		· · · · · · · · · · · · · · · · · · ·	
4-30-2012	Exxon	Mobil		
Amount (\$)	Payee address; City;	State: Zip Code		
5.10	Brook	shire, TX		
PURPOSE	Category (See categories listed at th	e top of this schedule) Descri	otion (If travel outside of Texas	, complete Schedule T)
	Office Overhead	Campa	n Supplies-	۹۵ <
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder na		ought	Office held
Date	Payee name			
4-30-2012		, the Box		
Amount (\$)		State; Zip Code		
12.28	Hen p ste	end, TX		
PURPOSE	Category (See categories listed at the	top of this schedule) Descrip	tion (If travel outside of Texas,	complete Schedule T)
OF EXPENDITURE	Food Beveran E	xame food	annim MR	rers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder nan	ne Office so	bught	Office held
Date	Payee name	<u>^</u>		······································
5-1-2012		Office		
Amount (\$)		State; Zip Code		
34.11	Kety	$,T\chi$,		
PURPOSE	Category (See categories listed at the	op of this schedule) Descript	ion (If travel outside of Texas, o	omplete Schedule T)
	Office Overhead	2 Compai	so Supplies.	-copies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder nam	e Office so		Office held
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POLITICAL	EXPENDITURES				SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	RE CATEGORIES Salaries/Wages/C Solicitation/Fundr Travel In District Travel Out Of Dis Office Overhead/ Jide explains how to	Contract Labor 'aising Expense strict 'Rental Expense	Contributions/Dona Candidate/Offic DTHER (enter a ca	ipment & Related Expense
1 Total pages Schedule F: SGCL	2 FILER NAME	OPHER Y.		····	# (Ethics Commission Filers
5-1-2012	5 Payee name	Post OFF, State: Zip Code	er	- 4	
6 Amount (\$) 14.16		state; Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See calegories listed at the Office Overhead	e top of this schedule)	(b) Description (II	travel outside of Texa	s, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder nar	me	Office sought	<u>, </u>	Office held
Date 5-2-2012 Amount (\$) 20,42	Payee address; City;	t Produce state: zip code ~psterd, Tp			
PURPOSE OF EXPENDITURE	Category (See categories listed at the Sod Perepage C Candidate / Officeholder nam	Expinse	Description (III Political A Office sought	dvertising	complete Schedule T)
Date 5-2-2012	Payee name Denni	, , S			
Amount (\$) 32.91	Payee address; City; S	state: Zip Code			
PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct	Category (See categories listed at the Candidate / Officeholder nam	xpense	Description (If the feed Composition Office sought	avel outside of Texas,	complete Schedule T)
expenditure to benefit C/OH Date	Payee name In N_ Du.	4			
5-4-2012 Amount (\$)	Payee address; City; S	tate; Zip Code		<u></u>	<u></u>
22.65	(<	ry, Tx.			
	Category (See categories listed at the to	pp of this schedule)	Description (If the	Ad the of Texas, c	omplete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	, , , , , , , , , , , , , , , , , , , 	Office sought		Office held
	ATTACH ADDITIONAL C	OPIES OF THIS SO	CHEDULE AS NEE	DED	

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Texas Ethics Commissi	on P.O. Box 12070	Austin, Texas 787	11-2070 (5	12) 463-5800	(TDD 1-800-735-2989)
POLITICAL	EXPENDITURES				SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	JRE CATEGORIES Salaries/Wages/C Solicitation/Fundr Travel In District Travel Out Of Dis Office Overhead/ ulde explains how to	Contract Labor aising Expense strict Rental Expense	Loan Repayment/F Transportation Equ Contributions/Dona Candidate/Offic OTHER (enter a ca	ipment & Related Expense
1 Total pages Schedule F:		opher y.	LEE	3 ACCOUNT	# (Ethics Commission Filers)
4 Date 5-4-2012 6 Amount (\$)	5 Payee name Krosed	State: Zip Code			
16.38	7 Payee address; Chy: Kat	y, TX.			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at th Food Beverage		Political		s, complete Schedule T) K Exprss
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder na DH	me	Office sought		Office held
Date 5-5-2012	Payee name Rando	Ils			
Amount (\$) 58.92	Payee address; City; Kent	State: Zip Code	· · · · ·		
PURPOSE OF EXPENDITURE	Category (See categories listed at the Food Bevercese Candidate / Officeholder name		Description (II Political A Office sought	Avertiside of Texas,	~
Complete <u>ONLY</u> if direct expenditure to benefit C/O					
Date 5-6-2012	Payee name Boos	+			
Amount (\$) 66.15		State; Zip Code	-		
PURPOSE OF EXPENDITURE	Category (See categories listed at the OFFice Overhace)	top of this schedule)	N	travel outside of Texas,	complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder nam	ie	Office sought		Office held
Date 5-9-2012	Payee name Hen piten	O Secto	e l		
Amount (\$) みし、みう	Payee address; City; S	state: Zip Code Keal, T.X.			
	Category (See categories listed at the li Food Beverage		Neet with	ravel outside of Texas, c	nts
Complete <u>ONLY</u> if direct expenditure to benefit C/OI			Office sought		Office held
<u> </u>	ATTACH ADDITIONAL (COPIES OF THIS SO	HEDULE AS NE	EDED	

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Revised 09/28/2011

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r	on P.O. Box 12070	Austin, Texas 787	1-2070 (512) 463-5800	(TDD 1-800-7
POLITICAL	EXPENDITURES	6			SCHEDULI
	EXPENDIT	URE CATEGORIES	FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expens Legal Services Food/Beverage Expense Polling Expense Printing Expense		ontract Labor Lo aising Expense Tr Co trict Rental Expense O	ontributions/Donation Candidate/Officer	ment & Related Ex
1 Total pages Schedule F:	2 FILER NAME	OPHER Y. (3 ACCOUNT #	(Ethics Commissio
4 Date 5-10-2012	5 Payee name	Post Off.	ce	1	······
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
22.00	www.US	ps.com			
8 PURPOSE OF	(a) Category (See categories listed at	the top of this schedule)	(b) Description (If tr	avel outside of Texas, o	complete Schedule T)
EXPENDITURE	Office Overhead	٧	P.O. Bo	x Ronta	<u>L</u>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder n H	ame	Office sought		Office held
Date	Payee name				
5-11-2012 Amount (\$)	Payee address; City;	State Zip Code	<u> </u>		
1,577,75	,	Iona			
PURPOSE OF EXPENDITURE	Category (See categories listed at the Pol's Hice & Adver	te top of this schedule)	Description (If tra	veloutside of Texas, co 5	omplete Schedule T)
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• • • • • • • • • • • • •	Payee name			· · · · · · · · · · · · · · · · · · ·	
Date					
5-11-2012		on			
5-11-2012 Amount (\$)	Payee address; City,				······.
5-11-2012	Payee address; City,	or State; Zip Code Jon . Cor			
5-11-2012 Amount (5) G.28 PURPOSE	Payee address; City, Ama Category (See categories listed at th	zon.com			mplete Schedule T)
5-11-2012 Amount (5) G.28 PURPOSE	Payee address; City, Amage Category (See categories listed at th OFF, ce. Overhead Candidate / Officeholder name	gon . Com e top of this schedule)	Description (If Irav Office Sought		mplete Schedule T) Office held
S-11-2012 Amount (\$) G.28 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OH Date	Payee address; City, Amage Category (See categories listed at the OFF, ce. Overhead Candidate / Officeholder name	yon . Com e top of this schedule)) me	Office Su		
S-11-2012 Amount (\$) G.28 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OH Date 5-11-2012	Payee address; City, Amage Category (See categories listed at the OFF, ce. Overhead Candidate / Officeholder name	yon . Com e top of this schedule)) me	Office Su		
S-11-2012 Amount (\$) G.28 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OH Date	Payee address; City, Amage Category (See categories listed at the OFF) ce Overhea Candidate / Officeholder nate Payee name Payee address; City,	gon . Com e top of this schedule)	Office Su		
5-11-2012 Amount (\$) G.2-8 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OH Date 5-11-2012 Armount (\$)	Payee address; City, Amage Category (See categories listed at the OFF) ce Overhea Candidate / Officeholder nate Payee name Payee address; City,	yon . Com e top of this schedule)) me on State; Zip Code n. Com	Office Su	opplies	Office held

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POLITICAL	EXPENDITURES			SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense	IRE CATEGORIES FOR E Salaries/Wages/Contract L Solicitation/Fundraising Ex Travel In District Travel Out Of District Office Overhead/Rental E uide explains how to comple	abor Loan Repayment/ pense Transportation Eq Contributions/Don Candidate/Offic kpense OTHER (enter a c	uipment & Related Expense
1 Total pages Schedule F:	2 FILER NAME CHRIST	OPHER Y. LEE	3 ACCOUNT	# (Ethics Commission Filers
4 Date 5-11-2012 6 Amount (\$)	7 Payee address; City;	State; Zip Code	······································	
20.16	Kat	y,TX.		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at th Fosd / Beyorca	e top of this schedule) (b) De	iscription (If travel outside of Texe	s, complete Schedule T)
Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder ha	me Offi	ce sought	Office held
Date 5-14-2012	Payee name McDon	alds		
Amount (\$) 5.94	Payee address; City; Heng	state; Zip Code Sterlitx.		
PURPOSE OF EXPENDITURE	Category (See categories listed at the	top of this schedule) Des Expose Fee	scription (If traveloutside of Texas	i, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder nan	ne Offic	e sought	Office held
Date 4-2-3-2012	Payee name Eileen	Birney		
Amount (\$) J-D, D	Payee address; City;	State; Zip Code avis Ule, Ty,		
PURPOSE	Category (See categories listed at the	top of this schedule) Des	cription (If travel outside of Texas,	complete Schedule T)
EXPENDITURE Complete <u>QNLY</u> if direct	Office Overhead Candidate / Officeholder nam	e Offici	bussement for (OrficeInetd
expenditure to benefit C/OH				
Date 4-30-2012	Payee name TV, Do	mocratic Pa	rty	
Amount (\$) 31,06	Payee address; City; S Aust)	
PURPOSE OF	Category (See categories listed at the to	op of this schedule) Desc	ription (If travel outside of Texas, a	complete Schedule T)
EXPENDITURE	Campai on Expn	se na	me Tags	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				Office held
	ATTACH ADDITIONAL (COPIES OF THIS SCHEDUL	EAS NEEDED	

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Texas Ethics Commissio	n P.O. Box 12070	Austin, Texas 78711-20	70 (512) 4	163-5800	(TDD 1-800-73
POLITICAL	EXPENDITURE	S			SCHEDULE
Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees	Gift/Awards/Memorlals Expen Legal Services Food/Beverage Expense Polling Expense Printing Expense	TURE CATEGORIES FOR se Salaries/Wages/Contrac Solicitation/Fundreising I Travel In District Travel Out Of District Office Overhead/Rental Guide explains how to comp	t Labor Loar Expense Tran Cont C Expense OTH	sportation Equ ributions/Dona andidate/Offic	Reimbursement ipment & Related Expe tions Made By eholder/Political Comm tegory not listed above
1 Total pages Schedule F:	2 FILER NAME	TOPHER Y. LEE	T	3 ACCOUNT	# (Ethics Commission I
4 Date 5-6-2012	5 Payee name 1400stor		I		
6 Amount (\$)		/; State; Zip Code			
100.00	ľ	Houston, T.X.			
8 PURPOSE	(a) Category (See categories listed a	t the lop of this schedule) (b)	Description (If trave	I outside of Texas	, complete Schedule T)
	Donation/Cont	ribution Fu	Indraisr	Done	torm
9 Complete <u>QNLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder r		ffice sought		Office held
Date	Payee name				
5-14-2012	U.S.				
Amount (\$)		; State; Zip Code			
532.15	Her	pstend, TX.			
PURPOSE	Category (See categories listed at	the top of this schedule)	escription (If travel	outside of Texas,	complete Schedule T)
	Campaison Exp	mse Po	A Quett	duertis	119 /
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate) Officeholder h	ame Of	fice sought		Office held
Date 5-18-2012	Payee name	uter Solut.	m 3		
Amount (\$)	Payee address; City;	State; Zip Code			
214.93	ten	psterd, TX.			
PURPOSE	Category (See categories listed at th	he top of this schedule) De	escription (If travel o	utside of Texas, (complete Schedule T)
	Lampaison Exp.	-se Po	A fict A	lvertix) 65
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Date	Payee name	00			
5-18-2012	<u> </u>				
Amount (\$)		State; Zip Code			
512.14	Har	psteed, Tx.			
PURPOSE	Category (See categories listed at th	e top of this schedule) De	scription (If travel or	utside of Texas, co	omplete Schedule T)
· · · · · · · · · · · · · · · · · · ·	an prize Expr	nol Dol	tical Ada	10/ 4,51 ~	•
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cardidate Officeholder nar	me Offic	ce sought	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Office held

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Revised 09/28/2011

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