FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 33 ΜI FIRST CANDIDATE / MS/MRS/MR OFFICEHOLDER Rand NAME SUFFIX NICKNAME LAST Henderson ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; CANDIDATE / **OFFICEHOLDER** PO BOX 1678 MAILING ADDRESS Change of Address CONROE, TX 77304 Date Processe Date Imaged MI MS/MRS/MR **FIRST** CAMPAIGN TREASURER NAME Christina SUFFIX LAST NICKNAME Henderson APT / SUITE #; CITY; STATE: ZIP CODE STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN TREASURER **ADDRESS** Willis TX 77318 9917 E Shore Dr (Residence or Business) AREA CODE PHONE NUMBER **EXTENSION** CAMPAIGN TREASURER 832.521.8489 PHONE 8 REPORT TYPE Runoff 15th day after campaign treasurer 30th day before election January 15 appointment (officeholder only) Final Report (Attach C/OH-FR) July 15 Χ 8th day before election Exceeded \$500 limit Month Day Year PERIOD Day Year COVERED THROUGH 02/20/2016 01/22/2016 ELECTION DATE **ELECTION TYPE** 10 ELECTION Other Month Day Year X Primary Runoff 03/01/2016 General Special 12 OFFICE SOUGHT (if known) 11 OFFICE OFFICE HELD (if any) None Sheriff **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT	& IOIALS			2 of 33	
13 C / OH NAME	Henderson, Rand		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	Lcandidate / officebolde	political contributions accepted or political expenditure. These expenditures may have been made without the officeholders are required to report this information.	ne candidate's or officel	holder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	X GENERAL	Citizen Super PAC			
	COMMITTEE ADDRESS				
	SPECIFIC	PO BOX 341028			
		Austin, TX 78734		***	
		COMMITTEE CAMPAIGN TREASURER NAME			
		McAlpin, Luke			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	3		
		PO BOX 341028			
		Austin, TX 78734			
16 CONTRIBUTION TOTALS	TOTAL POLITI LOANS, OR GI	CAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THUS AND THE STREET OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$ 0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 24,520.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			\$ 0.00	
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 53,076.30	
CONTRIBUTION BALANCE	REPORTING F			\$ 50,570.76	
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL OUTSTANDING LOANS AS C RTING PERIOD	OF THE LAST DAY	\$ 0.00	
17 AFFADAVIT		I swear, or affirm, under penalty true and correct and includes all under Title 15, Election Code.			
	JACKIE LUNSFORD NOTARY PUBLIC STATE OF TEXAS My Commission Expires 04-0-	1-2019 Rand Deno	Candidate or Officehold	der	
	TARY STAMP / SEAL A	_	2	2	
Swo <u>rn</u> to and subs	cribed before me, by the	said Rand Henderson certify which, witness my hand and seal of office.	, this the	day	
Signature of offi	Sou Local cer administering	Jackie Luns Ford Printed name of officer administering	No Yav y Title of efficien	- State 11X administering oath	

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 33 19 Filer ID 18 FILER NAME Henderson, Rand 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 24,520.00 SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ Х SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ 53,076.30 SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ Х SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12.

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/33	
FILER NAME Henderson, Rand			3 Filer ID	
	5 Full name of contributor out-of-state PAC (ID#:_		7 Amount of Contribution (\$)	
01/28/2016	Altemus, John Kent		· · · · · · · · · · · · · · · · · · ·	\$100.
-	6 Contributor address; City; State; Zip Code			
	28615 Cedarwood Dr			
	Shenandoah, TX 77381	5. Employer (See Instructions)		
Principal occup	eation / Job title (See Instructions)	9 Employer (See Instructions)		
Date	Full name of contributor		Amount of Contribution (\$)	
02/11/2016	Bell, Richard			\$100.
ľ	Contributor address; City; State; Zip Code			
	8 Painted Cup Court	•		
	The Woodlands TV 77390			
Principal occus	The Woodlands , TX 77380 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Principal occup	auton 7 500 title (See Institutions)	Zinployor (Goo met detailer)		
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of Contribution (\$)	
01/29/2016	Bennett, Roger			\$500
,	Contributor address; City; State; Zip Code			
	1103 S Fenner Ave			
	Cleveland , TX 77327			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	 }	
		<u></u>	<u> </u>	
Date	Full name of contributor ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	
02/03/2016	Bozeman, Casey	·		\$100.
	Contributor address; City; State; Zip Code			
	10 Wyckham Cir			
	The Woodlands, TX 77382			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	<u></u>
01/30/2016	Bozeman, Steve			\$4,000
	Contributor address; City; State; Zip Code			
	31 Los Encinos CT			
	Magnolia, TX 77354			
Dringing! goars	pation / Job title (See Instructions)	Employer (See Instructions)	<u>.</u> I	
Principal occup		i '		

MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	_E A1
The Instruc	The Instruction Guide explains how to complete this form.				
FILER NAME	TELEN STATE			Filer ID	
Henderson, I			Ļ	Amount of Contribution (C)	
Date 02/16/2016	5 Full name of contributor out-of-state PAC (ID#:_ Cogdill, Derek)	ĺ	Amount of Contribution (\$)	\$150.00
	6 Contributor address; City; State; Zip Code 14600 Huffmeister				
	Cypress, TX 77429				
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	·			. <u> </u>	
Date	Full name of contributor ut-of-state PAC (ID#:_)		Amount of Contribution (\$)	
01/29/2016	Cook, Lee				\$5,000.00
	Contributor address; City; State; Zip Code				
	6105 Westline Dr				
	Houston, TX 77036				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ഥ ;)	<u> </u>	
•	,				
, Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
02/17/2016	D'Agostino, Bryan				\$1,000.00
	Contributor address; City; State; Zip Code		1		
	7715 Wedgewood Ln				
	Houston, TX 77055				
Dringinal occur	pation / Job title (See Instructions)	Employer (See Instructions	;) 		
Frincipal occu	pallon 7 30b and (300 mandons)		,		
Date	Full name of contributor			Amount of Contribution (\$)	
02/11/2016	Dunstone, Joan				\$100.00
	Contributor address; City; State; Zip Code				
	62 E Racing Cloud Ct				
	The Woodlands, TX 77381		Ĺ		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor ut-of-state PAC (ID#:_	}		Amount of Contribution (\$)	
02/11/2016	Fasone, Anthony			• • • • • • • • • • • • • • • • • • • •	\$250.00
	Contributor address; City; State; Zip Code				
	54 S Warbler Bend Cir				
D	The Woodlands, TX 77382	Faralayay (Can Instructions	Γ		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instruc	tion Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/33	
I LELIX IVANIE			3 Filer ID	
Henderson, R	······································		- · · · · · · · · · · · · · · · · · · ·	
02/10/2016	5 Full name of contributor		7 Amount of Contribution (\$)	\$1,000.00
-	6 Contributor address; City; State; Zip Code 25511 Budde Rd			
	The Woodlands, TX 77380			
Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions)		
Data I	Full name of contributor Out-of-state PAC (ID#:	· · · · · · · · · · · · · · · · · · ·	Amount of Contribution (\$)	
Date 02/16/2016	Hagerman, Linda		Amount of Continuous (4)	\$100.00
ŀ	Contributor address; City; State; Zip Code			
	24800 I 45 N Ste 100			
	Spring, TX 77386			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/11/2016	Hantman, Jerry			\$100.00
ľ	Contributor address; City; State; Zip Code			
	87 W. Racing Cloud St			
	The Woodlands, TX 77381		· · · · · · · · · · · · · · · · · · ·	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/09/2016	Harlan, W Scott			\$500.00
	Contributor address; City; State; Zip Code			
İ	54 Cottage Mill Place			
	The Woodlands, TX 77382			
Principal occup	action / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/11/2016	Harpster, Greg			\$100.00
	Contributor address; City; State; Zip Code			
	22 Pleasure Cove Dr			
	The Woodlands, TX 77381			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this for	1 Total pages Schedule Sch: 4/10 Rpt: 7/33			
2	FILER NAME Henderson,	Rand		3 Filer ID	"	
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Hausman, Peggy 6 Contributor address; City; State; Zip Code 11 Greenridge Forest Ct The Woodlands , TX 77381			7 Amount of Contribution	en (\$) \$200.00	
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/10/2016 Hudson, Charles Contributor address; City; State; Zip Code 38 Leeward Cove Dr The Woodlands, TX 77381		Amount of Contribution	on (\$) \$200.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date 02/11/2016	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution	on (\$) \$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/05/2016	Full name of contributor out-of-state PAC (ID#: Jones, Edwin Contributor address; City; State; Zip Code 40 Waterway Ct The Woodlands, TX 77380		Amount of Contribution	on (\$) \$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date 02/09/2016	Full name of contributor out-of-state PAC (ID#: Kuykendall, James Contributor address; City; State; Zip Code 27013 N Harlan Ln Conroe, TX 77385)	Amount of Contribution	on (\$) \$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/10 Rpt: 8/33 3 Filer ID 2 FILER NAME Henderson, Rand 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#:_ \$40.00 02/10/2016 Lawrence, Ronald 6 Contributor address; City; State; Zip Code 158 S Winterport Cir The Woodlands, TX 77382 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 02/11/2016 Leibold, Kathy Contributor address; City; State; Zip Code 3 Twelve Pines Court The Woodlands, TX 77381 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$50.00 02/03/2016 Lisiewski, Walter Contributor address; City; State; Zip Code 33 Rustic View Ct The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#:_ Date Full name of contributor \$100.00 Lockhart, Charles 01/26/2016 Contributor address; City; State; Zip Code 4002 Oakside Dr Houston, TX 77053 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$50.00 01/27/2016 Love, Judith Contributor address; City; State; Zip Code 30 Fairway Park Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CONTRIBUTION	NS 		SCHEDUL	E A1
	The Instru	The Instruction Guide explains how to complete this form.				
	TLEIX WAVE			3	Filer ID	
	Henderson,	Rand	<u></u>			
	Date 02/11/2016	5 Full name of contributor Out-of-state PAC (ID#: Loveless, Dilyn)	7	Amount of Contribution (\$)	\$100.00
		6 Contributor address; City; State; Zip Code 7050 Wood Oak Dr				
		Bryan, TX 77808			_	
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)	·-	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/29/2016	Lynch, Sam				\$100.00
		Contributor address; City; State; Zip Code 2871 Bobville Rd				
		Montgomery , TX 77316				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		.,
	Date	Full name of contributor		Г	Amount of Contribution (\$)	
	02/04/2016	Marling, Kim				\$2,000.00
		Contributor address; City; State; Zip Code	(7,2,4	1		
		30 Tranquil Path				
		The Woodlands, TX 77380				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	01/24/2016	Martin, Brian				\$30.00
		Contributor address; City; State; Zip Code	***************************************	1		
		45 April Point Dr N				
		Montgomery, TX 77356				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
-	Date	Full name of contributor uut-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	02/03/2016	Mendes, George				\$25.00
		Contributor address; City; State; Zip Code				
		110 Gateway Park Pl				
		The Woodlands, TX 77380				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/33	
FILER NAME Henderson.	FILER NAME Henderson, Rand		3	Filer ID	
Date 02/03/2016	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
Principal occu	Oak Ridge North, TX 77385 pation / Job title (See Instructions)	Employer (See Instructions	<u>L</u>		
Date 02/01/2016	Full name of contributor out-of-state PAC (ID#_Miller, K Contributor address; City; State; Zip Code PO BOX 207 Porter, TX 77365			Amount of Contribution (\$)	\$200.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Date 01/28/2016	Full name of contributor out-of-state PAC (ID#:_ Morris, Jim Contributor address; City; State; Zip Code 17178 West FM 1097			Amount of Contribution (\$)	\$5,000.00
Dringing occu	Montgomery , TX 77356 spation / Job title (See Instructions)	Employer (See Instructions	;) 		
Philopa occi	paint 7 sob the (see instructions)		,	<u>.</u>	
Date 02/03/2016	Full name of contributor out-of-state PAC (ID#:_ Newman, George Contributor address; City; State; Zip Code 42 N Wyckham Cir)		Amount of Contribution (\$)	\$30.00
Principal occu	The Woodlands, TX 77382 upation / Job title (See Instructions)	Employer (See Instructions	<u>L</u> s)		
Date 02/17/2016	Full name of contributor out-of-state PAC (ID#:_Oller, Mel			Amount of Contribution (\$)	\$150.00
	Contributor address; City; State; Zip Code 27257 Kane Lane Conroe, TX 77385	,			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)	=	-
	L. T. Tables Commission	-1-1-1-1-1		37	1/1 O DAE

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/33	
TEET VOIVE		3 Filer ID		
Henderson, Rand				
Date 02/12/2016	5 Full name of contributor out-of-state PAC (ID#:_ Omohundro, John		7 Amount of Contribution (\$)	\$100.00
	6 Contributor address; City; State; Zip Code 14 Irish Moss PI			
	The Woodlands, TX 77381			
Principal occup	pation / Job title (See Instructions)	9 Employer (See Instructions))	
Sets I	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
Date 01/25/2016	Parks, David	,	, who are or contains asset, (c)	\$20.00
	Contributor address; City; State; Zip Code 219 Club Island Way			
	Montgomery, TX 77356			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor		Amount of Contribution (\$)	
02/10/2016	Redmond, Cinda			\$100.00
	Contributor address; City; State; Zip Code	1411444-411-4111-411-411-41-41-41-41-4		
	39 Leeward Cove Dr			
	The Woodlands, TX 77381		<u></u> .	
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
02/11/2016	Rosenblatt, Laurence			\$100.00
	Contributor address; City; State; Zip Code			
	15 Pleasure Cove Dr			
	The Woodlands, TX 77381			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor		Amount of Contribution (\$)	
02/03/2016	Sanders, Steve			\$100.00
	Contributor address; City; State; Zip Code			
	143 Split Rock Rd			
	Spring, TX 77381			
		Employer (See Instructions)		

	MONET	Ā	RY POLITICAL CONTRIBUTIONS		SCHEDULE		
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 9/10 Rpt: 12/33		
2	The IV AVI		3	Filer ID			
	Henderson,	,		╀			
4	Date 02/03/2016	5	Full name of contributor] ⁷	Amount of Contribution (\$)	\$25.00	
		6	Contributor address; City; State; Zip Code 122 W Shadowpoint Cir				
			The Woodlands , TX 77381				
8	Principal occu	ıpa	ion / Job title (See Instructions) 9 Employer (See Instruction	s)			
	1 112			_			
	Date		Full name of contributor		Amount of Contribution (\$)	****	
	02/06/2016		Schutzman, Caelen			\$150.00	
			Contributor address; City; State; Zip Code				
			2300 Union St Apt 2300A				
	Houston, TX 77007					.=	
	Principal occu	ipa	tion / Job title (See Instructions) Employer (See Instruction	s)			
H	Date	1	Full name of contributor out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)		
	02/11/2016		Steger, Edward			\$200.00	
		ļ	Contributor address; City; State; Zip Code	1			
			2 Pleasure Cove Dr				
			The Woodlands, TX 77381				
┝	Principal occu	.pa	tion / Job title (See Instructions) Employer (See Instruction	s)	· · · · · · · · · · · · · · · · · · ·	_	
F	Date	Т	Full name of contributor	Τ	Amount of Contribution (\$)		
	02/10/2016		West, Robyn			\$100.00	
			Contributor address; City; State; Zip Code	1			
			46 Pleasure Cove Dr				
	Dringing Lagge	156	Spring, TX 77381 tion / Job title (See Instructions) Employer (See Instruction) 			
	Pilitipal occi	ha	Limpleyer (See Instructions)	13)			
F	Date	T	Full name of contributor	T	Amount of Contribution (\$)		
	02/11/2016		Wilson, LC			\$100.00	
		ļ	Contributor address; City; State; Zip Code				
			6927 Texas Trace				
			Montgomery, TX 77316				
	Principal occu	.pa	tion / Job title (See Instructions) Employer (See Instruction	ıs)			
-					· · · · · · · · · · · · · · · · · · ·		
L							

MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo		es Schedule A1: 10 Rpt: 13/33		
2	FILER NAME Henderson,			3 Filer ID		
4				7 Amount of	f Contribution (\$)	\$50.00
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 02/11/2016	Full name of contributor out-of-state PAC (ID#:_ Yee, Alison Contributor address; City; State; Zip Code 22 Frontenac Way The Woodlands, TX 77382		Amount of	f Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	r)		
	Date 01/23/2016	Full name of contributor out-of-state PAC (ID#:_Yollick, Eric Contributor address; City; State; Zip Code PO Box 7571 Spring, TX 77387		Amount o	f Contribution (\$)	\$1,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office of Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing I Committee Legal Services Salarie	epayment/Reimbursement Solicitation/Fundralsing Expense Expense Travel in District Travel Out of District Travel Out of District Travel Out of District Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explains how to	
1 Total pages Schedule F1:		3 Filer ID
Sch: 1/20 Rpt: 14/33	Henderson, Rand	
4 Date	5 Payee name	
01/27/2016	ABI Digital	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$779.40	851 N FM 3083 E Conroe, TX 77303	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Signs
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	ought Office held
Date	Payee name	
02/09/2016	Adobe	·
Amount (\$)	Payee address; City; State; Zip	Code
\$32.46	345 Park Avenue	
	San Jose, CA 95110	
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 Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	ought Office held
Date	Payee name	,
02/13/2016	American Screen Graphics	
Amount (\$)	Payee address; City; State; Zip	Code
\$967.00	PO BOX 6988	
	Kingwood, TX 77325	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check it travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office s H	ought Office held

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Fees Fees Office Over/nead/Rental Expe Office Over/nead/Rental Expe Polling Expense Gitt/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Lab The Instruction Guide explains how to complete this form		head/Rental Expense ense pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
				lains how to con	nplete this form.		
1	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID
	Sch: 2/20 Rpt: 15/33	Henderson	, Rand				
4	Date	5 Payee name					
	01/26/2016	Conroe No	on Lions Club				
6	Amount (\$) \$55.00	7 Payee addre		State; Zip Coo	le		
		Conroe, TX	77305				
8	PURPOSE OF EXPENDITURE	(a) Category (s Fees	see Categories listed at the top of t	his schedule)		stin, TX,	de of Texas. Complete Schedule T. officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office sout	ght		Office held
	Date	Payee name					
	02/14/2016	Conservati	ve Repubilcans of Texa	as			
_	Amount (\$)	Payee addre	ess; City;	State; Zip Coo	de		
	\$1,250.00	10500 Non	thwest Freeway Ste 21	2			
		Houston, T	X 77092				
	PURPOSE OF EXPENDITURE	(a) Category (s Fees	see Categories listed at the top of t	his schedule)			de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sout	ght		Office held
H	Date	Payee name					<u> </u>
	01/24/2016	Corner Sto					
	Amount (\$) \$27.30	Payee addre	,	State; Zip Coo	de		
		Conroe, T	C 77304				
	PURPOSE OF EXPENDITURE	(a) Category (s Travel In D	See Categories listed at the top of tistrict	inis schedule)	<u> </u>		ide of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght		Office held

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - d Committee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repaym Office Overhe Polling Exper Printing Expe Salaries/Wag		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
L	<u> </u>		The Instruction Guide explain	ns how to comp	lete this form.			
1	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID	
	Sch: 3/20 Rpt: 16/33	Hendersor	, Rand					
4	Date	5 Payee name	2					
	02/03/2016	Corner Sto	re					
6	Amount (\$) \$26.77	7 Payee addre 620 N FM Conroe, TX	3083 W	ate; Zip Code				
8	PURPOSE	<u> </u>		Or) Description			
0	OF EXPENDITURE	Travel In District Check if travel of				el outside of Texas. Complete Schedule T. in, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sough	t		Office held	
Г	Date	Payee name		* * **				
	02/07/2016	Corner Sto	re					
	Amount (\$) \$25.60	Payee address; City; State; Zip Code 620 N FM 3083 W						
		Conroe, T	(77304	· · · · · · · · · · · · · · · · · · ·				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this istrict	schedule) (C	<u> </u>		de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sough	t		Office held	
Г	Date	Payee name						
	02/05/2016	Crisp Woo	dlands					
	Amount (\$) \$298.25	Payee addr 2520 Rese	ess; City; Sta arch Forest Dr	ate; Zip Code				
		Spring, TX	77381	1				
	PURPOSE OF EXPENDITURE		See Categories listed at the top of this rage Expense	schedule) (b			de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sough	t		Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expen Legal Services The Instruction Guide e	Salaries/V	/ages/C	Contract Labor	OTHER (enter a category not lister	d above)
1	Total pages Schedule F1: Sch: 4/20 Rpt: 17/33	2 FILER NAM Henderson			-	3	Filer ID	
4	Date 02/10/2016	5 Payee name Direct Mail						
6	Amount (\$) \$3,020.78	7 Payee addre 18900 Carl Spring, TX	rot St	State; Zip Co	de			
8	PURPOSE OF EXPENDITURE	(a) Category (s	See Categories listed at the top	of this schedule)	[side of Texas. Complete Schedule T. K, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		iceholder name	Office sou	ght		Office held	
	Date 02/18/2016	Payee name Direct Mail						_
	Amount (\$) \$2,386.20	Payee addre 18900 Car Spring, TX	rot St	State; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a) Category (s	See Categories listed at the top	of this schedule)	[_	side of Texas. Complete Schedule T. X, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held	
	Date 02/13/2016	Payee name Dolphin Gr						
	Amount (\$) \$5,388.00	Payee addro 5601 Bintli Houston, T	ff Dr	State; Zip Co	de			
	PURPOSE OF EXPENDITURE		See Categories listed at the top	of this schedule)	[side of Texas. Complete Schedule T. X, officeholder living expense	-
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght		Office held	
				-				

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Event Expense Office Overhead/Rental Expense Polling Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By -Travel Out of District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 5/20 Rpt: 18/33 Henderson, Rand 4 Date 5 Payee name **Dolphin Graphics** 02/14/2016 Payee address; City; State; Zip Code 6 Amount (\$) \$1,859.00 5601 Bintliff Dr Houston, TX 77036 **PURPOSE** (b) Description 8 (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Signs Office held 9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 02/09/2016 Exxon Mobil Payee address; City; State; Zip Code Amount (\$) \$22.77 1300 W Davis St

PURPOSE OF EXPENDITURE	Conroe , TX 77304 (a) Category (see Categories listed at the top of this schedule) Travel In District		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so H	ught	Office held
Date	Payee name		
02/13/2016	Exxon Mobil	_	
Amount (\$)	Payee address; City; State; Zip C	ode	
\$29.39	2000 FM 830 Willis, TX 77318		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so H	ught	Office held
Forms provided by Texas E	thics Commission www.ethics.state.tx.	us	Version V1.0.3453

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- I Committee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	pense Printing E Salaries/	xpens			Travel In District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide	explains how to co	mple	te this form.		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID
	Sch: 6/20 Rpt: 19/33	Hendersor	ı, Rand					
4	Date	5 Payee nam	9					
	02/20/2016	Exxon Mol	lic					
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip Ci	ode			· · · · · · · · · · · · · · · · · · ·
	\$23.01	2000 FM 8	30					
		Willis, TX	77318					
8	PURPOSE	(a) Category	See Categories listed at the to	op of this schedule)	(b)	Description		
	OF EVDENDITUBE	Travel In D				<u> </u>		de of Texas. Complete Schedule T.
	EXPENDITURE						1, TX,	officeholder living expense
						Gas		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office held
	Date	Payee nam	e					
	02/16/2016	Facebook						
_	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode			-
	\$250.27	1 Hacker \	Vay					
			•					
		Menlo Par	k, CA 94025					
-	PURPOSE	(a) Category	See Categories listed at the to	on of this schedule)	(b)	Description		
	OF	Advertisin		-,,		<u>L</u>		de of Texas. Complete Schedule T.
	EXPENDITURE					<u> </u>	n, TX	officeholder living expense
						Advertising		
					Ļ			Office hold
	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office so	ught			Office held
	Experience to benefit 6/6/	·						
	Date	Payee nam	е					
	02/12/2016	Go Daddy						
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode			
	\$194.46	14455 N H	layden Rd ste 226					
		Scottsdale	, AZ 85260					
	PURPOSE				(6)			
	PURPOSE OF		See Categories listed at the to	op of this schedule)	(10)	Description Check if travel	l outsi	de of Texas. Complete Schedule T.
	EXPENDITURE	Advertisin	g Expense			<u></u>		officeholder living expense
						Advertising		
	Complete ONLY if direct	Candidate/O	fficeholder name	Office so	ught			Office held
	expenditure to benefit C/O				Ů			
_			<u></u>					

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Accounting/Banking Consulting/Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	Polling Expensionse Printing Expensions Salaries/Wages	se s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)					
	Credit Card Payment	The Instruction Guide	explains how to compl	ete this form.						
1	Total pages Schedule F1:	2 FILER NAME		3	Filer ID					
	Sch: 7/20 Rpt: 20/33	Henderson, Rand								
4	Date	5 Payee name								
	02/04/2016	Hall, Damon	Hall, Damon							
6	Amount (\$)	7 Payee address; City;	State; Zip Code							
	\$703.20	29002 Red River Loop								
		Spring, TX 77386								
8	PURPOSE	(a) Category (See Categories listed at the to	on of this pohodulo) (b)	Description						
	OF	Advertising Expense	up of this screenine)		side of Texas. Complete Schedule T.					
	EXPENDITURE	/ dvordering Experies		Check if Austin, T.	X, officeholder living expense					
				Signs						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought		Office held					
	Date	Payee name		,						
	02/07/2016	Hearst Newspaper								
_	Amount (\$)	Payee address; City;	State; Zip Code							
	\$4.00	801 Texas Avenue Houston								
		Houston, TX 77002								
_	PURPOSE	1-1	an at this pahadisto. (b)	Description	- 					
	OF	(a) Category (See Categories listed at the top of this schedule) Fees Description Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	. 333	X, officeholder living expense							
				Newspaper Su	bscription					
	Complete ONLY if direct	Candidate/Officeholder name	Office sought	t Office held						
	expenditure to benefit C/OF	1								
	Date	Payee name								
	02/11/2016	Houston Chronicle								
	Amount (\$)	Payee address; City;	State; Zip Code							
	\$4.00	801 Texas Avenue								
		Houston, TX 77002								
	PURPOSE		(b)	Description						
	OF	(a) Category (See Categories listed at the to	op of this schedule)		side of Texas. Complete Schedule T.					
	EXPENDITURE	1 003		Check if Austin, T	X, officeholder living expense					
				Subscription						
	Complete ONLY if direct	Candidate/Officeholder name	Office sought		Office held					
	expenditure to benefit C/O	1								
	· - · · · · · · · · · · · · · · · · · ·									

SCHEDULE F1

		EXPENDITURE CATEGORIES FOR BOX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Distric By - Gift/Awards/Memorials Expense Printing Expense Travel Out of D Cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter				
		The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID				
	Sch: 8/20 Rpt: 21/33	Henderson, Rand				
4	Date	5 Payee name				
	01/25/2016	James Hook				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$352.59	9119 Sandstone Falls				
		Tomball, TX 77375	<u> </u>			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Advertising Expense				
	EXPENDITURE	Check if Austin, TX, officeholder livir	g expense			
		Sign Materials				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office h	eld			
F	Date	Payee name				
	02/13/2016	Kroger				
L						
	Amount (\$) Payee address; City; State; Zip Code					
	\$61.83	220 S Loop 336				
		Conroe, TX 77304				
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
l	OF	Food/Beverage Expense	nplete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder livin	ig expense			
		Meet and Greet				
l						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office h	ield			
L						
	Date	Payee name				
l	02/02/2016	La Trattoria Tuscano				
H	Amount (\$)	Payee address; City; State; Zip Code				
l	\$21.91	1 · ·				
l	+==					
l						
		Spring, TX 77373				
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
l	OF EVDENDITUBE	Food/Beverage Expense	•			
1	EXPENDITURE	Check if Austin, TX, officeholder livit	ig expense			
		Food				
٢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office t	neld			
1	expenditure to benefit C/O	DH				
\vdash						
1						
1						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Salaries	Wages	s/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
┰	Total pages Schedule F1:	2 ELEDNAM		<u> </u>		3	Filer ID
1	Sch: 9/20 Rpt: 22/33	Henderson					
_	Date	5 Payee name					
	02/02/2016	La Trattoria					
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode		
	\$103.04	4223 Rese	arch Forest Dr Ste 9	50			
		Spring, TX	77373				
8	PURPOSE	(a) Category (s	ee Categories listed at the top	of this schedule)	(b)	Description	
	OF EXPENDITURE	Food/Beve	rage Expense				side of Texas. Complete Schedule T.
	EXPENDITORE					ш	(, officeholder living expense
						Food	

9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office so	ught		Office held
_	Date	Payee name	·				
	02/02/2016	мтот					
┝	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode		
	\$29.90	_	Godfrey Road				
	Ψ23.30	524 Altilai	Councy Nous				
		Miami Bea	ch, FL 33140				
Г	PURPOSE	(a) Category (s	ee Categories listed at the top	o of this schedule)	(b)	Description	
	OF EXPENDITURE	Accounting	/Banking				side of Texas. Complete Schedule T.
	EXFERENCE					Fees	(, officeholder living expense
						rees	
L		0 - 51 - 60	5 - h - 1 - 1 - 1	Office	. abt		Office held
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office so	uynt		Office field
	Date	Payee name	:				
	02/18/2016	Montgome	y County Bakehous	e			
	Amount (\$)	Payee addre	ess; City;	State; Zîp C	ode		
	\$70.00	1505 N Fra	zier St 105				
		Conroe, TX	77301				
⊢	BURDOCE				[/b)	Description	
	PURPOSE OF		ee Categories listed at the to	of this schedule)	10)	Description Check if travel outs	side of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beve	rage Expense			<u>—</u>	(, officeholder living expense
						Event	
┝	Complete ONLY if direct	LCandidate/Off	iceholder name	Office so	ught		Office held
	expenditure to benefit C/OI				٠		
<u> </u>							
I							

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID					
	Sch: 10/20 Rpt: 23/33	Henderson, Rand					
4	Date	5 Payee name					
	02/19/2016	Montgomery County Bakehouse					
6	Amount (\$) \$41.00	7 Payee address; City; State; Zip Code 1505 N Frazier St 105 Conroe, TX 77301					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	02/14/2016	Montgomery County Police Reporter					
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO BOX 8116					
		Conroe, TX 77302					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories ilsted 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 Advertising					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Г	Date	Payee name					
	01/28/2016	Montgomery County Republican Women					
	Amount (\$) \$15.00	Payee address; City; State; Zip Code PO Box 1766					
		Conroe, TX 77305					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	-						

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services	Fees Office Overhead/Rental E Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense		e /Contract Labor		Solicitation-Undersising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER		<u>, </u>	3 Filer ID				
	Sch: 11/20 Rpt: 24/33	-	rson, Rand						
4	Date	5 Payee	name				<u> </u>		
	02/06/2016		s Seafood						
6	Amount (\$)	7 Payee	address; City;	State; Zip Co	de		_		
	\$73.38	6945 \$	S IH 45						
L		Houst	on, TX 77076						
8	PURPOSE OF EXPENDITURE		ry (See Categories listed at the top of Beverage Expense	of this schedule)	(b)	<u></u>		de of Texas. Complete Schedule T. officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	Office sou	ght			Office held	
Г	Date	Payee	name						
	01/30/2016	Paypa	Į.						
Г	Amount (\$)	Payee	address; City;	State; Zip Co	de				
	\$116.30	116.30 2211 North First St							
		San J	ose, CA 95131						
	PURPOSE OF EXPENDITURE	(a) Catego Fees	ITY (See Categories listed at the top	of this schedule)	(b)	<u> </u>		de of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	Office sou	ght			Office held	
	Date 01/29/2016	Payee Paypa							
	Amount (\$) \$3.20	2211	address; City; North First St ose, CA 95131	State; Zip Co	ode				
\vdash	PURPOSE	(a) Catego	OTY (See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees	y (occoming in the war of			Check if travel	ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	Office sou	ght			Office held	

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundratising Expense Fees Office Overhead/Rental Expense Frood/Beverage Expense Polling Expense Fravel in District Travel in District Travel in District Travel Out of District Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
<u> </u>	Total pages Schedule F1:	
_	Sch: 12/20 Rpt: 25/33	Henderson, Rand
4	Date	5 Payee name
	01/26/2016	Paypal
6	Amount (\$) \$3.20	7 Payee address; City; State; Zip Code 2211 North First St San Jose, CA 95131
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check it fravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Paypal Fees
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	01/23/2016	Paypal
	Amount (\$) \$29.30	Payee address; City; State; Zip Code 2211 North First St
L	<u></u>	San Jose, CA 95131
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Paypal Fees
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/03/2016	Payee name Paypal
	Amount (\$) \$3.20	Payee address; City; State; Zip Code 2211 North First St San Jose, CA 95131
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Paypal
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic		mmittee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E	Onlice Overhead/rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment								
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID
	Sch: 13/20 Rpt: 26/33		Henderson,						
4	Date	_	Payee name						
4	02/03/2016		Payee name Paypal						
6	Amount (\$)	7			e; Zip Co	oae			
	\$3.20		2211 North	HIRST ST					
			San Jose, (CA 95131 			_		
8	PURPOSE	(a)	Category (s	see Categories listed at the top of this so	chedule)	(b)	Description		-
	OF EXPENDITURE		Fees				<u> </u>		ide of Texas. Complete Schedule T.
	EXPENDITORE						ш	, TX	, officeholder living expense
							Paypal		
						<u> </u>			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	Office sou	ight			Office held
	expenditure to benefit C/O	n,							
Г	Date		Payee name						
	02/04/2016		Paypal						
H	Amount (\$)	\vdash	Payee addre	ess; City; Stat	e; Zip Co	ode			
	\$58.30		2211 North		•				
	400.00								
			Can loca (CA 05121					
			San Jose, (
	PURPOSE OF	(a)		see Categories listed at the top of this s	chedule)	(b)	Description	oute	ide of Texas. Complete Schedule ₹.
	EXPENDITURE		Fees				<u> </u>		, officeholder living expense
							Paypal		
⊢	Complete ONLY if direct	L	Candidate/Off	īceholder name	Office sou	ıght		_	Office held
	expenditure to benefit C/O		200101010107		-	•			
L		_							
	Date		Payee name	!					
	02/09/2016		Paypal						
	Amount (\$)		Payee addre	ess; City; Stat	e; Zip Co	ode			
	\$14.80		2211 North	First St					
			San Jose, (CA 95131					
Н	PURPOSE	(a)	Category (s	see Categories listed at the top of this s	chedule)	(b)	Description		
	OF	\ \ \	Fees	see Categories listed at the top of this si	oneddic,	'		outs	ide of Texas. Complete Schedule T.
	EXPENDITURE							ı, TX	, officeholder living expense
							Paypal		
Г	Complete ONLY if direct		Candidate/Off	iceholder name	Office sou	ight			Office held
1	expenditure to benefit C/O	Н							
Г									
1									

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Loan Repayment/Re Fees Office Overhead/Rei Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Cor		ead/Rental Expense ise inse es/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L			The Instruction Guide explains	how to comp	lete this form.	1.	
1	Total pages Schedule F1:					3	Filer ID
	Sch: 14/20 Rpt: 27/33	Henderson	ı, Rand			L	
4	Date	5 Payee name	9				!
	02/10/2016	Paypal					
6	Amount (\$) \$29.30	7 Payee addre 2211 North San Jose,	First St	; Zip Code			
8	PURPOSE			(h) Description		
٥	OF EXPENDITURE	Fees	See Categories listed at the top of this sch	edule) t~	Check if travel		de of Texas, Complete Schedule T. officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name C	Office sough	t		Office held
	Date	Payee name	e				
	02/11/2016	Paypal					
	Amount (\$) \$7.55	Payee addre 2211 North		; Zip Code	,		
		San Jose,	CA 95131		MI .		
	PURPOSE OF EXPENDITURE	(a) Category (s	See Categories listed at the top of this sch	redule) (b	<u> </u>		de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name (Office sough	it		Office held
Г	Date	Payee name	e				
	02/16/2016	Paypal					
	Amount (\$) \$4.65	Payee addre 2211 North	, , ,	; Zip Code	;		
		San Jose,	CA 95131				
	PURPOSE OF EXPENDITURE	(a) Category (a) Fees	See Categories listed at the top of this sch	nedule) (k	<u>—</u>		ide of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name (Office sough	nt		Office held

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By- Candidate/Officeholder/Political	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense					
Credit Card Payment	The Instruction Guide explains how to comp					
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID				
Sch: 15/20 Rpt: 28/33	Henderson, Rand					
4 Date	5 Payee name					
02/17/2016	Paypal					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$4.65	2211 North First St					
	San Jose, CA 95131					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description				
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.				
Eya Ensirona		Check if Austin, TX, officeholder living expense Paypal				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
expenditure to benefit C/OH	• • • • • • • • • • • • • • • • • • • •					
Date	Payee name					
01/27/2016	Porter Signs LLC					
Amount (\$)	Payee address; City; State; Zip Code					
\$400.00	5702 Delfren Ln					
+ /2000						
	Katy, TX 77493					
PURPOSE		Description				
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	,	Check if Austin, TX, officeholder living expense				
		Billboard Instaliation				
		Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	. Office field				
Date Control	Payee name					
02/08/2016	Red Robin					
Amount (\$)	Payee address; City; State; Zip Code					
\$61.58	19433 N IH 45					
	Chanandach TV 77005					
	Shenandoah, TX 77385					
PURPOSE OF	(Col Categories included at the top of this controller)	Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Food/Beverage Expense	Check if Austin, TX, officeholder living expense				
j		Food				
Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held				
expenditure to benefit C/OF	1					
						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Travel in District Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 16/20 Rpt: 29/33 Henderson, Rand 4 Date Payee name River Point Food Mart 02/17/2016 City; State; Zip Code Payee address; 6 Amount (\$) \$27.28 100 Scarborough Dr Conroe, TX 77304 8 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Gas Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Рауее пате 01/30/2016 Shell State; Zip Code Amount (\$) Payee address; City; \$28.03 4201 N Frazier Conroe, TX 77303 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 02/06/2016 Shell State; Zip Code Payee address; City; Amount (\$) \$27.68 4201 N Frazier Conroe, TX 77303 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Gas Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Densiti

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense
Fees
Food/Beverage Expense
Gitt/Awards/Memorials Expe

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

Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services The Instruction Guide explains	OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAM				3 Filer ID		
-	Sch: 17/20 Rpt: 30/33	Henderson						
4	Date	5 Рауее пате	-					
	02/08/2016	Speedy Sto	op					
6	Amount (\$)	7 Payee addre	ess; City; State	e; Zip Code	1			
	\$6.81	2500 N Lo	op 336 W					
		Conroe, T	< 77304					
8	PURPOSE	(a) Category (s	See Categories listed at the top of this so	chedule) (t) Description			
	OF EXPENDITURE	Travel In D	istrict		<u></u>	outside of Texas, Complete Schedule T.		
						TX, officeholder living expense		
					Gas			
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sough	t	Office held		
	expenditure to benefit Grot	·	<u></u>					
	Date	Payee name	?					
	02/06/2016	Taco Caba	ına					
H	Amount (\$)	Payee addre	ess; City; State	e; Zip Code				
	\$27.01 202 S loop 336							
		Conroe, T	K 77304					
Γ	PURPOSE	(a) Category (s	See Categories listed at the top of this so	chedule) (t) Description			
1	OF EXPENDITURE	Food/Beve	rage Expense			outside of Texas. Complete Schedule T.		
	EXPENDITURE Check if Austin, TX, officeholder living expense							
					1 000			
L				000		Office hold	<u>-</u>	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
L								
	Date	Payee name	•					
	02/01/2016	The Egg a	nd I					
	Amount (\$)	Payee addr	ess; City; State	e; Zip Code	•			
	\$46.88	1644 Rese	arch Forest Dr ste 100					
		Shenando	ah, TX 77381					
H	PURPOSE	(a) Category (See Categories listed at the top of this so	chedule) (t) Description			
	OF		rage Expense	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	outside of Texas. Complete Schedule T.		
	EXPENDITURE		J		Check if Austin	, TX, officeholder living expense		
1					Food			
I								
Г	Complete ONLY if direct		ficeholder name	Office sough	it	Office held		
1	expenditure to benefit C/O	Н						
H	<u>-</u>				·	***		
1								
1								

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		7	Solicitation:/-uncrassing Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	. Total pages Schedule F1: 2 FILER NAME						3 F	Filer ID	П
	Sch: 18/20 Rpt: 31/33	Hendersor							
4	Date 02/06/2016	5 Payee name The Wood	e lands Area Chamber			_	·		
6	Amount (\$) \$165.00	7 Payee addr 9320 Lake	ess; City; Sta side Blvd ste 200	te; Zip Co	de			· · · · · · · · · · · · · · · · · · ·	
		The Wood	lands, TX 77381						
8	PURPOSE OF EXPENDITURE	(a) Category (Fees	See Categories listed at the top of this s	schedule)	(b)	<u></u>		e of Texas. Complete Schedule Т. ifficeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office held	
	Date	Payee nam	e						
	02/16/2016	USPS							
	Amount (\$) \$41.00	Payee address; City; State; Zip Code 809 W Dallas St							
		Conroe, T	X 77301						
	PURPOSE OF EXPENDITURE	(a) Category (Fees	See Categories listed at the top of this a	schedule)	(b)	<u></u>		e of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght			Office held	
	Date 02/04/2016	Payee nam USPS	е						
	Amount (\$) \$1,250.00	Payee addr 809 W Da Conroe, T	llas St	te; Zip Co	de				
	PURPOSE OF EXPENDITURE	(a) Category Fees	See Categories listed at the top of this	schedule)	(b)	ш		e of Texas. Complete Schedule T. officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	ght			Office held	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Git/Awards/Memorials Expense Legal Services Palaries/Wages/Contract Labor					Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
		The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1: Sch: 19/20 Rpt: 32/33	2	FILER NAME Henderson, Rand 3 Filer ID								
4	Date 02/04/2016	5	5 Payee πame USPS								
6	Amount (\$) \$10,376.87	7	Payee addre 809 W Dalla		State;	; Zip Co	de				
			Conroe, TX			1	(t.)				
8	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	ee Categories listed at th	ne top of this sch	edul e)	(0)	<u> </u>		de of Texas. Complete Sch officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/O	-	Candidate/Offi	iceholder name	C	Office sou	ght			Office held	
	Date 02/13/2016		Payee name USPS			. — — — — — — — — — — — — — — — — — — —					
	Amount (\$) \$10,400.00		Payee addre 809 W Dalla		State;	; Zip Co	de				
			Conroe, TX	77301							
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	ee Categories listed at th	ne top of this sch	edule)	(b)	<u></u>		ide of Texas. Complete Sch , officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	(Office sou	ght			Office held	
	Date 02/14/2016		Payee name USPS								
	Amount (\$) \$10,400.00		Payee addre	as St	State	; Zip Co	de				
L	DUDDOCT	<u>_</u>	Conroe, TX				(F)	Daniel C			
	PURPOSE OF EXPENDITURE	(a)	Category (s Fees	ee Categories listed at th	ne top of this sch	edule)	(D)	ш		ide of Texas. Complete Sch , officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Off	iceholder name	(Office sou	ght			Office held	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense Loan Repayment/Reimbursement Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Office Overhead/Rental Expense
Polling Expense
Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Ca	andidate/Officeholder/Politica t Card Payment	I Committee	Legal Services The Instruction Guide ex		vages/Contract Labor mplete this form.	OTHER (enter a cateç	gory not listed above)
1 Total	pages Schedule F1:	2 FILER NAMI	<u></u>		·-	3 Filer ID	-
	20/20 Rpt: 33/33	Henderson					
4 Date		5 Рауее пате					
02/0	5/2016	WISD Educ	cation Foundation				
6 Amou	\$425.00	7 Payee addre 1201 FM 8 Willis , TX	30	State; Zip Co	de		
8 P	URPOSE	(a) Category (s	see Categories listed at the top of	this schedule)	(b) Description	<u> </u>	
EXF	OF ENDITURE	Contributio	ns/Donations Made By Officeholder/Political C	/		vel outside of Texas. Complete stin, TX, officeholder living expe n	
9 Compe	olete <u>ONLY</u> if direct inditure to benefit C/OI		iceholder name	Office sou	ght	Office held	