#### CANDIDATE / OFFICEHOLDER **COVER SHEET PG 1 CAMPAIGN FINANCE REPORT** Total pages filed: Filer !D The C/OH Instruction Guide explains how to complete this form. FIRST MI MS/MRS/MR CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Rand Mr NAME SUFFIX LAST NICKNAME Henderson ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY; CANDIDATE / **OFFICEHOLDER** PO BOX 1678 MAILING **ADDRESS** X Change of Address CONROE, TX 77304 Date Imaged MI MS/MRS/MR FIRST CAMPAIGN **TREASURER** Christina NAME Mrs SUFFIX NICKNAME LAST Henderson STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAIGN TREASURER 77318 Willis TX9917 E Shore Dr **ADDRESS** (Residence or Business) PHONE NUMBER **EXTENSION** AREA CODE CAMPAIGN TREASURER 832.521.8489 PHONE 8 REPORT 15th day after campaign treasurer TYPE 30th day before election Runoff January 15 X appointment (officeholder only) Final Report (Attach C/OH-FR) Exceeded \$500 limit July 15 8th day before election Year Month Day PERIOD Month Day Year COVERED THROUGH 12/31/2015 07/01/2015 **ELECTION DATE ELECTION TYPE** 10 ELECTION Other Month χ Primary Runoff Day Year 03/01/2016 General Special 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) 11 OFFICE Sheriff None **GO TO PAGE 2**

FORM C/OH

# CANDIDATE / OFFICEHOLDER REPORT:

# FORM C/OH COVER SHEET PG 2

SUPPORT	& IOIALS	·			2 of 74
13 C / OH NAME	Henderson, Rand		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	t the candidate's or officeh	nolder's knowle	dge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		*******	·
X Additional Pages	X GENERAL	Anadarko Petroleum PAC			
		COMMITTEE ADDRESS			
	SPECIFIC	1201 Lake Robbins Dr			
		The Woodlands , TX 77380			
		COMMITTEE CAMPAIGN TREASURER NAME			
		Richey, Albert			
		COMMITTEE CAMPAIGN TREASURER ADDRE	ESS		
		1202 Lake Robbins Dr			
		The Woodlands, TX 77380			
16 CONTRIBUTION TOTALS	1. TOTAL POLITIC	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	3,475.50
	2. TOTAL POLITION (OTHER THAN	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	NS)	\$	90,593.50
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED				0.00
	4. TOTAL POLITIC		\$ 1	.26,985.13	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PI	CAL CONTRIBUTIONS MAINTAINED AS OF THE ERIOD	LAST DAY OF THE	\$	86,813.02
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPORT OF THE REPORT	PAL AMOUNT OF ALL OUTSTANDING LOANS A RTING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFADAVIT		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code.	all information required to	ompanying rep be reported by	ort is y me
E LUNSTORD PRY PUBLIC E OF TEXAS PROFESSOR ON-00-2019	ALOCKII ATON TATS	SOVE	of Candidate or Officehold		
	cribed before me, by the s	said Can Henderson ertify which, witness my hand and seal of office.	, this the <i></i>	5th_0	lay
Signature of offi	cer administering	Jackie Lunsford Printed name of officer administering	Motava Title of officer	4 — TX administering o	oath

# CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

# FORM C/OH ADDENDUM

Page 3 of 74

C / OH NAME	Henderson, Rand	Filer ID
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have I	of political expenditures by political committees to support the candidate / officeholder. These been made without the candidate's or officeholder's knowledge or consent. Candidates and d to report this information only if they receive notice of such expenditures
001	COMMITTEE TYPE	COMMITTEE NAME
	X GENERAL	GEO Group PAC
		COMMITTEE ADDRESS
	SPECIFIC	621 Northwest 53rd St
		Boca Raton, FL 33487
		COMMITTEE CAMPAIGN TREASURER NAME
		Evans, Brian
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		TX
NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have !	of political expenditures by political committees to support the candidate / officeholder. These been made without the candidate's or officeholder's knowledge or consent. Candidates and add to report this information only if they receive notice of such expenditures
COMMITTEE(C)	COMMITTEE TYPE	COMMITTEE NAME
	X GENERAL	HDR PAC
İ	<u> </u>	COMMITTEE ADDRESS
	SPECIFIC	8404 Indian Hills Dr
		Omaha, NE 68114
		COMMITTEE CAMPAIGN TREASURER NAME
		Hoeberling, James
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		TX

# CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

# FORM C/OH ADDENDUM

		Page 4 of 74
C / OH NAME	Henderson, Rand	Filer ID
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have	of political expenditures by political committees to support the candidate / officeholder. These been made without the candidate's or officeholder's knowledge or consent. Candidates and ed to report this information only if they receive notice of such expenditures
00	COMMITTEE TYPE	COMMITTEE NAME
		Montgomery County Law Enforcement Association PAC
	X GENERAL	COMMITTEE ADDRESS
	<u> </u>	PO BOX 8793
	SPECIFIC	10 BOX 0130
		THE WOODLANDS, TX 77386
		COMMITTEE CAMPAIGN TREASURER NAME
		HALL, DAMON
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		TX
	<u> </u>	<u></u>
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# FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 5 of 74 19 Filer ID 18 FILER NAME Henderson, Rand 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 87,118.50 \$ Х 3,475.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. X SCHEDULE B: PLEDGED CONTRIBUTIONS \$ \$ SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 126,985.13 Х \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 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 \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12. TO FILER

The Instruc	tion Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 1/22 Rpt: 6/74	
FILER NAME			3	Filer ID	
Henderson, R			_	1	
10/12/2015	5 Full name of contributor out-of-state PAC (ID#: Absher, James Matt	)	ζ.	Amount of Contribution (\$)	\$500.00
1	6 Contributor address; City; State; Zip Code 6336 Brimwood Dr				
	Plano, TX 75093				
Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions)	)		
Date	Full name of contributor   out-of-state PAC (ID#:	) [		Amount of Contribution (\$)	
10/12/2015	Absher, James Matt			.,	\$325.00
ľ	Contributor address; City; State; Zip Code				
	6336 Brimwood Dr				
	Plano, TX 75093				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	)		
Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
10/12/2015	Absher, James Matt				\$15.00
ľ	Contributor address; City; State; Zip Code 6336 Brimwood Dr				
	Plano, TX 75093				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)	-	
Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
10/12/2015	Absher, James Matt				\$10.00
ľ	Contributor address; City; State; Zip Code				
	6336 Brimwood Dr				
	Plano, TX 75093				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	i)		
Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	<del></del>
09/22/2015	Anadarko Petroleum PAC				\$1,800.00
	Contributor address; City; State; Zip Code				
	1201 Lake Robbins Dr				
	The Woodlands , TX 77380				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)		

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/22 Rpt: 7/74 2 FILER NAME 3 Filer ID Henderson, Rand 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$2,000.00 08/05/2015 Back, Gregory 6 Contributor address; City; State; Zip Code 6700 Woodlands PKWY Ste 230 313 The Woodlands, TX 77382 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$5,000.00 09/18/2015 Bates, Randy Contributor address; City; State; Zip Code 22 Piney Plains Cir The Woodlands, TX 77382 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$100.00 10/12/2015 Berry, William Contributor address; City; State; Zip Code 606 Spring Forest Conroe, TX 77302 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$250.00 12/22/2015 Bills, Craig Contributor address; City; State; Zip Code 17627 Memorial Falls Dr Tomball, TX 77375 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$5,000.00 07/25/2015 Bozeman, W Steve Contributor address; City; State; Zip Code 31 Los Encinos CT Magnolia, TX 77354 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/22 Rpt: 8/74	
2	FILER NAME Henderson,	Rand		3	Filer ID	
4	Date 09/08/2015	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:</li></ul>		7	Amount of Contribution (\$)	\$800.00
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/05/2015	Full name of contributor	Employer (See Instructions		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See instructions	''		
	Date 09/08/2015	Full name of contributor out-of-state PAC (ID#: Brooks, Henry Contributor address; City; State; Zip Code 15 Maymont Way The Woodlands, TX 77382			Amount of Contribution (\$)	\$800.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 09/03/2015	Full name of contributor out-of-state PAC (ID#: Buckley, Douglas  Contributor address; City; State; Zip Code 29118 Geneva Dr  Spring, TX 77386			Amount of Contribution (\$)	\$3,200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 07/02/2015	Full name of contributor out-of-state PAC (ID#:_Bush, Alan  Contributor address; City; State; Zip Code  14 Lamps Glow Pl  The Woodlands, TX 77382	)		Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/22 Rpt: 9/74 3 Filer ID 2 FILER NAME Henderson, Rand 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:\_ 4 Date \$250.00 10/12/2015 Caddell, Diana 6 Contributor address; City; State; Zip Code 12743 Osprey Ct Willis, TX 77318 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ \$500.00 08/04/2015 Cain, Charles Contributor address; City; State; Zip Code 2600 Timberloch Pl The Woodlands, TX 77380 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$800.00 10/12/2015 Carnahan, David Contributor address; City; State; Zip Code 25215 Oakhurst Dr Ste 101 Spring, TX 77386 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$500.00 07/28/2015 Chambers, Alan Contributor address; City; State; Zip Code 9920 E Shore Willis, TX 77318 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$800.00 10/06/2015 Christensen, Mark Contributor address; City; State; Zip Code 15425 North Freeway Ste 330 Houston, TX 77090 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fe	orm.	1	Total pages Schedule A1: Sch: 5/22 Rpt: 10/74	
2	FILER NAME			3	Filer ID	
	Henderson,					
4	Date 09/24/2015	5 Full name of contributor		7	Amount of Contribution (\$)	\$250.00
		6 Contributor address; City; State; Zip Code 202 Whisenant Dr				
		Allen, TX 75013				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
_	Date	Full name of contributor   out-of-state PAC (ID#:_	<u> </u>		Amount of Contribution (\$)	<u> </u>
	07/23/2015	Corley, Duane			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$1,500.00
		Contributor address; City; State; Zip Code 208 W Davis				
		Conroe, TX 77301				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor			Amount of Contribution (\$)	
	10/12/2015	Costenbader, Charles	-			\$295.00
		Contributor address; City; State; Zip Code				
		39 N Heritage Hill Circle				
		Spring, TX 77381	:			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date	Full name of contributor   out-of-state PAC (ID#:_	<u> </u>	_	Amount of Contribution (\$)	
	09/29/2015	Cox, Billy				\$800.00
		Contributor address; City; State; Zip Code				
		15551 FM 362 RD	•	1		
		Navasota, TX 77868				
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	L i)	<u> </u>	
_	Date	Full name of contributor   out-of-state PAC (ID#:_	<u> </u>	Г	Amount of Contribution (\$)	
	10/12/2015	Crider, Derek			, and an establish (4)	\$41.00
		Contributor address; City; State; Zip Code				
		3030 Elmside Dr Ste 163				
		Houston, TX 77042				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	-					
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The Instruc	tion Guide explains how to complete this fo	orm.		Total pages Schedule A1:	-
	and dude explains not to complete the lo			Sch: 6/22 Rpt: 11/74	
FILER NAME Henderson, F	Rand	]	3	Filer ID	
	5 Full name of contributor	)	7	Amount of Contribution (\$)	\$61.00
	6 Contributor address; City; State; Zip Code 3030 Elmside Dr Ste 163				
	Houston, TX 77042				
Principal occup	eation / Job title (See Instructions)	9 Employer (See Instructions)	)		
				Amount of Contribution (¢)	
Date 10/06/2015	Full name of contributor			Amount of Contribution (\$)	\$800.00
•	Contributor address; City; State; Zip Code 4055 Technology Forest Blvd				
	The Woodlands, TX 77381				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)		
Date	Full name of contributor	)		Amount of Contribution (\$)	<del></del>
09/08/2015	Davis, Mike				\$250.00
	Contributor address; City; State; Zip Code 171 S Waterhaven Cir				
	Montgomery, TX 77316				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)		
Date	Full name of contributor  ut-of-state PAC (ID#:			Amount of Contribution (\$)	
12/21/2015	Dennis, Mark				\$500.00
	Contributor address; Clty; State; Zip Code 4438 Chelsea Dr				
	Baton Rouge, LA 70809				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	)		
Date	Full name of contributor  ut-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
10/05/2015	Dickson, David				\$100.00
	Contributor address; City; State; Zip Code 15482 Arrow Wood loop W				
	·				
Driveinel	Willis, TX 77378	Employer (Con Instructions)			
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions)	,		

	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: 7/22 Rpt: 12/74	
2	FILER NAME Henderson,	Rand		3	Filer ID	
4	Date 10/12/2015	<ul> <li>5 Full name of contributor  ut-of-state PAC (ID#:</li></ul>	)	7	Amount of Contribution (\$)	\$800.00
_		Conroe, TX 77302	A Employer (See Instructions	_		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	,,		
	Date 10/13/2015	Full name of contributor out-of-state PAC (ID#:_ Feanny, Mark  Contributor address; City; State; Zip Code 32784 FM 2978			Amount of Contribution (\$)	\$1,500.00
	Dringing acqu	Magnolia, TX 77354 pation / Job title (See Instructions)	Employer (See Instructions	L		
	Principal occo	paudit / 300 lide (366 institucions)	Employer (600 madasas).	,		
	Date 09/14/2015	Full name of contributor  out-of-state PAC (ID#_ Feldman, Rebecca Contributor address; City; State; Zip Code 2104 Yaupon Hallow			Amount of Contribution (\$)	\$250.00
		Round Rock, TX 78664				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 08/05/2015	Full name of contributor out-of-state PAC (ID#:_ Ferester, Beth Contributor address; City; State; Zip Code 48 North Bay Blvd The Woodlands, TX 77380			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<b></b> s)		
•	Date 11/11/2015	Full name of contributor out-of-state PAC (ID#: Finkbiner, Terry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00
		180 Lake View Cir Montgomery, TX 77356				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
_						

The Instruc	tion Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 8/22 Rpt: 13/74	
FILER NAME Henderson, R	Pand		3 Filer ID	
Date ! 09/15/2015	5 Full name of contributor		7 Amount of Contribution (\$)	\$800.00
	Kingwood, TX 77345			
Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions)		
Date 08/28/2015	Full name of contributor	C00382150 )	Amount of Contribution (\$)	\$2,500.00
	Boca Raton, FL 33487			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	1	
Date 08/28/2015	Full name of contributor out-of-state PAC (ID# Gable, Ryan  Contributor address; City; State; Zip Code  PO BOX 130966		Amount of Contribution (\$)	\$800.00
	Spring, TX 77393			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	)	
Date 09/10/2015	Full name of contributor		Amount of Contribution (\$)	\$200.00
Principal occup	Conroe, TX 77304 pation / Job title (See Instructions)	Employer (See Instructions)		<del></del>
Date 08/28/2015	Full name of contributor out-of-state PAC (ID# Gilmer, George Contributor address; City; State; Zip Code 630 Stonewal! Jackson Dr		Amount of Contribution (\$)	\$800.00
	Conroe, TX 77302			
	pation / Job title (See Instructions)	Employer (See Instructions)	)	
Principal occup	adon 7 30b dde (See maddodons)			

# MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/22 Rpt: 14/74 3 Filer ID 2 FILER NAME Henderson, Rand 7 Amount of Contribution (\$) 5 Full name of contributor 4 Date out-of-state PAC (ID#: \$1,500.00 08/06/2015 Gonzalez, Edward 6 Contributor address; City; State; Zip Code 7 Legato Way The Woodlands, TX 77382 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$250.00 10/12/2015 Green, Janet Contributor address; City; State; Zip Code 13971 Millmac Rd Conroe, TX 77303 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$250.00 09/30/2015 Grice, Phillip Contributor address; City; State; Zip Code 14 Sappling PL The Woodlands, TX 77382 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) x out-of-state PAC (ID#: C00103903 Full name of contributor Date \$1,000.00 07/06/2015 HDR PAC Contributor address; City; State; Zip Code 8404 Indian Hills Dr Omaha, NE 68114 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date \$100.00 10/12/2015 Hadley, William Contributor address; City; State; Zip Code 216 Valley Dr Conroe, TX 77303 Employer (See Instructions) Principal occupation / Job title (See Instructions)

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The In	structi	ion Guide explains ho	w to complete this	form.	1	Total pages Schedule A1: Sch: 10/22 Rpt: 15/74	
FILER N Hender		and			3	Filer ID	
Date 10/12/2	5	Full name of contributor Hall, Damon	out-of-state PAC (ID:	#:)	7	Amount of Contribution (\$)	\$100.00
	6	Contributor address; City; S 29002 Red River Loop	State; Zip Code		i		
·		Spring, TX 77386					
Principa	l occupa	tion / Job title (See Instruction	ns)	9 Employer (See Instruction	ns)		
Date		Full name of contributor	out-of-state PAC (ID:	#:	Т	Amount of Contribution (\$)	
08/27/2	2015	Harlan, W Scott	,	-			\$500.00
		Contributor address; City; S 54 Cottage Mill Place	State; Zip Code				
		The Woodlands, TX 773	82				
Principa	l occupa	tion / Job title (See Instruction	ns)	Employer (See Instruction	ns)		·
Date	<u> </u>	Full name of contributor	out-of-state PAC (ID	#:	$\overline{\top}$	Amount of Contribution (\$)	
08/15/2	2015	Harris, Aaron					\$300.00
		Contributor address; City; \$ 62 Kingscote Way	State; Zip Code				
		The Woodlands, TX 773	82				
Principa	d occupa	ation / Job title (See Instruction	<del> </del>	Employer (See Instruction	ns)		
Date		Full name of contributor	ut-of-state PAC (ID	#:	T	Amount of Contribution (\$)	
09/23/2	2015	Heathcott, Cameron					\$200.00
		Contributor address; City; 9 2151 Summit Mist Dr	State; Zip Code				
		Conroe, TX 77304					
Principa	d occupa	ation / Job title (See Instruction	is)	Employer (See Instruction	ns)		
Date		Full name of contributor	out-of-state PAC (ID	#:		Amount of Contribution (\$)	
09/22/2	2015	Heathcott, Donald		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$200.00
		Contributor address; City; 9 237 Club Island Way	State; Zip Code				
		Montgomery, TX 77356					
Principa	al occupa	ation / Job title (See Instruction	ıs)	Employer (See Instruction	ns)		
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<del></del>		<del>-</del> -	1	Total pages Schedule A1:	
The Instruc	ction Guide explains how to complete this fo	orm.		Sch: 11/22 Rpt: 16/74	
FILER NAME Henderson, F	Rand		3	Filer ID	
	5 Full name of contributor out-of-state PAC (ID#: Henderson, Roger	)	7	Amount of Contribution (\$)	\$800.00
	6 Contributor address; City; State; Zip Code 3014 Stanford Ct				
	Tyler, TX 75701				
Principal occuj	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
Date	Full name of contributor  out-of-state PAC (ID#:			Amount of Contribution (\$)	·
07/24/2015	Henderson, Roger				\$950.00
	Contributor address; City; State; Zip Code 3014 Stanford Ct				
	Tyler, TX 75701				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	·
12/29/2015	Holifield, Tim				\$4,000.00
	Contributor address; City; State; Zip Code 2401 Carriage Lamp Ln				
	Conroe, TX 77384				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	·	
Date	Full name of contributor  out-of-state PAC (ID#:_			Amount of Contribution (\$)	
12/29/2015	Holifield, Tim				\$1,000.00
	Contributor address; City; State; Zip Code 2401 Carriage Lamp Ln				
	Conroe, TX 77384			<u></u>	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	-	
Date	Full name of contributor Out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<u> </u>
08/19/2015	Hughes, Nicholas				\$250.00
	Contributor address; City; State; Zip Code 15637 Marina Dr				
	Montgomery, TX 77356				
	pation / Job title (See Instructions)	Employer (See Instructions)	<u>.                                    </u>		
Principal occu	pandin 7 000 and (550 monature)				

MONETA	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
The Instruc	tion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/22 Rpt: 17/74	
2 FILER NAME Henderson, R	Pand		3	Filer ID	
4 Date ! 08/05/2015	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_</li> <li>Karl Stomberg</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$2,500.00
	2408 Timberloch PI The Woodlands, TX 77380				
8 Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions	)		
Date 07/29/2015	Full name of contributor out-of-state PAC (ID#:_ Karlins, Michael  Contributor address; City; State; Zip Code  8505 Technology Forest Place			Amount of Contribution (\$)	\$150.00
Principal occup	The Woodlands, TX 77381 Pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Date 11/30/2015	Full name of contributor			Amount of Contribution (\$)	\$250.00
Principal occup	The Woodlands, TX 77381 nation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Date 09/25/2015	Full name of contributor out-of-state PAC (ID#:_ Koops, Thomas Contributor address; City; State; Zip Code 51 S Castlegreen Cir The Woodlands, TX 77381			Amount of Contribution (\$)	\$800.00
Principal occup	oation / Job title (See Instructions)	Employer (See Instructions	i)		
Date 08/31/2015	Full name of contributor out-of-state PAC (ID#:_ Leck, Roy  Contributor address; City; State; Zip Code 2217 Stableridge Dr			Amount of Contribution (\$)	\$250.00
Principal occup	Conroe, TX 77384  pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
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The Instruct	tion Guide explains how to c	complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/22 Rpt: 18/74	
FILER NAME				3	Fîler ID	
Henderson, R				_		
Date 10/12/2015	Leck, Roy	ut-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$125.00
	6 Contributor address; City; State; 2 2217 Stableridge Dr	(ip Code				
	Conroe, TX 77384					
Principal occup	ation / Job title (See Instructions)		9 Employer (See Instructions	)		
- Data	Full name of contributor	ut-of-state PAC (ID#:_	\ \ \ \ \		Amount of Contribution (\$)	
Date 11/05/2015	Martin, Skip	101-01-State PAC (10#			7 Milodite of Contribution (C)	\$1,000.00
	Contributor address; City; State; Z	ip Code	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	300 Turner Ln					
	Cleveland, TX 77328					
Principal occup	ation / Job title (See Instructions)		Employer (See Instructions	)		
Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
08/26/2015	Matthews, Keith	(				\$100.00
	Contributor address; City; State; Z 11839 Briar wood lane	Zip Code				
	Montgomery, TX 77356					
Principal occup	ation / Job title (See Instructions)		Employer (See Instructions	)		
D-t-	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contribution (\$)	
Date 11/05/2015	McLennan, Mike	Jul-01*State FAC (ID#			Tunious of Continuous (4)	\$1,000.00
		Zip Code				
	300 Turner Ln					
	Cleveland, TX 77328					
Principal occup	ation / Job title (See Instructions)		Employer (See Instructions	)		
Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
09/10/2015	Mendiola, Joe	or state 1710 (IDII				\$1,050.00
ľ	Contributor address; City; State; 2	Zip Code				
	PO BOX 480					
	Conroe, TX 77305					
	ation / Job title (See Instructions)		Employer (See Instructions	)		
Principal occup	addity 300 the (See hishacholis)					
Principal occup	audit) 300 title (See Histiaudions)					

6 Contributor address; City; State; Zip Code PO BOX 480  Conroe, TX 77305  Principal occupation / Job title (See Instructions)  Date 09/14/2015  Full rame of contributor	The Instruc	tion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/22 Rpt: 19/74	
Date   10/12/2015	FILER NAME			3	Filer ID	
10/12/2015 Mendiola, Joe	Henderson, R	and				
Full name of contributor   Date   POBOX 480   Policy   State   Zip Code   PoBox 480   Policy   Pobox 480   Pobox 480   Pobox 480   Pobox 480   Pobox 480   Policy   Pobox 480		<del>_</del>		7	Amount of Contribution (\$)	\$2,125.00
Principal occupation / Job title (See Instructions)  Date 09/14/2015  Principal occupation / Job title (See Instructions)  Date O9/17/2015  Principal occupation / Job title (See Instructions)  Date O9/17/2015  Principal occupation / Job title (See Instructions)  Date O9/17/2015  Principal occupation / Job title (See Instructions)  Date O9/17/2015  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (S)  Septimal of Contribution (S)  Principal occupation / Job title (See Instructions)  Date Pull name of contributor  out-of-state PAC (IDet	ļ.,	6 Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions)  Date PCII name of contributor out-of-state PAC (ID#:						
Date 09/14/2015						
Mendiola, Joe	Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions)	)		
Contributor address; City; State; Zip Code PO BOX 480  Conroe, TX 77305  Principal occupation / Job title (See Instructions)  Date O9/17/2015  Principal occupation / Job title (See Instructions)  Date O8/03/2015  Principal occupation / Job title (See Instructions)  Date O8/03/2015  Full name of contributor oddress; City; State; Zip Code 30 Holly Laurel Dr The Woodlands, TX 77382  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  \$900.  Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  \$900.  Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  \$250.  Contributor address; City; State; Zip Code 2253 N loop 336 W Conroe, TX 77304	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
Principal occupation / Job title (See Instructions)  Date 09/17/2015 Milstead, Amy Contributor address; City; State; Zip Code 30 Holly Laurel Dr The Woodlands, TX 77382  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Date 08/03/2015 Montgomery County Law Enforcement Association PAC Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$) \$900.  Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$) \$250.  Contributor address; City; State; Zip Code 2253 N loop 336 W Conroe, TX 77304	09/14/2015	Mendiola, Joe				\$1,050.00
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date O9/17/2015  Milstead, Amy Contributor address; City; State; Zip Code 30 Holly Laurel Dr The Woodlands, TX 77382  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$) \$2,500.  Principal occupation / Job title (See Instructions)  Date Montgomery County Law Enforcement Association PAC Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$) \$900.  \$900.  Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$) \$250.  Contributor address; City; State; Zip Code 2253 N loop 336 W Conroe, TX 77304	-	Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions)    Employer (See Instructions)		PO BOX 480				
Date O9/17/2015		Conroe, TX 77305				
Milstead, Amy   \$2,500.   Contributor address; City; State; Zip Code   30 Holly Laurel Dr   The Woodlands, TX 77382   Principal occupation / Job title (See Instructions)   Employer (See Instructions)   Amount of Contribution (\$)   \$900.   Contributor address; City; State; Zip Code   PO BOX 7889   The Woodlands, TX 77387   Principal occupation / Job title (See Instructions)   Employer (See Instructions)   Employer (See Instructions)   \$250.   Contributor address; City; State; Zip Code   Po Box 7889   The Woodlands, TX 77387   Employer (See Instructions)   Employer (See Instructions)   \$250.   Contributor address; City; State; Zip Code   2253 N loop 336 W   Conroe, TX 77304	Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	)		
Contributor address; City; State; Zip Code 30 Holly Laurel Dr The Woodlands, TX 77382  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  \$900.  Contributor address; City; State; Zip Code PO BOX 7889  The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  \$900.  \$900.  Contributor address; City; State; Zip Code PO BOX 7889  The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304	Date	Full name of contributor  ut-of-state PAC (ID#:_			Amount of Contribution (\$)	
30 Holly Laurel Dr   The Woodlands, TX 77382   Principal occupation / Job title (See Instructions)   Employer (See Instructions)	09/17/2015	Milstead, Amy				\$2,500.00
Principal occupation / Job title (See Instructions)  Date  Date  08/03/2015  Montgomery County Law Enforcement Association PAC  Contributor address; City; State; Zip Code PO BOX 7889  The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  \$900.  \$900.  \$900.  Contributor address; City; State; Zip Code PO BOX 7889  The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304	ľ					
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  Sepon.  Amount of Contribution (\$)  Sepon.  Amount of Contribution (\$)  Poblished Pobli		30 Holly Laurel Dr				
Date   Full name of contributor   out-of-state PAC (ID#:	j	The Woodlands, TX 77382				
08/03/2015 Montgomery County Law Enforcement Association PAC  Contributor address; City; State; Zip Code PO BOX 7889  The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date 10/12/2015 Moody, Milton  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304	Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	)	•	
Contributor address; City; State; Zip Code PO BOX 7889 The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date 10/12/2015 Moody, Milton Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code 2253 N loop 336 W Conroe, TX 77304	Date	Full name of contributor  ut-of-state PAC (ID#:_			Amount of Contribution (\$)	
Contributor address; City; State; Zip Code PO BOX 7889  The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date 10/12/2015 Moody, Milton Contributor address; City; State; Zip Code 2253 N loop 336 W Conroe, TX 77304  Contributor address; City; State; Zip Code	08/03/2015					\$900.00
The Woodlands, TX 77387  Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Employer (See Instructions)  Amount of Contribution (\$)  10/12/2015  Moody, Milton  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304	ĺ	Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions)  Employer (See Instructions)  Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)  10/12/2015 Moody, Milton \$250.  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304						
10/12/2015 Moody, Milton \$250.  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304	Principal occup	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions	i)		<u>.</u>
10/12/2015 Moody, Milton \$250.  Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304	Date	Full name of contributor	,	_	Amount of Contribution (\$)	
Contributor address; City; State; Zip Code 2253 N loop 336 W  Conroe, TX 77304		Moody, Milton			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00
		Contributor address; City; State; Zip Code				
		Conroe, TX 77304				
			Employer (See Instructions	└─ ;)		

The Instruc	tion Guide explains how to complete this fo	orm.	Total pages Schedule A1: Sch: 15/22 Rpt: 20/74	
FILER NAME	2and	:	3 Filer ID	
Henderson, R	Sand  5 Full name of contributor out-of-state PAC (ID#:_		7 Amount of Contribution (\$)	
09/18/2015	Morrison, Darrell			\$800.0
.	6 Contributor address; City; State; Zip Code			
	4226 Armand View Dr			
	Pasadena, TX 77505			
Principal occup		9 Employer (See Instructions)		
Date	Full name of contributor	)	Amount of Contribution (\$)	
10/27/2015	Moul, Kirk			\$100.0
ľ	Contributor address; City; State; Zip Code	l		
	115 East Cove View Trail			
	The Woodlands, TX 77389			
Principal occup	nation / Job title (See Instructions)	Employer (See Instructions)		
			Amount of Contribution (\$)	10.4
Date 12/18/2015	Full name of contributor out-of-state PAC (ID#:_ Mowry, J Kelly		Amount of Continuation (4)	\$1,000.0
	1322 Rutland St			
	Houston, TX 77008			
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions)		
	,	, ,	_	
Date	Full name of contributor ut-of-state PAC (ID#:_		Amount of Contribution (\$)	
10/06/2015	Mynar, Johnny			\$250.
ľ	Contributor address; City; State; Zip Code			
	2568 Mynar Rd			
	West, TX 76691			
Principal occup	oation / Job title (See Instructions)	Employer (See Instructions)	ı	
Date	Full name of contributor		Amount of Contribution (\$)	\$25.0
10/12/2015	Omohundro, John			Φ∠5.
	Contributor address; City; State; Zip Code 14 Irish Moss PI			
	2 : 7:51: 14:555 1 1			
	The Woodlands, TX 77381			
	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions)		

	MONET	Ά	RY POLITICAL CONTR	IBUTIO	NS 		SCHEDUL	E A1
	The Instru	cti	on Guide explains how to comp	lete this fo	orm.	1	Total pages Schedule A1: Sch: 16/22 Rpt: 21/74	
2	FILER NAME					3	Filer ID	
	Henderson,	Ra	nd			L		
4	Date 09/08/2015	5	Owens, Charles	ate PAC (ID#:		7	Amount of Contribution (\$)	\$250.00
		6	Contributor address; City; State; Zip Cod 8803 Scenic Green Dr	le				
			Magnolia, TX 77354					
8	Principal occu	ıpat	on / Job title (See Instructions)		9 Employer (See Instructions	5)		
_	Date	Т	Full name of contributor out-of-str	ate PAC (ID#:	)	Γ	Amount of Contribution (\$)	<del></del>
	12/31/2015	ļ	Patel, Kevin				.,	\$5,000.00
			Contributor address; City; State; Zip Coc 1601 I 45 S	ie				
			Conroe, TX 77301					
	Principal occu	ıpaı	on / Job title (See Instructions)		Employer (See Instructions	5)		
F	Date	T	Full name of contributor out-of-st	ate PAC (ID#:			Amount of Contribution (\$)	
	12/03/2015		Pedigo, Renel			ŀ		\$100.00
		-	Contributor address; City; State; Zip Cod	ie		1		
		l	2210 N Frazier					
			Conroe, TX 77303					
	Principal occu	ıpa:	on / Job title (See Instructions)		Employer (See Instructions	5)		
-	Date	Τ	Full name of contributor  out-of-st	ate PAC (ID#:_			Amount of Contribution (\$)	
	10/08/2015		Powers, Karen			1		\$525.00
		ļ	Contributor address; City; State; Zip Coo	de		1		
1			10 S Provence Cir			İ		
			The Woodlands, TX 77382		Employer (Coa Instructions	<u></u>		
	Principal occi	лра	ion / Job title (See Instructions)		Employer (See Instructions	s)		
	Date	T	Full name of contributor uut-of-st	ate PAC (ID#:_			Amount of Contribution (\$)	
	11/05/2015		Raine, Edward					\$1,500.00
			Contributor address; City; State; Zip Coo	de		1		
			11 Oakley Downs Pl					
			The Woodlands, TX 77382					
$\vdash$	Principal occi	Jpa Jpa	ion / Job title (See Instructions)	<u> </u>	Employer (See Instructions	s)		
		,- •	• • • • • • • • • • • • • • • • • • • •					
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	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 17/22 Rpt: 22/74	<del></del>
2	FILER NAME Henderson,	Rand		3	Filer ID	
4		5 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
		6611 Durango Dr Magnolia, TX 77354				
8	Principal occu		Employer (See Instructions	)		
	Date 10/12/2015	Full name of contributor  out-of-state PAC (ID#: Richards, Thomas Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$35.00
		1160 Carey Dr				
	B: : I	Angleton, TX 77515	Employer (See Instructions	_	<u></u>	_
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	,		
***	Date 10/12/2015	Full name of contributor out-of-state PAC (ID#: Ruiz, Dan			Amount of Contribution (\$)	\$995.00
		Contributor address; City; State; Zip Code 2014 Stanford Park Ct				
		Katy, TX 77450				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
_	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	•
	10/12/2015	Sanson, Timothy				\$71,00
		Contributor address; City; State; Zip Code 516 FM 3083				
		Conroe, TX 77302				
	Principal occi	apation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/12/2015	Sanson, Timothy				\$450.00
		Contributor address; City; State; Zip Code 516 FM 3083				
		Conroe, TX 77302				
	Principal occi	pation / Job title (See Instructions)	Employer (See Instructions	 s)		
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				SCHEDUL	_ ,
The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 18/22 Rpt: 23/74	
FILER NAME			3	Filer ID	
Henderson,	<u>.                                    </u>				
Date 07/28/2015	5 Full name of contributor Out-of-state PAC (ID#:_ Shumate, W Christian		7	Amount of Contribution (\$)	\$500.00
	6 Contributor address; City; State; Zip Code 6 Langham Court				
	Shenandoah, TX 77381				
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
			_	Amount of Contribution (\$)	
Date 12/21/2015	Full name of contributor	}		Amount of Contribution (a)	\$500.00
	Contributor address; City; State; Zip Code 9010 FM 1488				
	Magnolia, TX 77354				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	i)		
Date	Full name of contributor out-cf-state PAC (ID#:			Amount of Contribution (\$)	
08/06/2015	Smith, Greg				\$500.00
	Contributor address; City; State; Zip Code 20850 Eva St				
	Montgomery, TX 77356			<u> </u>	
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	i)	<del>.</del>	
Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
10/12/2015	Sondag, Jerry				\$575.00
	Contributor address; City; State; Zip Code				
	108 E Davis				
	Conroe, TX 77304				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
10/12/2015	Sondag, Jerry			.,,	\$50.00
	Contributor address; City; State; Zip Code				
	108 E Davis				
	Conroe, TX 77304				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Principal occu		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/22 Rpt: 24/74	
2	FILER NAME Henderson,			3	Filer ID	
4	Date 10/12/2015	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Sondag, Jerry</li> <li>6 Contributor address; City; State; Zip Code 108 E Davis</li> <li>Conroe, TX 77304</li> </ul>		7	Amount of Contribution (\$)	\$60.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	i)		
	Date 10/12/2015	Full name of contributor out-of-state PAC (ID#:_Sondag, Jerry  Contributor address; City; State; Zip Code  108 E Davis  Conroe, TX 77304			Amount of Contribution (\$)	\$45.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/02/2015	Full name of contributor out-of-state PAC (ID#:_ Soroko, Evylin  Contributor address; City; State; Zip Code 330 Rayford Rd ste 260  Spring, TX 77386			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>.                                    </u>		
	Date 10/12/2015	Full name of contributor out-of-state PAC (ID#:_ Speight, Kenny Contributor address; City; State; Zip Code PO BOX 9645 The Woodlands, TX 77382			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/08/2015	Full name of contributor out-of-state PAC (ID#:_ Stromberg, Karl Contributor address; City; State; Zip Code 79 N Lamerie Way The Woodlands, TX 77382			Amount of Contribution (\$)	\$525.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		

The Instruc	tion Guide explains how	to complete this f	form.	Total pages Schedule A1: Sch: 20/22 Rpt: 25/74	
FILER NAME		<u> </u>		3 Filer ID	
Henderson, F	Rand				
Date 08/06/2015	5 Full name of contributor Sutton, Joseph	out-of-state PAC (ID#:_		7 Amount of Contribution (\$)	\$1,000.0
	6 Contributor address; City; Sta 18 Grand Colonial				
	The Woodlands, TX 77382	2			
Principal occup	pation / Job title (See Instructions)		9 Employer (See Instructions)		,
Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/22/2015	Tally, Fred				\$250.0
	Contributor address; City; Sta 4136 Goodfellow Dr	ate; Zip Code			
	Dallas, TX 75229				
Principal occur	nation / Job title (See Instructions)	·	Employer (See Instructions)		
Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)	<b>400</b> E
10/12/2015		·			\$335.0
	Contributor address; City; Sta 403 Lovebird LN	ate; Zip Code			
	Murphy, TX 75094				
Principal occur	pation / Job title (See Instructions)	)	Employer (See Instructions)		
Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)	
10/12/2015	Taylor, Blake	_			\$250.6
	Contributor address; City; Sta	ate; Zip Code			
	403 Lovebird LN				
	Murphy, TX 75094				
Principal occup	pation / Job title (See Instructions)	)	Employer (See Instructions)	)	
Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)	
10/12/2015	Vercher, Zach				\$50.0
	Contributor address; City; Sta	ate; Zip Code			
	10548 Fawn Mist Ct				
	Conroe, TX 77303				
		)	Employer (See Instructions)		

The Instruct	ion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/22 Rpt: 26/74	
FILER NAME			3	Filer ID	
Henderson, R	<u> </u>			A 2004 00 660	
Date 5	Full name of contributor		7	Amount of Contribution (\$)	\$20.00
[	i Contributor address; City; State; Zip Code 15 Laguna Rd				
	Montgomery, TX 77356				
Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
Date	Full name of contributor Out-of-state PAC (ID#:		Ī	Amount of Contribution (\$)	
09/10/2015	Whitaker, Travis				\$200.00
ľ	Contributor address; City; State; Zip Code 705 W Main	·			
	Tomball, TX 77375			•	
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	L ;)		
			_		
Date 07/02/2015	Full name of contributor			Amount of Contribution (\$)	\$50.00
•	Contributor address; City; State; Zip Code				
	87 April Wind South				
	Montgomery, TX 77356				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor  ut-of-state PAC (ID#:_			Amount of Contribution (\$)	+0= 05
10/12/2015	Wilson, LC		-		\$25.00
	Contributor address; City; State; Zip Code 6927 Texas Trace				
	Montgomery, TX 77316				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	3)		
Date	Full name of contributor  ut-of-state PAC (ID#:_		Τ	Amount of Contribution (\$)	· · · · · · · · · · · · · · · · · · ·
08/24/2015	Wood, Stephanie				\$2,500.00
	Contributor address; City; State; Zip Code 1417 Lamesa Dr	•			
	Conroe, TX 77384				
Dringing cours	ation / Job title (See Instructions)	Employer (See Instructions	s)		

MONE	TARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
The Inst	ruction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/22 Rpt: 27/74	·
2 FILER NAM Henderso			3	Filer ID	
4 Date 10/12/201	5 Full name of contributor out-of-state PAC (ID#:_ Wood, Stephanie  6 Contributor address; City; State; Zip Code 1417 Lamesa Dr  Conroe, TX 77384		7	Amount of Contribution (\$)	\$1,575.00
8 Principal or	ccupation / Job title (See Instructions)	9 Employer (See Instructions	)		
Date 07/19/201	Full name of contributor out-of-state PAC (ID#:_  Wyatt, Karen  Contributor address; City; State; Zip Code  1 Waters Edge St  Montgomery, TX 77356			Amount of Contribution (\$)	\$50.00
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	i)		
Date 11/11/201	Full name of contributor out-of-state PAC (ID#:_ Wyatt, Karen  Contributor address; City; State; Zip Code 1 Waters Edge St  Montgomery, TX 77356	)		Amount of Contribution (\$)	\$150.00
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 08/07/201	Full name of contributor out-of-state PAC (ID#:_ Yancy, Jo Ann Contributor address; City; State; Zip Code PO BOX 3159  Conroe, TX 77305	)		Amount of Contribution (\$)	\$950.00
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	s)		

# NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/10 Rpt: 28/74 3 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution Amount of 6 Full name of contributor out-of-state PAC (ID#: 5 Date contribution (\$) description 10/12/2015 Baacke, Jon \$100,00 i Woodforest foursome and Contributor address; City; State; Zip Code <sup>l</sup> Meal 331 Kinderwood Trl Check if travel outside of Texas. Complete Schedule T. Montgomery, TX 77316 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: Date contribution (\$) description 10/12/2015 Baacke, Jon \$60.0011 Hr Golf Lesson Contributor address; City; State; Zip Code 331 Kinderwood Trl Montgomery, TX 77316 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Full name of contributor Date out-of-state PAC (ID#:\_ contribution (\$) description 10/12/2015 Bartoskewitz, Brandon \$100.00 | Woodforest for 2 Contributor address; City; State; Zip Code 70 N Crescendo Path Pl Shenandoah, TX 77381 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission www.ethics.state.tx.us

# NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/10 Rpt: 29/74 3 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution Amount of 6 Full name of contributor out-of-state PAC (ID#:\_ 5 Date contribution (\$) description 10/12/2015 Bartoskewitz, Brandon \$400.001NANO 9MM BERETTA 7 Contributor address; City; State; Zip Code 70 N Crescendo Path Pl Shenandoah, TX 77381 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: Date description contribution (\$) 10/12/2015 Bartoskewitz, Brandon \$450,001 GLOCK 43 9MM Contributor address; City; State; Zip Code 70 N Crescendo Path Pl Shenandoah, TX 77381 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Brandon, Bartoskewitz \$60,001 Woodforest for 2 Contributor address; City; State; Zip Code 70 N Crescendo Path Pl Shenandoah, TX 77381 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) www.ethics.state.tx.us

# NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 3/10 Rpt: 30/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 6 Full name of contributor Amount of ut-of-state PAC (ID#: 5 Date contribution (\$) description 10/12/2015 Brandon, Bartoskewitz \$60.00 i Woodforest for 2 Contributor address; City; State; Zip Code 70 N Crescendo Path Pl Shenandoah, TX 77381 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor ut-of-state PAC (ID#: Date contribution (\$) description 10/12/2015 Conn. Darrel \$100.00 Custom Wooden Cooler Contributor address; City; State; Zip Code 24338 Redbud Ave Porter, TX 77365 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Davis, Stephanie \$250.00 | Overpoint Waterpoint Stay Contributor address; City; State; Zip Code 6917 Gentle Breeze Dr Willis, TX 77318 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/10 Rpt: 31/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 6 Full name of contributor out-of-state PAC (ID#:\_ Amount of 5 Date contribution (\$) description 10/12/2015 Green-Wallace, Michelle \$75.00 | Corn Hole Game Set Contributor address; City; State; Zip Code 592 Rollinghills Conroe, TX 77303 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Date Full name of contributor out-of-state PAC (ID#; contribution (\$) description 10/12/2015 Green-Wallace, Michelle \$100.00 RUSTIC COOLER Contributor address; City; State; Zip Code 592 Rollinghills Conroe, TX 77303 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor Date out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Herring, Brice \$100.00 Come and Take It Holster Contributor address; City; State; Zip Code 3701 Mystic Cir Montgomery, TX 77356 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Version V1.0.34225 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 5/10 Rpt: 32/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution Amount of 6 Full name of contributor out-of-state PAC (ID#: 5 Date contribution (\$) description 10/12/2015 Herring, Brice \$100.00 Texan Flag Holster Contributor address; City; State; Zip Code 3701 Mystic Cir Montgomery, TX 77356 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Date Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Jon, Baacke \$60.0011 Hr Golf Lesson Contributor address; City; State; Zip Code 331 Kinderwood Trl Montgomery, TX 77316 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Date Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Jon, Baacke \$60.0011 Hr Golf Lesson Contributor address; City; State; Zip Code 331 Kinderwood Trl Montgomery, TX 77316 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.34225

# **NON-MONETARY (IN-KIND) POLITICAL** SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 6/10 Rpt: 33/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 6 Full name of contributor Amount of 5 Date out-of-state PAC (ID#:\_ contribution (\$) description 10/12/2015 Kirchhofer, Ken \$200.00 Putter Contributor address; City; State; Zip Code 19202 Kelly Pines Ct Humble, TX 77346 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Date Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Kirchhofer, Ken \$50.00 i Signed Sports Books Contributor address; City; State; Zip Code 19202 Kelly Pines Ct Humble, TX 77346 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Kirchhofer, Ken \$50.001 Signed Sports Books Contributor address; City; State; Zip Code 19202 Kelly Pines Ct Humble, TX 77346 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

# NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 7/10 Rpt: 34/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution Amount of 6 Full name of contributor ut-of-state PAC (ID#: 5 Date contribution (\$) description 10/12/2015 Kirchhofer, Ken \$50.00 i Golf Picture Contributor address; City; State; Zip Code 19202 Kelly Pines Ct Humble, TX 77346 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: Date description contribution (\$) 10/12/2015 Kirchhofer, Ken \$50.00 I Golf Picture Contributor address; City; State; Zip Code 19202 Kelly Pines Ct Humble, TX 77346 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Date Full name of contributor out-of-state PAC (ID#: description contribution (\$) 10/12/2015 Leck, Marian \$50.00 | Fall Arrangements Contributor address; City; State; Zip Code 2217 Stableridge Dr Check if travel outside of Texas. Complete Schedule T. Conroe, TX 77384 Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Forms provided by Texas Ethics Commission

### **NON-MONETARY (IN-KIND) POLITICAL** SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 8/10 Rpt: 35/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 6 Full name of contributor Amount of 5 Date out-of-state PAC (ID#:\_ contribution (\$) description 10/12/2015 Leck, Marian \$50.001 Fall Arrangements Contributor address; City; State; Zip Code 2217 Stableridge Dr Conroe, TX 77384 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: Date contribution (\$) description 10/12/2015 Leck, Marian \$50.001 Holiday Wreath Contributor address; City; State; Zip Code 2217 Stableridge Dr Conroe, TX 77384 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor Date out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Lowe, Tori \$150.00 | Yeti Bag Contributor address; City; State; Zip Code 1019 N Thompson St Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 9/10 Rpt: 36/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 6 Full name of contributor out-of-state PAC (ID#: Amount of 5 Date contribution (\$) description 10/12/2015 Lowe, Tori \$50.001 Yeti 30 oz Rambler Contributor address; City; State; Zip Code 1019 N Thompson St Conroe, TX 77301 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor out-of-state PAC (ID#: Date contribution (\$) description 10/12/2015 Norum, Carl \$200.00 | Putter Contributor address; City; State; Zip Code 1628 Cantrell Blvd Conroe, TX 77301 Check if travel outside of Texas. Complete Sch Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Full name of contributor Date out-of-state PAC (ID#: description contribution (\$) 10/12/2015 Ray, Kevin \$100.00 | Signed Nick Saban Contributor address; City; State; Zip Code Alabama Football 6611 Durango Dr Magnolia, TX 77354 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Version V1.0.34225 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 37/74 Filer ID 2 FILER NAME Henderson, Rand \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 5 Date 6 Full name of contributor out-of-state PAC (iD#:\_ Amount of contribution (\$) description 10/12/2015 Stover, Billy \$250.00 Purple Amethyst 7 Contributor address; City; State; Zip Code 11705 Sagittarius Dr W Check if travel outside of Texas. Complete Schedule T. Willis, TX 77318 11 Employer (FOR NON-JUDICIAL) (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) In-kind contribution Amount of Date Full name of contributor out-of-state PAC (ID#: contribution (\$) description 10/12/2015 Winford, Keith \$100.001 Custom Knife w/ Case Contributor address; City; State; Zip Code 9909 Chestnut Ct Montgomery, TX 77316 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) Contributor's employer/law firm (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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Version V1.0.34225

## SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - li Committee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guid	pense Printing Salarie	-	e /Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed ai	oove)
1	Total pages Schedule F1:	2 FILER NAM		-			3 Filer ID	
Ī	Sch: 1/37 Rpt: 38/74	Hendersor						
4	Date	5 Payee name	е					
	10/16/2015		ay Garage					
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code			
	\$6.00	9 Greenwa	ay plaza					
		Houston, 7	ΓX 77046				<u></u>	<u></u>
8	PURPOSE	(a) Category (	See Categories listed at the t	top of this schedule)	(b)	Description	101 strong accorded askedda T	
	OF EXPENDITURE	Fees					outside of Texas. Complete Schedule T. n, TX, officeholder living expense	
					1	Parking	,	
						J		
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office s	ought		Office held	
F	Date	Рауее пат	e	<u> </u>				
	07/21/2015	American	Screen Graphics					
┢╾	Amount (\$)	Payee addr	ess; City;	State; Zip	Code	-		
	\$537.50	РО ВОХ 6						
		Kingwood,	TX 77325					
┞	PURPOSE	(a) Category	See Categories listed at the	top of this schedule)	(b)	•		
	OF EXPENDITURE	Advertising				_	outside of Texas. Complete Schedule T.	
		•				Shirts	n, TX, officeholder living expense	
				•		Offints.		
-	Complete ONLY if direct	Candidate/O	fficeholder name	Office s	ouaht		Office held	
	expenditure to benefit C/O				-			
⊨	Date	Payee nam	e			<u> </u>		
	09/29/2015	April Soun						
$\vdash$	Amount (\$)	Payee addr		State; Zip	Code		<u></u>	
	\$360.00	67 April W		-uu, 21p	_540			
	\$300.00	1 ALZhiii AA						
		   Montgome	ery, TX 77356					
$\vdash$	PURPOSE		See Categories listed at the	ton of this sehedule	(b)	Description		
	OF	Fees	See Categories listed at the	rob or mas scrieding)	'		outside of Texas. Complete Schedule T.	
	EXPENDITURE	"				Check if Austin	n, TX, officeholder living expense	
						Sponsor		
L	<u>-</u>							
	Complete ONLY if direct		fficeholder name	Office s	sought		Office held	
L	expenditure to benefit C/O	П						
Γ				<u> </u>				
			•					

### SCHEDULE F1

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

Solicitation/Fundraising Expense

		Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_		_			now to comp	nete tris iorn.	3 Filer ID
1	Total pages Schedule F1:	ı					3 FIREID
	Sch: 2/37 Rpt: 39/74	_	Henderson,				
4		ļ .	Payee name				
	11/16/2015		Armstrong,	Jack			
6	Amount (\$)	7	Payee addre	ess; City; State;	Zip Code	•	
	\$500.00		710 S Frazi	er			
			Conroe, TX	77301			
8	PURPOSE	(a)	Category (s	See Categories listed at the top of this sche	edule) (h	Description	
	OF EXPENDITURE		Fees	· · · •		<u> </u>	outside of Texas. Complete Schedule T.
	EXPENDITURE						n, TX, officeholder living expense
						Glass Windo	<b>/W</b>
		<u></u>					27 133
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Offi	ficeholder name O	Office sough	ıt	Office held
Γ	Date	Ī	Payee name				
	08/14/2015		Black Waln				
-	Amount (\$)	一	Payee addre	ess; City; State;	Zip Code	9	
	\$20.72		2971 Hawth				
	!		Conroe, TX	( 77303			
┝	PURPOSE	(a)		See Categories listed at the top of this sche	(1)	b) Description	
	OF	(50)		See Categories listed at the top of this scrie rage Expense	edule)	·	l outside of Texas. Complete Schedule T.
	EXPENDITURE		FOOGIDEVE.	age Expense		Check if Austin	n, TX, officeholder living expense
	,					Food	
	l						
Г	Complete ONLY if direct		Candidate/Off	ficeholder name C	Office sough	nt	Office held
	expenditure to benefit C/OI	н					
F	Date	Γ	Payee name	)			-
	08/24/2015		Black Waln	rut Caf			
┞	Amount (\$)	T	Payee addre	ess; City; State;	; Zip Code	e	
	\$25.28		2971 Hawt	horne Drive			
	ļ						
	!		Conroe, TX	ζ 77303			
┡	PURPOSE	<del> </del>		<del></del>	10	b) Description	
	OF	ارم	•	see Categories listed at the top of this schoor grage Expense	redule)		l outside of Texas. Complete Schedule T.
	EXPENDITURE		Lüümbever	iage Expense		السبيا	in, TX, officeholder living expense
						Food	
一	Complete ONLY if direct	_	Candidate/Off	ficeholder name C	Office sough	ht	Office held
	expenditure to benefit C/O	Н					
$\vdash$		_	<u></u>				

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Gift/Awards/Memorials Ex Legal Services  The Instruction Guid		_	:/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM					3 Filer ID	_
-	Sch: 3/37 Rpt: 40/74	Henderson						
4	Date	5 Payee name						
	08/06/2015	Black Walr						
6	Amount (\$)	7 Payee addre	ss; City;	State;	Zip Code			
	\$29.31	2971 Hawt	norne Drive					
		Canda T	77202					
		Conroe, T	<del></del> -		la.	Para		
8	PURPOSE OF		ee Categories listed at the	top of this sched	ule) (D)	Description  Check if travel o	utside of Texas. Complete Schedule T.	
	EXPENDITURE	Food/Beve	rage Expense			<u></u>	TX, officeholder living expense	
						Food		
9	Complete ONLY if direct expenditure to benefit C/Ol		iceholder name	Off	ice sought		Office held	
_	Date	Payee name						
	10/29/2015	Black Walr						
_				C1-1	Zin Codo			
	Amount (\$)	Payee addre	*	State;	Zip Code			
	\$42.01	2971 Hawt	horne Drive					
		Conroe, TX	77303				·	
	PURPOSE	(a) Category (s	ee Categories listed at the	top of this sched	ule) (b)	Description		
	OF	=	rage Expense			Check if travel o	utside of Texas. Complete Schedule T.	
	EXPENDITURE					<u> </u>	TX, officeholder living expense	
						Food		
							<del>-</del>	
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Off	fice sought		Office held	
	expenditure to benefit C/O							
	Date	Payee name		· ·			-	
	10/30/2015	Brett Ligon	Campaign					
	Amount (\$)	Payee addre	ess; City;	State;	Zip Code			
	\$100.00	PO BOX 8			•			
	<b>\$25000</b>		_					
			TV 772EC					
		Montgome	ry, TX 77356 			<u>.</u>		
	PURPOSE		iee Categories listed at the		<sub>lule)</sub> (b)	Description		
	OF EXPENDITURE		ns/Donations Mad				utside of Texas. Complete Schedule T. TX, officeholder living expense	
		Candidate/	Officeholder/Polition	cal Commit	tee	Cake Auction	17, oncertaider trying expense	
						Care Audion		
	0	One 20 desc (O)	Saabaldar		foo sevet		Office held	
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	OI.	fice sought			
		H Brett	Ligon				District Attorney	

#### SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbur Fees Office Overhead/Rental E Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract   The Instruction Guide explains how to complete this for			I/Rental Expense : e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
					explains	ilow to co	IIIPIE	te this lonn.	_	PilID
1	. •	2	FILER NAME						3	Filer ID
L	Sch: 4/37 Rpt: 41/74		Henderson,	Rand						
4	Date	5	Payee name							
	11/30/2015		CNS Charitie	es						
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	dе			
	\$2,500.00		3351 E Davi	s St						
		Ì								
		i	Conroe, TX	77301						
Ļ	DUDDOCE	(0)					(h)	Description		<u> </u>
8	PURPOSE OF	(a)		e Categories listed at the to	op of this sche	edule)	(U)		outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE	ł	Fees					<u></u>		, officeholder living expense
								Sponsor		
9 Complete ONLY if direct Candidate/Officeholder name Office sought							Office held			
	expenditure to benefit C/OI	Н								
⊨	Date	Π	Davisa reme		<del></del>					
	10/26/2015		Payee name	n Lions Club						
_							-			
	Amount (\$)		Payee addres	· •	State;	Zip Co	de			
	\$55.00		PO BOX 113	35						
			Conroe, TX	77305						
Г	PURPOSE	(a)	Category (Se	e Categories listed at the to	op of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Fees	·				<u> </u>		ide of Texas. Complete Schedule T.
	EXPENDITORE								, TX	, officeholder living expense
								Membership		
	<u></u> -	L.,								
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	C	Office sou	ght			Office held
	experiulibre to benefit C/Oi	п								
	Date		Рауее пате							
	10/01/2015		Conroe Noo	n Lions Club						
	Amount (\$)	┢	Payee addres	ss; City;	State;	Zip Co	de			
İ	\$55.00		PO BOX 113							
			Willis, TX 77	7218						
		Ļ				1	(I-)			
	PURPOSE OF	(a)		e Categories listed at the to	op of this sche	edule)	(0)	Description  Check if travel	outei	ide of Texas. Complete Schedule T.
	EXPENDITURE		Fees							, officeholder living expense
								ш Membership		
								•		
$\vdash$	Complete ONLY if direct	<u></u>	Candidate/Offic	ceholder name		Office sou	aht			Office held
expenditure to benefit C/OH										
$\vdash$										
ĺ										

#### SCHEDULE F1

Advertising Expense Accounting/Banking

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		nmittee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	pense	Polling E Printing I Salaries/	Expense			Travel in District Travel Out of District OTHER (enter a category not listed a	above)
	Credit Card Payment			The Instruction Guide	e explains l	how to c	omple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME	E					3	Filer ID	
	Sch: 5/37 Rpt: 42/74	!	Henderson,	, Rand					<u></u>	<u> </u>	
4	Date	5	Payee name	,				<del></del> _	_		_
	12/01/2015			on Lions Club				_	_		
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip C	:ode				
	\$55.00	1	PO BOX 11	135							
		1									
		-	Conroe, TX	( 77305							
8	PURPOSE	(a)	Category (S	See Categories listed at the t	op of this sche	edule)	(b)	Description			
	OF EXPENDITURE	ı	Fees					<b></b>		de of Texas. Complete Schedule T.	
		1					1	Membership		officeholder living expense	
		1						, попостанир			
_	Complete CMI V 2 -	ب	`andidota 'ora	ficeholder name		Office so	Unb+			Office held	
9	Complete ONLY if direct expenditure to benefit C/OH		Sanuluate/Off	meenoluel Hallie	C	ve 50	Jugill			unios nolu	
H	Date	—	Payee пате	i.					_		
	11/01/2015		•	on Lions Club							
<u> </u>		╙			Stato	; Zip C	:ode			<u> </u>	<u></u>
	Amount (\$) \$105.00	1	Payee addre		ાતાર,	, <u>-</u> .p (	-Juc				
	\$105.00	ļ	FO BOX T	100							
		ļ		, 77905							
L		ļ	Conroe, TX								
	PURPOSE OF	1		See Categories listed at the t	top of this sch	edule)	(b)	Description	Miles :	e of Tayon Complete Sabadata	
	OF EXPENDITURE	-	Fees					<u> </u>		de of Texas, Complete Schedule T. officeholder living expense	
								Membership		and and and	
-	Complete ONLY if direct	Щ.	Candidate/Off	ficeholder name		Office so	nught			Office held	
	expenditure to benefit C/OF		+ "								
H	Date	_	Payee name	``					—		
	07/27/2015		-	e oon Lions Club							
		<u> </u>			Stato	; Zip C	,uqe				
	Amount (\$) \$110.00		Payee addre		ગતાછ,	, ∠ıµ (	Joue				
	\$110.00		FU BUX I.	TOO							
	I		<b>-</b>	/ 7700E							
L		+	Conroe, TX								
	PURPOSE OF	1		See Categories listed at the t	top of this sch	edule)	(b)	Description		lo of Toyon Complete Colored Co.	
	EXPENDITURE		Fees							de of Texas. Complete Schedule T. officeholder living expense	
	Ì						1	Membership		and a sea	
1	Ì										
$\vdash$	Complete ONLY if direct	Щ	Candidate/Off	ficeholder name		Office so	ought			Office held	
1	expenditure to benefit C/OF		الاستساسا		•		٠٠٠ دن				
$\vdash$											
1											

#### 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/Politica Credit Card Payment	- I Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	Polling Exnrse Printing Exnrse Salaries/N	pense xpens Vages	e Contract Labor		Transportation Equipment & Rela Travel in District Travel Out of District OTHER (enter a category not liste	•
			The Instruction Guide	explains how to co	mple	te this form.			
1	Total pages Schedule F1:						3	Filer ID	
	Sch: 6/37 Rpt: 43/74	Henderso	n, Rand				L.,		
4	Date	5 Payee nan	ie						
	08/01/2015	Conroe N	oon Lions Club						
6	Amount (\$) \$575.00	7 Payee add PO BOX		State; Zip Co	de		•		
		Conroe, 1	X 77305						
8	PURPOSE OF EXPENDITURE	(a) Category Fees	(See Categories listed at the top	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		fficeholder name	Office sou	ght			Office held	
	Date	Payee nan	ne					-	
	07/06/2015	Constant	Contact						
	Amount (\$)	Payee add	ress; City;	State; Zip Co	de				
	\$21.32	1601 Tra	pelo Rd						
		Waltham,	MA 02451						
Γ	PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees				<b>-</b>		de of Texas. Complete Schedule T officeholder living expense	•
	Complete ONLY if direct expenditure to benefit C/Ol		officeholder name	Office sou	ight			Office held	
F	Date	Payee nar	ne						
1	12/16/2015	Corner St	ore						
	Amount (\$) \$31.96	Payee add	oop 336 W	State; Zip Co	ode				
L		Conroe,	A 11304		]				
	PURPOSE OF EXPENDITURE		(See Categories listed at the top ation Equipment & Ro		(b)			de of Texas. Complete Schedule T officeholder living expense	
_	Complete ONLY if direct expenditure to benefit C/Ol		officeholder name	Office sou	ight			Office held	
					······································				

#### SCHEDULE F1

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	Office Overhe Polling Exper Printing Expe Salaries/Wag	nse es/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		The Instruction Guide ex	plains how to comp		
1	Total pages Schedule F1:	2 FILER NAME		-	Filer ID
	Sch: 7/37 Rpt: 44/74	Henderson, Rand			
4	Date	5 Payee name		-	
	11/02/2015	Corner Store			
6	Amount (\$)	7 Payee address; City;	State; Zip Code		
	\$32.44	620 N FM 3083 W Conroe, TX 77304	. ,		
8	PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b	) Description	
٦	OF	Transportation Equipment & Rela			utside of Texas. Complete Schedule T.
	EXPENDITURE	Expense		Check if Austin,	TX, officeholder living expense
		·		Gas	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sough	t	Office held
-	Date	Payee name	<del></del>		
	09/26/2015	Corner Store			
_			State; Zip Code		
	Amount (\$)	Payee address; City;	State, Zip Code		
	\$33.29	12325 w FM 1097			
		Willis, TX 77318			
				<b>3</b>	
	PURPOSE OF	(a) Category (See Categories listed at the top of	una sonoccio,	Description	utside of Texas, Complete Schedule T.
	EXPENDITURE	Transportation Equipment & Rela	ated		TX, officeholder living expense
		Expense		Gas	
	Complete ONLY if direct	Candidate/Officeholder name	Office sough		Office held
	expenditure to benefit C/Ol	=	Omoo boag.	<u> </u>	
	Date	Payee name	<u> </u>		
	11/08/2015	Corner Store			
Н	Amount (\$)	Payee address; City;	State; Zip Code		
	\$33.45	12325 w FM 1097			
	φουτο	12020 W 1 W 1007			
		Willis, TX 77318			
	PURPOSE	(a) Category (See Categories listed at the top of	f this schedule) (k	) Description	
	OF EXPENDITURE	Transportation Equipment & Rela	ated	<u> </u>	utside of Texas. Complete Schedule T.
	EXPENDITURE	Expense		LI	TX, officeholder living expense
				Gas	
	Complete ONLY if direct	Candidate/Officeholder name	Office sough		Office held
	expenditure to benefit C/O	Н			
$\vdash$					

#### SCHEDULE F1

Advertising Expense

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

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Verneause Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		Travel in District Travel Out of District OTHER (enter a category not listed above)		
L				is now to compa			
1	Total pages Schedule F1: Sch: 8/37 Rpt: 45/74	2 FILER NAM Henderso				3 Filer ID	
┝	Date	5 Payee nam	<u> </u>				
4	09/03/2015	Corner St					
۾	Amount (\$)	7 Payee add	ress; City; Sta	te; Zip Code			
	\$37.75	12325 w F	FM 1097				
		Willis, TX	77318 				
8	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this action Equipment & Related		<u> </u>	outside of Texas. Complete Schedule T. TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OI		fficeholder name	Office sought		Office held	
Г	Date	Payee nam	ie				
	08/20/2015	Corner St	ore		<u> </u>		
	Amount (\$) Payee address; City; State; Zip Code						
	\$44.26	\$44.26 12325 w FM 1097					
L		Willis, TX	77318	103			
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this ation Equipment & Related		<u></u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sought		Office held	-
F	Date	Payee nam	ne		······································		
	07/06/2015	Davenpor	t, Marc				
	Amount (\$) \$50,000.00	Payee add PO BOX	*	ite; Zip Code			
		Houston,	TX 77205				
	PURPOSE OF EXPENDITURE	1	(See Categories listed at the top of this g Expense	schedule) (b)		outside of Texas. Complete Schedule T. . TX, officeholder living expense <pre>xpenses</pre>	
	Complete ONLY if direct expenditure to benefit C/O		ifficeholder name	Office sought		Office held	
Г							

## SCHEDULE F1

Advertising Expense

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations I Candidate/Officeholder		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expense Printing Expens Salaries/Wages	e	Travel in District Travel Out of District OTHER (enter a category not listed above)
Credit Card Payment		The Instruction Guide expl	ains how to comple	te this form.	
1 Total pages Schedule Sch: 9/37 Rpt: 46				3	Filer ID
4 Date	5 Payee name	·	•		
12/14/2015	Davis, Ste				
6 Amount (\$) \$210	7 Payee address 6.50 6917 Gent	le Breeze	State; Zip Code		
8 PURPOSE OF EXPENDITURE		See Categories listed at the top of the	nis schedule) (b)	<u> </u>	tside of Texas. Complete Schedule T. 'X, officeholder living expense
Complete <u>ONLY</u> if di expenditure to benef		ficeholder name	Office sought		Office held
Date	Payee name	e	· · · · · · · · · · · · · · · · · · ·		
10/01/2015	Davis, Ste	phanie			
Amount (\$)	Payee addr	ess; City; S	State; Zip Code	<del></del> -	
\$90	3.88 6917 Gent	le Breeze			
	Willis, TX	77318			
PURPOSE OF EXPENDITURE	(a) Category ( Advertisin	See Categories listed at the top of th g Expense	nis schedule) (b)	<u> </u>	ntside of Texas. Complete Schedule T. TX, officeholder living expense
Complete <u>ONLY</u> if di expenditure to benef		fficeholder name	Office sought	<u> </u>	Office held
Date 10/16/2015	Payee nam Denny's	e			
Amount (\$) \$2	Payee addr 6.46 2243 Ston	eside Dr	State; Zip Code		
	Conroe, T	X 77303			
PURPOSE OF EXPENDITURE		See Categories listed at the top of the rage Expense	his schedule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense
Complete ONLY if d expenditure to benef		fficeholder name	Office sought		Office held

## SCHEDULE F1

Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla		ense ges/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed abov	e)
1 Total pages Schedule F1:	2 FILER NAM			<u> </u>	3 Filer ID	
Sch: 10/37 Rpt: 47/74	Henderson					
		<u> </u>			<u> </u>	
4 Date 10/12/2015	5 Payee nam	e n the Rough				
			7!- 0-d			
( )	7 Payee addr		ate; Zip Cod	8		
\$1,335.00	1104 Brad	Park				
	Conroe, T	x 77304				
8 PURPOSE	(a) Category	See Categories listed at the top of this	s schedule) (I	b) Description		
OF EXPENDITURE	Event Exp			<u></u>	outside of Texas. Complete Schedule T.	
EM ENDITORE					n, TX, officeholder living expense	
				Event		
					Office hold	
Complete ONLY if direct expenditure to benefit C/OF		fficeholder name	Office sough	11	Office held	
Date	Payee nam	e				
08/20/2015	Dosey Do	e Coffee				
Amount (\$)	Payee addr	ess; City; St	ate; Zip Cod	e		
\$28.02	8021 Rese	earch Forest Dr				
	The Wood	ilands, TX 77382				
PURPOSE			- and and all all all all all all all all all al	b) Description		
OF		See Categories listed at the top of this erage Expense	s scriedule)	· — ·	l outside of Texas, Complete Schedule T.	
EXPENDITURE	1 000,000	rage Expense		Check if Austi	n, TX, officeholder living expense	
				Food		
Complete ONLY if direct		fficeholder name	Office soug	nt	Office held	
expenditure to benefit C/O						
Date	Рауее пат	e				
09/21/2015	East Mont	gomery County Fair Asso	ciation			
Amount (\$)	Payee addr	ess; City; St	ate; Zip Cod	e	-	
\$2,056.66	PO BOX 7		· ·			
4_,000.00						
	Porter, TX	77265				
PURPOSE OF		See Categories listed at the top of this	s schedule) (	b) Description  Check if trave	outside of Texas. Complete Schedule T.	
EXPENDITURE		ons/Donations Made By //Officeholder/Political Co	mmittee		n, TX, officeholder living expense	
	Candidate	/Ontecholden/ ontied col	mineco	Sponsor		
				-		
Complete ONLY if direct	Candidate/O	fficeholder name	Office soug	ht	Office held	
expenditure to benefit C/OF			oo ooug			
		·				

### SCHEDULE F1

Advertising Expense

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

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expensions Printing Exper		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Payment		The Instruction Guide expla	ins how to comp	lete this form.		
1	Total pages Schedule F1:	2 FILER NAM	IE			3 Filer ID	
	Sch: 11/37 Rpt: 48/74	Henderso	n, Rand				
4	Date	5 Payee nam	e				
	09/09/2015	Exxon Mo	bil				
6	Amount (\$) \$37,94	7 Payee addr	, 3,	ate; Zip Code			
	Φ01101	2000 ( )					
		Willis, TX	77318				
8	PURPOSE OF		See Categories listed at the top of this		Description	warida at Tayan Camplete Cohadula T	
	EXPENDITURE	Transport Expense	ation Equipment & Relate	d		outside of Texas. Complete Schedule T. TX, officeholder living expense	
		LAPCIISE			Gas		
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sought		Office held	
	Date	Payee nam	e				
	09/08/2015	Exxon Mo	bil				
Т	Amount (\$)	Payee addi	ess; City; St	ate; Zip Code			
	\$42.25 2000 FM 830						
		Willis, TX	77318				
	PURPOSE	(a) Category	See Categories listed at the top of this	s schedule) (b	) Description		
	OF EXPENDITURE	Transport	ation Equipment & Relate			outside of Texas. Complete Schedule T.	
	EXI ENDITORE	Expense			Gas	TX, officeholder living expense	
				Î	Ous		
_	Complete ONLY if direct	 Candidate/∩	fficeholder name	Office sough	<del></del>	Office held	
	expenditure to benefit C/O		modificaci ricario	Coo oo ag	-		
-	Date	Douga nam	^				
	12/11/2015	Payee nam Fast Forw					
H	Amount (\$)	Payee add		ate; Zip Code			
	\$33.01	2000 FM		atc, 210 0000			
	Ψ00.01	2000 1 111					
		Willis, TX	77318				
┡	PURPOSE				) Description		
1	OF	5	See Categories listed at the top of this ation Equipment & Relate			outside of Texas. Complete Schedule T.	
	EXPENDITURE	Expense	ation Equipment & Relate	ď	Check if Austin,	TX, officeholder living expense	
					Gas		
	Complete ONLY if direct		fficeholder name	Office sough	t	Office held	
	expenditure to benefit C/O						
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#### SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Legal Services	Office Overhea Polling Expens Printing Expens Salaries/Wages	ise :s/Contract Labor	TI TI T	olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District of HER (enter a category not listed above)	
			The Instruction Guide explains	s how to compl	ete this form.	1		
1	Total pages Schedule F1:				!	3 F	iler ID	
l _	Sch: 12/37 Rpt: 49/74	Henderson	ı, Rand					
4	Date	5 Payee name	<del></del>		<del>_</del>			
	12/02/2015	GenuWine						
6	Amount (\$) \$432.00	7 Payee addre 6503 FM 1 Magnolia,	488 Ste 401	e; Zip Code				
8	PURPOSE	(a) Category (	See Categories listed at the top of this so	thedule) (b)	Description			
	OF EXPENDITURE	Event Expe		a returney	Check if travel		of Texas. Complete Schedule T. ficeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/O	re to benefit C/OH						
	Date	Payee name						
	10/12/2015	Go Daddy						
┞	Amount (\$)	Payee address; City; State; Zip Code						
	\$63.68		14455 N Hayden Rd ste 226 Scottsdale, AZ 85260					
$\vdash$	PURPOSE	(a) Category (	See Categories listed at the top of this so	chedule) (b)	Description			
	OF EXPENDITURE	Fees			Check if travel		of Texas. Complete Schedule T. ficeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Office sought			Office held	
	Date	Payee name	9					
	10/12/2015	Go Daddy					<u></u>	
	Amount (\$) \$64.82	Payee addre 14455 N H	ess; City; State layden Rd ste 226	e; Zip Code				
		Scottsdale	, AZ 85260					
	PURPOSE OF EXPENDITURE	(a) Category (	See Categories listed at the top of this so	chedule) (b)			of Texas. Complete Schedule T.	
	Complete ONLY if direct expenditure to benefit C/Ol		fficeholder name	Office sought	:		Office held	

#### SCHEDULE F1

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Advertising Expense Accounting/Banking Fees Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Travel in District Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Travel Out of District Legal Services 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: 13/37 Rpt: 50/74 Henderson, Rand 4 Date 5 Payee name 09/23/2015 Guion, Jerry State; Zip Code Payee address; City; 6 Amount (\$) \$1,600.00 25121 Hayden Rd Slendora, TX 77372 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **EMC Cookoff** Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/02/2015 Hall, Damon State; Zip Code Amount (\$) Payee address; City; \$1,607.80 2323 N Frazier Conroe, TX 77303 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Event Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies Office sought Office held Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/17/2015 Honey B Ham State; Zip Code City; Amount (\$) Payee address; 1418 N loop 336 W Ste 1 \$100.00 Conroe, TX 77304 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Rep Club Lunch 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/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Dimmittee Legal Services The Instruction Guide explains	Loan Repayment/Reimbursement Office Overhead/Rental Expense Politing Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L			s now to complete uns torm.	3 Filer ID
1	Total pages Schedule F1: Sch: 14/37 Rpt: 51/74	Henderson, Rand		3 FIGURE
4	Date	Payee name		
Ī	11/16/2015	Kiwanis Club of Conroe		
6	Amount (\$) \$50.00	Payee address; City; State 1712 N Frazier Ste 112  Conroe, TX 77301	e; Zìp Code	
8	PURPOSE OF EXPENDITURE	Category (see Categories listed at the top of this so Advertising Expense	Check if travel	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held
Г	Date	Payee name		
	12/12/2015	Kroger		
	Amount (\$) \$26.15	12605 I-45 N	e; Zip Code	
L	·	Willis, TX 77318		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so     Transportation Equipment & Related     Expense	Check if travel	outside of Texas. Complete Schedule T.  n, TX, officeholder living expense ristmas Party Candy
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held
	Date 10/07/2015	Payee name Kroger		
	Amount (\$) \$27.83	Payee address; City; Stat 12605 I-45 N Willis, TX 77318	e; Zip Code	
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s     Transportation Equipment & Related     Expense	Check if travel	l autside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explair		xpens Vages	e 'Contract Labor		Travel or to f District OTHER (enter a category not listed above)
┰	Total pages Schedule F1:	2 FILER NAM			•	<u> </u>	3	Filer ID
_	Sch: 15/37 Rpt: 52/74	Henderso						
4	Date	5 Payee nam	e					
	10/10/2015	Kroger						
6	Amount (\$)	7 Payee addr	ess; City; Sta	te; Zip Co	ode			
	\$29.61	12605 I-45	5 N					
	,====							
		Willis, TX	77318					
8	PURPOSE	(a) Category	See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE		ation Equipment & Related			<u> </u>		de of Texas. Complete Schedule T,
	EXPERIENCE	Expense				_	1, IX,	officeholder living expense
						Gas		
	- <u></u> .	<u></u>						
9	Complete ONLY if direct expenditure to benefit C/Ol		fficeholder name	Office sou	ıght			Office held
F	Date	Payee nam	e					
	12/08/2015	Kroger						
H		Payee addi	ress; City; Sta	ite; Zip Co	nde			
	Amount (\$) \$30.06	12605 I-4	,	ше, др о	Juc			
l	Φ30.00	12003 1-4:	או כ					
		Willis, TX	77318					
	PURPOSE		<del></del> -		(p)	Description		
	OF		(See Categories listed at the top of this ation Equipment & Related		(,		outsid	de of Texas. Complete Schedule T.
	EXPENDITURE	Expense	anon Equipment & Neiwee	•		Check if Austir	n, TX,	officeholder living expense
		' '				Gas		
H	Complete ONLY if direct	Candidate/O	fficeholder name	Office sou	ıght			Office held
	expenditure to benefit C/O	Н						
⊨	Date	Dayles nor		<del>-;</del>				
	10/27/2015	Payee nam	le .					
L		Kroger						· · · · · · · · · · · · · · · · · · ·
	Amount (\$)	Payee add		ite; Zip Co	ode			
	\$32.42	12605 I-4	5 N					
		Willis, TX	77318					
H	PURPOSE	(a) Category	(See Categories listed at the top of this	schedule)	(b)	Description		
1	OF		ation Equipment & Related			Check if travel		de of Texas. Complete Schedule T.
	EXPENDITURE	Expense				Check if Austi	n, TX.	officeholder living expense
1						Gas		
1								<u> </u>
厂	Complete ONLY if direct	Candidate/C	ifficeholder name	Office so	ught			Office held
1	expenditure to benefit C/O	Н						
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### SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel in District 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:	2 FILER NAME 3 Filer ID
-	Sch: 16/37 Rpt: 53/74	Henderson, Rand
4	Date	5 Payee name
	11/14/2015	Kroger
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$33.07	12605 I-45 N Willis, TX 77318
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gas
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
ĺ	09/15/2015	Kroger
	Amount (\$) \$38.35	Payee address; City; State; Zip Code  12605 I-45 N  Willis, TX 77318
-	PURPOSE	
	OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Transportation Equipment & Related  Expense  (b) 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/O	Candidate/Officeholder name Office sought Office held
	Date 07/09/2015	Payee name LCARW PAC
	Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Box 737  Montgomery, TX 77356
	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  Sponsorship
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Loan Repayment/Reimbursement Advertising Expense Accounting/Banking Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Travel in District Travel Out of District Polling Expense Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee 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. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 17/37 Rpt: 54/74 Henderson, Rand 4 Date Payee name 10/13/2015 La Trattoria Tuscano State; Zip Code Payee address; City; 6 Amount (\$) 4223 Research Forest Dr Ste 950 \$32.57 Spring, TX 77373 (b) Description **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 09/30/2015 MADD Amount (\$) Payee address; City; State; Zip Code \$25.00 511 E John Carpenter FWY Ste 700 Irving, TX 75062 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraiser Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 09/30/2015 MADD State; Zip Code Amount (\$) Payee address; City; 511 E John Carpenter FWY Ste 700 \$25.00 Irving, TX 75062 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense OF Fees **EXPENDITURE** Fundraiser Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

## SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expl Legal Services The Instruction Guide	Office Ov Polling Ex ense Printing E SalariesA	pense /ages/Contra	l Expense ct Labor	Solicitation/Fundraising Expens Transportation Equipment & Re Travel in District Travel Out of District OTHER (enter a category not lis	lated Expense
Ļ	T.4.1	0 FUED		explains now to co	prote tills		B Filer ID	
1	Total pages Schedule F1: Sch: 18/37 Rpt: 55/74		NAME erson, Rand			`	o Fileriu	
4	Date	5 Payee				I.		•
	07/03/2015	MTOT						
6	Amount (\$) \$24.95		address; City; rthur Godfrey Road Beach, FL 33140	State; Zip Co	de			
8	PURPOSE OF EXPENDITURE	(a) Catego Fees	OTY (See Categories listed at the to	op of this schedule)		heck if travel ou	utside of Texas. Complete Schedule TX, officeholder living expense	т.
9	Complete ONLY if direct expenditure to benefit C/Oh		te/Officeholder name	Office sou	ght		Office held	
Г	Date	Payee	name					<del>-</del>
	08/03/2015	MTOT	<u>.                                    </u>					<u>.                                    </u>
	Amount (\$) \$24.95	_	address; City; rthur Godfrey Road	State; Zip Co	de			
		Miami	Beach, FL 33140	<u> </u>				
	PURPOSE OF EXPENDITURE	(a) Catego Fees	Ory (See Categories listed at the to	op of this schedule)	H۵	heck if travel o	utside of Texas. Complete Schedule TX, officeholder living expense	т.
	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	Office sou	ght		Office held	
	Date 10/02/2015	Payee MTO1						
	Amount (\$) \$29.90	524 A	address; City; rthur Godfrey Road Beach, FL 33140	State; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a) Catego Fees	DTY (See Categories listed at the to	op of this schedule)	□°	heck if travel or	utside of Texas. Complete Schedule	ът.
	Complete ONLY if direct expenditure to benefit C/OI		ate/Officeholder name	Office sou	ght		Office held	

### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		kpens Vages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAMI	E			;	3	Filer ID
	Sch: 19/37 Rpt: 56/74		Henderson	, Rand					
<u></u>	Date	5	Payee name						
_	12/02/2015	ľ	MTOT	,					
		L			7: 0:			_	
6	Amount (\$)	7	•	•	e; Zip Co	ae			
	\$29.90		524 Arthur	Godfrey Road					
			Miami Bea	ch, FL 33 <b>1</b> 40					
8	PURPOSE	(a)	Category (S	See Categories listed at the top of this so	hedule)	(b)	Description		•
	OF	ŀ	Fees	· ·			<u> </u>		e of Texas. Complete Schedule T.
	EXPENDITURE						ш.	TX, c	officeholder living expense
		ŀ					Bank Card		
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Off	ficeholder name	Office sou	ght			Office held
	Date	Г	Payee name	·					
	09/02/2015		MTOT						
_	Amenum (#)	┝	Payee addre	ess; City; State	e; Zip Co	ıde			
	Amount (\$)		-	•	-, <b>Ζ</b> ιμ	uc			
	\$30.53		524 Arthur	Godfrey Road					
			Miami Bea	ch, FL 33140					
	PURPOSE	(a	) Category (s	See Categories listed at the top of this sc	hedule)	(b)	Description	_	
	OF	ļ`	Fees	see outages has instead at the top of the ov	,			utsid	e of Texas, Complete Schedule T.
	EXPENDITURE		. 000					TX, e	officeholder living expense
ł							Bank Card		
l									
	Complete ONLY if direct	_	Candidate/Of	ficeholder name	Office sou	ght			Office held
	expenditure to benefit C/O					•			
┝		_					<u> </u>		
	Date		Payee name	2					
	11/02/2015		MTOT						
	Amount (\$)		Payee addre	ess; City; State	e; Zip Co	de			
	\$164.89		524 Arthur	Godfrey Road					
				•					
	·		Mii D	-L EL 20140					
			іміаті веа	ch, FL 33140					
	PURPOSE	(a	) Category (	See Categories listed at the top of this so	:hedule)	(b)	Description		
	OF EXPENDITURE		Fees				<u>—</u>		e of Texas. Complete Schedule T.
1	LAI LINDITORIL					ŀ	ш.	TX,	officeholder living expense
							Bank Card		
L					<u> </u>				
	Complete ONLY if direct		Candidate/Of	ficeholder name	Office sou	ight			Office held
	expenditure to benefit C/O	Н							
$\vdash$									
			•						

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Travel in District 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: 20/37 Rpt: 57/74 Henderson, Rand 4 Date Payee name 09/09/2015 Mack, Richard State; Zip Code 6 Amount (\$) Payee address; City; \$25,00 PO Box 567 Higley, AZ 85236 **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. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsor Office held 9 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 07/24/2015 Magnolia Republican Women Payee address; City; State; Zip Code Amount (\$) \$15.00 PO Box 729 Pinehurst, TX 77362 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Membership Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 09/21/2015 Margaritas & Peppers Amount (\$) Payee address; State; Zip Code \$19.76 2259 N Loop 336 W Conroe, TX 77304 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

### SCHEDULE F1

Advertising Expense

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Extense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services		pense	Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Payment		The Instruction Guide ex	plains how to co	nplete	e this form.		
1	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID	
	Sch: 21/37 Rpt: 58/74	Hendersor	ı, Rand					
4	Date	5 Payee name	÷				4	
	07/23/2015	Margaritas	& Peppers					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	de			
	\$130.06	2259 N loo	p 336 W					
					-			
		Conroe, T	K 77304					
8	PURPOSE	(a) Category (	See Categories listed at the top of	this schedule)	(p) [	Description		
1	OF EXPENDITURE	Food/Beve	rage Expense		Ę		side of Texas. Complete Schedule T. K, officeholder living expense	
					L F	I Check if Austrii, 17 Food	d ameninan nama adenge	
1	•							
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/OI							
Г	Date	Payee name	e					
	07/21/2015	Montgome	ry County Fair Associa	ation				
T	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de			
	\$1,300.00	9201 Airpo	ort Rd					
		Conroe, T	X 77303					
T	PURPOSE	(a) Category (	See Categories listed at the top of	this schedule)	(b) [	Description		
	OF EXPENDITURE	Advertisino			[		side of Texas. Complete Schedule T.	
					L	Check If Austin, TO Sponsor	K, officeholder living expense	
					`			
	Complete ONLY if direct	Candidate/Ωt	ficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/O			230 030	J			
H	Date	Payee name	Δ					
	10/17/2015	1	ry County Republican	Party				
┝	Amount (\$)	Payee addr		State; Zip Co	de		<u> </u>	
	\$40.00	310 Metca		2.p 00				
	Ψ-0.00	020 ///000	<del></del>					
1		Conroe, T	x 77305					
$\vdash$	DUDDOSE			1	(b) ·	Description		
	PURPOSE OF	(a) Category ( Fees	See Categories listed at the top of	this schedule)	ן ניי) 	Description  Check if travel out	side of Texas. Complete Schedule T.	
	EXPENDITURE	Fee5					X, officeholder living expense	
					Ī	Membership		
Γ	Complete ONLY if direct		ficeholder name	Office sou	ght		Office held	
	expenditure to benefit C/O	H 						
Г			<u> </u>					
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#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services Office Overhead/Rental Expense 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. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 22/37 Rpt: 59/74 Henderson, Rand 4 Date 5 Payee name Montgomery County Republican Party 11/18/2015 State; Zip Code 6 Amount (\$) Payee address; City; \$1,250.00 310 Metcalf St Conroe, TX 77305 **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 Sponsor Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 09/01/2015 Montgomery County Republican Women Payee address; State; Zip Code Amount (\$) \$30.00 PO Box 1766 Conroe, TX 77305 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense Sponsor Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name Montgomery County Republican Women 12/07/2015 Amount (\$) Payee address; City; State; Zip Code \$30.00 PO Box 1766 Conroe, TX 77305 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsor Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID

	Sch: 23/37 Rpt: 60/74	Henderson, Rand	
4	Date 08/28/2015	5 Payee name Montgomery County Republican Women	
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 1766	
		Conroe, TX 77305	
8	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  Sponsor	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 09/29/2015	Payee name Montgomery County Search and Rescue	
	Amount (\$) \$350.00	Payee address; City; State; Zip Code PO BOX 75	
		Magnolia, TX 77353	
	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  Sponsor	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date 10/15/2015	Payee name New Magnolia Chevron	
		Town Magnosia Crieffon	_
	Amount (\$) \$35.97	Payee address; City; State; Zip Code 10940 FM 1488	
	7 7	Payee address; City; State; Zip Code 10940 FM 1488  Magnolia, TX 77354	_
	7 7	Payee address; City; State; Zip Code 10940 FM 1488	
	\$35.97  PURPOSE  OF	Payee address; City; State; Zip Code 10940 FM 1488  Magnolia, TX 77354  (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 Gas  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 N Candidate/Officeholder/		Fees Food/Beverage Expense Gift/Awards/Memorials Expense ommittee Legai Services	Polling Expens Printing Expens		Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)	з <b>е</b>
Credit Card Payment		The instruction Guide explains h	low to compl	ete this form.		
1 Total pages Schedule	F1: 2	FILER NAME			3 Filer ID	
Sch: 24/37 Rpt: 61	L/74	Henderson, Rand				
4 Date	5	Payee name		•		
11/13/2015		North Shore Republican Women				
6 Amount (\$)	7	Payee address; City; State;	Zip Code			
\$40	0.00	803 N Rivershire Dr				
		Conroe, TX 77304			<u></u>	
8 PURPOSE	(a	a) Category (See Categories listed at the top of this sche	dule) (b)	Description		
OF EXPENDITURE		Fees		<u> </u>	outside of Texas. Complete Schedule T.	
	·			Membership	TX, officeholder living expense	
9 Complete ONLY if dir	ect	Candidate/Officeholder name O	ffice sought	<u>_</u>	Office held	
expenditure to benefit		Surface Officerior Floring				
Date		Payee name				
09/17/2015		Office Depot				
Amount (\$)		Payee address; City; State;	Zip Code			
\$1	1.21	1319 W Davis				
ļ						
		Conroe, TX 77304				
PURPOSE	(6	a) Category (See Categories listed at the top of this sche	edule) (b)	Description		
OF EXPENDITURE		Printing Expense		<u></u>	outside of Texas, Complete Schedule T.	
EXPENDITORE				Check if Austin, Printing	TX, officeholder living expense	
				Filling		
Complete CNI V # di-	rect	Candidate/Officeholder name C	ffice sought		Office held	
Complete <u>QNLY</u> if dir expenditure to benefi		Candidate/Officeroliger flame	oc Jougitt			
Doto	<del>- I</del>	David name	· · ·	······································		
Date 12/02/2015		Payee name Office Depot				
		<u> </u>	Zin Codo		<u></u>	
Amount (\$)	0.83	Payee address; City; State; 32954 FM 2978	Zip Code			
210	J.03	92994 FIVI 2910				
		Manualia TV 7705 4				
		Magnolia, TX 77354	1			
PURPOSE OF	[6	Category (See Categories listed at the top of this school Delication Company)	edule) (b)	Description  Check if travel of	outside of Texas. Complete Schedule T.	
EXPENDITURE		Printing Expense		<u>—</u>	TX, officeholder living expense	
				Printing		
Complete ONLY if dir	rect	Candidate/Officeholder name	ffice sought		Office held	
expenditure to benefi	t C/OH					

### SCHEDULE F1

Advertising Expense

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services			pens ages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Great Card Layment			The Instruction Guide	explains l	how to cor	nple	te this form.			
1	Total pages Schedule F1:	2	FILER NAMI	E					3	Filer ID	
	Sch: 25/37 Rpt: 62/74		Henderson	, Rand					1		
4	Date	5	Payee name					<del></del>	_		
ľ	08/03/2015	ľ	-	ce Marketing							
		_					_				
6	Amount (\$)	7	Payee addre	•	State;	Zip Cod	de				
	\$2,047.50		P.O. Box 6	2869							
		İ	Houston, T	X 77205							
8	PURPOSE	(2)	Cotogon			T	(h)	Description			
ľ	OF	ارم	Fees	See Categories listed at the top	of this sch	edule)	(~ <i>)</i>		outsi	ide of Texas. Complete Schedule T.	
	EXPENDITURE		rees					<u> </u>		, officeholder living expense	
								Consulting			
┝	Complete ONLY if direct	Ц	Candidata/Off	ficeholder name		Office soug	rht			Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		Sandidate/On	ilcenoluei name		zince souţ	gi ic			Office field	
	Date		Payee name	;							
	09/22/2015		Performa <b>n</b>	ce Marketing							
Н	Amount (\$)	Г	Payee addre	ess; City;	State;	Zip Co	de				
	\$5,000.00		P.O. Box 6								
	40,000										
			7	Y 7700F							
		L.	Houston, T	X 77205							
	PURPOSE	(a)	Category (s	See Categories listed at the top	of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Advertising	j Expense				<u> </u>		ide of Texas, Complete Schedule T.	
								ш		i, officeholder living expense	
l								Advertising E	-xp	ense	
L	<u></u>										
1	Complete ONLY if direct		Candidate/Of	ficeholder name	C	Office sou	ght			Office held	
	expenditure to benefit C/O	П									
	Date	Ī	Payee name	9							
	07/07/2015		-	ce Marketing							
⊢		┝			Ctata:	; Zip Co	do			-	
l	Amount (\$)		Payee addre		Siaic,	, 21p Co	uc				
l	\$20,000.00		P.O. Box 6	2869							
l			Houston, T	X 77205							
H	PURPOSE	ίa	Category (s	See Categories listed at the top	of this sch	edule)	(b)	Description			
l	OF	Ι΄.	Advertising		0. 1		•		outs	ide of Texas. Complete Schedule T.	
	EXPENDITURE		, 101011111	,				Check if Austi	n, TX	t, officeholder living expense	
								Campaign A	dve	ertising	
$\vdash$	Complete ONLY if direct	_	Candidate/Of	ficeholder name		Office sou	ght			Office held	
	expenditure to benefit C/O		_ 14 14 14 14 16 16 16 16 16 16 16 16 16 16 16 16 16	- Contract - Marine			J				
$\vdash$						• "					

### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees Food/Beverage B

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services  The Instruction Guid	opense Pri Sa	-	se s/Contract Labor	Travel Out of District OTHER (enter a category not listed about	ove)
1	Total pages Schedule F1:	2 FILER NA	ME				3 Filer ID	
	Sch: 26/37 Rpt: 63/74		on, Rand					
4	Date	5 Payee na	me					
	10/27/2015	Ross, Vi	nce					
6	Amount (\$)	7 Payee ad	dress; City;	State; Z	ip Code			
	\$250.00	210 Spri	ngs Edge Dr					
		Montgon	nery, TX 77356					
8	PURPOSE	(a) Category	(See Categories listed at the	top of this schedule	(b)	Description		
	OF EXPENDITURE	Event Ex					outside of Texas, Complete Schedule T.	
	EXPENDITURE	•				ш	n, TX, officeholder living expense	
						Auctioneer		
9	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	Offic	ce sought		Office held	
	Date	Payee na	me	<del></del>				
	09/02/2015	Rotary C	lub of Magnolia					
	Amount (\$)	Payee ad	dress; City;	State; Z	ip Code			
	\$100.00	PO BOX	-					
	Ψ100.00	1000	1100					
		Magnolia	a, TX 77353					
	PURPOSE	(a) Category	(See Categories listed at the	top of this schedul	(b)	Description		
	OF EXPENDITURE	Fees				ليا	outside of Texas. Complete Schedule T.  n, TX, officeholder living expense	
						Sponsor	n, 1X, officeriolider living expense	
						Оронаот		
		0	or tall	O#-	se gaught		Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Officeholder name	Ollic	ce sought		Office field	
	Date	Payee na	me					
	12/23/2015	Saltgras	s Steak House					
	Amount (\$)	Payee ad	dress; City;	State; Z	zip Code			, i
	\$36.62	810 l-45	N					
		Conroe,	TX 77301					
$\vdash$	PURPOSE	(a) Category	(See Categories listed at the	ton of this schedul	le) (b	Description		
	OF		verage Expense	top of and seneda	,		l outside of Texas. Complete Schedule $\top$ .	
	EXPENDITURE					Check if Austi	n, TX, officeholder living expense	
						Food		
	Complete ONLY if direct		Officeholder name	Offic	ce sough		Office held	
	expenditure to benefit C/OI	H						
	·							
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#### SCHEDULE F1

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

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - d Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Exper Printing Exper Salaries/Wag	ense ges/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explain	ns how to com	plete this form.		
1	Total pages Schedule F1:	2 FILER NAM	ΙΕ			3	Filer ID
	Sch: 27/37 Rpt: 64/74	Hendersor	n, Rand				
4	Date	5 Payee nam	e	••			
	08/05/2015	Saltgrass	Steak House				
6	Amount (\$)	7 Payee addr	ess; City; Sta	te; Zip Code	9		
	\$95.12	810 I-45 N	· •				
		1					
		Conroe, T	X 77301				
_	DUDDOOF		·	a	2) Decerintian		
8	PURPOSE OF		See Categories listed at the top of this s	schedule)	<ul> <li>Description</li> <li>Check if travel</li> </ul>	outsio	de of Texas. Complete Schedule T.
	EXPENDITURE	F000/Beve	erage Expense		<u></u>		officeholder living expense
				•	Food		
9	Complete ONLY if direct	Candidate/O	fficeholder name	Office sough	ıt		Office held
	expenditure to benefit C/O	Н					
⊨	Date	Payee nam					
	12/03/2015	Shell	•				•
_		Payee addr	ess; City; Sta	te; Zip Code			_ <del></del>
	Amount (\$) \$32.04	4201 N Fr		ite, zip cou	•		
	φ32.04	42011111	aziçi				
			v 77000				
		Conroe, T	X 77303	· · · · · · · · · · · · · · · · · · ·			
	PURPOSE OF	L ·	See Categories listed at the top of this		Description     Check if travel	Loutei	de of Texas. Complete Schedule T.
	EXPENDITURE		ation Equipment & Related		<u> </u>		officeholder living expense
		Expense			Gas		Ç ,
				1			
-	Complete ONLY if direct	I	fficeholder name	Office sough	nt		Office held
	expenditure to benefit C/O			·			
-	Date	Dayso nam					
l	11/19/2015	Payee nam Shell	e				
_		Payee add	coor City Sto	ite; Zip Code			
	Amount (\$)	1 1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ite, zip Cou	<b>e</b>		
	\$32.36	200 S Loo	h 330 AA				
		_					
L		Conroe, T	X 77304 				
Γ	PURPOSE	(a) Category	(See Categories listed at the top of this	schedule) (I	b) Description		
l	OF EXPENDITURE		ation Equipment & Related	!	<u> </u>		de of Texas. Complete Schedule T. officeholder living expense
l		Expense			Gas	11, 17,	Differ folder fiving expense
$\vdash$	Complete ONLY if direct	Condidate/O	fficeholder name	Office sougl			Office held
l	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Onice Sougi	r.		GIROG HEIG
dash	-				·		

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Food/Beverage E Gift/Awards/Mem- Legal Services The Instruction			ense ges/Contract La		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAM		•	<del>.</del>		3	Filer ID	
_	Sch: 28/37 Rpt: 65/74		Henderson					- 1		
_					_					
4	Date 08/26/2015		Payee name Shell							
6	Amount (\$)	ŀ	Payee addre	•	State;	Zip Cod	е			
	\$43.14		12930 FM	830						
			Willis, TX 7	7318			<u>-</u>			
8	PURPOSE	(a)	Category (s	ee Categories liste	d at the top of this sch	edule) (	b) Descript	tion		
	OF EXPENDITURE			tion Equipme	ent & Related				de of Texas. Complete Schedule T.	
	EM EMPIONE		Expense				Gas Gas	t f Austin, TX	officeholder living expense	
ĺ							Gas			
		L.,							04 1-14	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Off	iceholder nam	e C	Office soug	nt		Office held	
	Date		Payee name						·	
	08/13/2015		Shell							
	Amount (\$)		Payee addre	ess; City;	State;	; Zip Cod	е			
	\$44.25		403 N Fraz	ier						
l										
		ŀ	Conroe, TX	( 77301						
H	PURPOSE	(a)	Category (6	· · · · Cotogorios lista	d at the top of this sch	odule) (	b) Descript	tion		
	OF	1			ent & Related	leddie)			ide of Texas. Complete Schedule T.	
	EXPENDITURE		Expense				Check	t if Austin, TX	, officeholder living expense	
						l	Gas			
	Complete ONLY if direct	_	andidate/Off	iceholder nam	e C	Office soug	ht		Office held	
	expenditure to benefit C/OI									
	Date		Payee name	)						
	08/14/2015		Shell							
	Amount (\$)	-	Payee addre	ess; City;	State:	; Zip Cod	e			
	\$48.93	l	200 S Loop							
			•							
			Conroe, TX	( 77304						
L				<del></del>		<del></del>	L)			
	PURPOSE OF				ed at the top of this sch	iedule)	<ul><li>b) Descript</li><li>Check</li></ul>		ide of Texas. Complete Schedule T.	
	EXPENDITURE		Expense	tion Equipme	ent & Related				, officeholder living expense	
			Expense			l	Gas			
						1				
H	Complete ONLY if direct		andidate/Of	ficeholder nam	ie (	Office soug	ht		Office held	
1	expenditure to benefit C/O									
-			<u> </u>		····			•		

### SCHEDULE F1

Advertising Expense

Event Expense

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

Loan Repayment/Reimbursement

Accounting Hearising Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages			e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
			The Instruction Guide explain	ns how to con	nple	te this form.	1.		
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	
	Sch: 29/37 Rpt: 66/74	Hendersor	ı, Rand						
4	Date	5 Payee name	9						
	12/31/2015	Shell							
_	Amount (\$)	7 Payee addr	ess; City; Sta	ite; Zip Coo	ie.				
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	φ <b>25,4</b> 0	42.01 N F16	121 <del>C</del> I						
		Conroe, T	X 77303						
8	PURPOSE	(a) Category (	See Categories listed at the top of this :	schedule)	(b)	Description			
	OF EXPENDITURE	Transporta	ition Equipment & Related	!				ide of Texas. Complete Schedule T.	
	EXPENDITORE	Expense				ш	ı, TX,	, officeholder living expense	
						Gas			
9			ficeholder name	Office soug	jht			Office held	
	expenditure to benefit C/OI	7							
F	Date	Payee name	2			-			
	10/10/2015	Speed Pri							
⊩		Payee addr		ate; Zip Coo	łe				
	Amount (\$)	1105 W Da	,,	ne, zip cou	40				
	\$70.05	TIOS W D	alias Si						
İ		Conroe, T	X 77301						
	PURPOSE	(a) Category	See Categories listed at the top of this	schedule)	(b)	Description			
	OF EXPENDITURE	Printing Ex				<u> </u>		ide of Texas. Complete Schedule T.	
1	EXPENDITORE					ш	, officeholder living expense		
1						Printing			
L			· <u>·</u>					<u> </u>	
	Complete ONLY if direct		fficeholder name	Office sout	ght			Office held	
l	expenditure to benefit C/O	A .							
F	Date	Payee nam	e	· · · · · · · · · · · · · · · · · · ·					
l	09/21/2015	Speedy St							
H		Payee addr	·	ate; Zip Coo	de	100			
l	Amount (\$)	I		ль, др со	ue				
	\$40.23	2500 N Lo	nh 320 AA						
l									
		Conroe, T	X 77304						
Г	PURPOSE	(a) Category	See Categories listed at the top of this	schedule)	(b)	Description			
ı	OF		ation Equipment & Related			<u> </u>		ide of Texas. Complete Schedule T.	
ı	EXPENDITURE	Expense					ı, TX	, officeholder living expense	
						Gas			
					<u></u>				
	Complete ONLY if direct		fficeholder name	Office sou	ght			Office held	
	expenditure to benefit C/O	Н							
$\vdash$									
1									

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) 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 Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/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 h	now to com	plete this form.	Τ.			
1	Total pages Schedule F1:	2					3	Filer ID		
	Sch: 30/37 Rpt: 67/74	L	Henderson,	, Rand			L	<u> </u>		
4	Date	5	Payee name							
	08/26/2015	_	Spring Cree	ek BBQ						
6	Amount (\$)	7	Payee addre	• • • • • • • • • • • • • • • • • • • •	Zip Cod	le				
	\$12.99		19091 1-45	S						
			Shenandoa	ah, TX 77381						
8	PURPOSE	(a)	Category (s	See Categories listed at the top of this sche	edule) (	b) Description			l	
	OF EXPENDITURE		Food/Bever	rage Expense		<b>-</b>		side of Texas. Complete Schedule T. K, officeholder living expense		
						Food		, ,		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ficeholder name O	office soug	ht		Office held		
L	·	_			<del></del> _					
	Date		Payee name							
L	07/28/2015	Spring Creek BBQ								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$25.98		1909 <b>1</b> I-45	5						
		Shenandoah, TX 77381								
	PURPOSE	(a)	Category (s	See Categories listed at the top of this sche	edule) (	(b) Description				
	OF EXPENDITURE			rage Expense	1	<u>—</u>		side of Texas. Complete Schedule T. X, officeholder living expense		
	<b>-/</b>					Food	0, 12	V. Officetionder training experience		
$\vdash$	Complete ONLY if direct		 Candidate/Off	ficeholder name O	Office soug	ht		Office held		
	expenditure to benefit C/O	-1								
H	Date		Рауее пате	<u> </u>						
	09/23/2015		Spring Cree							
┝	Amount (\$)	$\vdash$	Payee addre	<del></del>	Zip Cod	le				
	\$26.63		19091 I-45							
			Shenandoa	ah, TX 77381						
r	PURPOSE	(a)	Category (S	See Categories listed at the top of this sche	edule)	(b) Description				
	OF EXPENDITURE		Food/Bever	rage Expense		<u> </u>		side of Texas. Complete Schedule T. X, officeholder living expense		
	<del>_</del> :					Food	11, 17	A, Uniteriorate living expense		
$\vdash$	Complete ONLY if direct		 Candidate/Off	ficeholder name C	Office soug	ıht		Office held		
	expenditure to benefit C/O				-	···				
$\vdash$		_					_			

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gitt/Awards/Memorials Expense Printing Expense Printing Expense Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.			e /Contract Labor				
1	Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID		
L	Sch: 31/37 Rpt: 68/74	Hendersor	, Rand						
4	Date	5 Payee name							
	07/10/2015	Stark, Jess	sica						
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip	Code				
	\$530.00	1911 Page	mill Lane						
		Conroe, T	K 77304						
8	PURPOSE	(a) Category	See Categories listed at the top	n of this schedule)	(b)	Description			
	OF		ages/Contract Labor				outside of Texas. Complete Schedule T.		
	EXPENDITURE						n, TX, officeholder living expense		
						Accounting			
						. <u>.</u>	06	<u> </u>	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office	sought		Office held		
F	Date	Payee nam	9	· · ·					
	08/05/2015	Taco Caba	ana						
H	Amount (\$)	Payee addr	ess; City;	State; Zip	Code				
	\$31.48	202 S loop	336						
İ									
		Conroe, T	X 77304						
H	PURPOSE	(a) Category	See Categories listed at the to	o of this schedule)	(b)	Description			
١	OF EXPENDITURE		erage Expense	•			outside of Texas. Complete Schedule T.		
	EXPENDITURE					<b>—</b>	n, TX, officeholder living expense		
						Food			
L			·	055			Office held	<u> </u>	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office	sought		Office field		
L		<del> </del>							
	Date	Payee nam							
	08/04/2015	Texas GO	P Store						
	Amount (\$)	Payee addr	ess; City;	State; Zîp	Code				
	\$135.00	404 I-45 S				•			
		Huntsville,	TX 77340						
$\vdash$	PURPOSE	(a) Category	See Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE		g Expense	, ,		<u> </u>	outside of Texas. Complete Schedule T.		
	EXPENDITURE					<u> </u>	n, TX, officeholder living expense		
						Signs			
L	<u></u>				l			-	
1	Complete ONLY if direct		fficeholder name	Office	sought		Office held		
	expenditure to benefit C/O								
Г									

#### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Poliing Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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: 32/37 Rpt: 69/74 Henderson, Rand 4 Date Payee name Texas GOP Store 10/06/2015 7 Payee address; State; Zip Code City; 6 Amount (\$) \$648.00 404 I-45 S Huntsville, TX 77340 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. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Signs Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/25/2015 Texas GOP Store Amount (\$) Payee address; City; State; Zip Code \$2,740.50 404 I-45 S Huntsville, TX 77340 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/10/2015 Texas GOP Store Amount (\$) Payee address; City; State; Zip Code 404 I-45 S \$9,544.36 Huntsville, TX 77340 (b) Description **PURPOSE** (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 Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	-   Committee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	pense	Polling Exper Printing Exper Salaries/Wag			Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Payment		The Instruction Guid	le explains h	ow to com	olete this form.			
1	Total pages Schedule F1:	2 FILER NAM	1E		_		3	Filer ID	
	Sch: 33/37 Rpt: 70/74	Henderso	n, Rand						
4	Date	5 Payee nam	e						
	08/07/2015	The Gun F	Room						
6	Amount (\$)	7 Payee addi	ess; City;	State;	Zip Code	?			
	\$3,112.19	70 N Cres	cendo Path Pl						
		Shenando	ah, TX 77381						
8	PURPOSE OF	(a) Category	See Categories listed at the	top of this sche	edule) (k	Description		** Attack Cabadula T	
	EXPENDITURE	Event Exp	ense			<u></u>		ide of Texas, Complete Schedule T. , officeholder living expense	
						Guns	,	, <del>-</del>	
9	Complete ONLY if direct	Candidate/O	fficeholder name	0	office sough	ıt .		Office held	
	expenditure to benefit C/OI								
	Date	Payee nam	e						
	10/12/2015	The Gun I	Room					<u> </u>	
	Amount (\$)	Payee add	ess; City;	State;	Zip Code	÷			
	\$1,959.28	70 N Cres	cendo Path Pl						
		Shenando	ah, TX 77381					<u></u>	
	PURPOSE	(a) Category	(See Categories listed at the	top of this sche	edule) (I	Description			
	OF EXPENDITURE	Event Exp				<u></u>		side of Texas. Complete Schedule T. K, officeholder living expense	
						Guns	ouri, I.A	r' omemore mand exhause	
						Ç			
$\vdash$	Complete ONLY if direct	Candidate/C	fficeholder name	0	Office sough	nt		Office held	
	expenditure to benefit C/O	Н			J				
Ħ	Date	Payee nam	ie						
	09/05/2015	USPS							
-	Amount (\$)	Payee add	ress; City;	State;	Zip Code	9			
	\$38.00	809 W Da	llas St						
		Conroe, T	X 77301						
	PURPOSE	(a) Category	(See Categories listed at the	top of this sche	edule) (I	Description			
	OF EXPENDITURE	1	g Expense					side of Texas. Complete Schedule T.	
	LA EMPIONE				1	Check if Aus Postage	an, TX	K, officeholder living expense	
						i osiaye			
_	Complete ONLY if direct	Candidate/C	fficeholder name		Office sough			Office held	
	expenditure to benefit C/Ol		modificact flattic		Zinac Bougi	16		gyaaa	
<u> </u>		• • •							
1									

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense

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

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	mittee Legal Services	Gift/Awards/Memorials Expense Printing Expense Traw Legal Services Salaries/Wages/Contract Labor OTH  The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	FILER NAME		3 Filer ID			
	Sch: 34/37 Rpt: 71/74	Henderson, Rand					
4	Date 07/01/2015	Payee name Walmart 					
6	Amount (\$) \$225.80	Payee address; City; 1407 N loop 336 W Conroe, TX 77304	State; Zip Code				
8	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Event Expense	of this schedule) (b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Parade Candy			
9	Complete ONLY if direct expenditure to benefit C/O	andidate/Officeholder name	Office sought	Office held			
	Date	Payee name					
	09/01/2015	Wild Ginger					
	Amount (\$) \$30.87	Payee address; City; 3061 I-45 N Ste 100 Conroe, TX 77304	State; Zip Code				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Food/Beverage Expense	of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food			
	Complete ONLY if direct expenditure to benefit C/Ol	andidate/Officeholder name	Office sought	Office held			
	Date 07/09/2015	Payee name Willis Wildcats					
	Amount (\$) \$250.00	Payee address; City; 1201 Farm-To-Market Road 83 Willis, TX 77378	State; Zip Code				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top Fees	of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsor			
	Complete ONLY if direct expenditure to benefit C/Ol	andidate/Officeholder name	Office sought	Office held			
				Varior V4 0 2422			

### SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Coffice Overhead/Reimbursement Office Overhead/Rental Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
			The Instruction Guide explains	how to comple	ete this form.	·—			
1	Total pages Schedule F1:	2 FILER NAM	E			3	Filer ID		
	Sch: 35/37 Rpt: 72/74	Henderson	ı, Rand			L			
4	Date	5 Payee name	9						
	09/20/2015	Woodfores	st						
6	Amount (\$) \$3.00	7 Payee addre 400 W Dav		; Zip Code					
		Conroe, TX	K 77301						
8	PURPOSE OF EXPENDITURE	Fees   <u> </u>					ide of Texas. Complete Schedule T. , officeholder living expense nt Fee		
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name C	Office sought			Office held		
	Date	Payee name	<del></del>						
	10/20/2015	Woodfores	st .						
	Amount (\$) \$3.00	Payee addre 400 W Dav Conroe, TX	vis	; Zip Code					
	PURPOSE OF EXPENDITURE	(a) Category (s	See Categories listed at the top of this sch	ledule) (b)	<u></u>	ı, TX,	de of Texas, Complete Schedule T. officeholder living expense I Fee		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name C	Office sought			Office held		
	Date	Payee name	e						
	08/30/2015	Woodfores	st .						
	Amount (\$) \$500.00	Payee addre 400 W Dav	vis	; Zip Code					
		Conroe, T	X 77301		<del></del>				
	PURPOSE OF EXPENDITURE	(a) Category (s	See Categories listed at the top of this sch	(b)			de of Texas. Complete Schedule ⊤. officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name C	Office sought			Office held		

### 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: 36/37 Rpt: 73/74	Henderson, Rand
4 Date	5 Payee name
08/31/2015	Woodforest Golf Club
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$69.28	1199 Fish Creek Thoroughfare
	Montgomery, TX 77316
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel cutside of Texas, Complete Schedule T.  Check if Austin, TX, officeholder living expense  Food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/02/2015	Woodforest Golf Club
Amount (\$)	Payee address; City; State; Zip Code
\$86.45	1199 Fish Creek Thoroughfare
	Montgomery, TX 77316
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Food/Beverage Expense  Check if Austin, TX, officeholder living expense  Food
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 10/30/2015	Payee name Woodforest Golf Club
Amount (\$) \$10,755.36	Payee address; City; State; Zip Code 1199 Fish Creek Thoroughfare
	Montgomery, TX 77316
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Tournament
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	this Commission was other state ty us

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			mmittee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Ti	Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAMI			-	3 F	iler ID
_	Sch: 37/37 Rpt: 74/74	_	Henderson					
4	Date	5	Payee name	;	<u> </u>			
	09/09/2015		Woodlands	Republican Women				
6	Amount (\$)	7	Payee addre	ess; City; State	; Zip Code			
	\$46.00		314 Pruitt F	Road				
				ands, TX 77380	I	·		
8	PURPOSE OF	(a)	Category (S	See Categories listed at the top of this sch	redule) (b)	Description		of Town Computers Cohodula T
	EXPENDITURE		Fees			_		of Texas, Complete Schedule T. iceholder living expense
						Sponsor	.,,	· · · · · · · · · · · · · · · · · · ·
						•		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	Office sought			Office held
•								