

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

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

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 37	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Billy	MI	
	NICKNAME	LAST Graff	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2405 Winter Trail Dr. Conroe, TX 77304		ZIP CODE	
	5 CAMPAIGN TREASURER NAME		Date Received Date Hand-delivered or Date Postmarked ma WI Receipt # 3703 Amount Date Processed Date Imaged	
	<input checked="" type="checkbox"/> MS / MRS / MR	FIRST Anna	MI M.	
	NICKNAME	LAST O'bannion	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 240 Morris		APT / SUITE #;	CITY; STATE; ZIP CODE Lumberton Tx 77657
7 CAMPAIGN TREASURER PHONE	AREA CODE 409	PHONE NUMBER 466-4662	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2019	THROUGH	Month Day Year 12/31/2019	
10 ELECTION	ELECTION DATE Month Day Year 03/03/2020		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) None		12 OFFICE SOUGHT (if known) Montgomery County Commissioner District Precinct-1	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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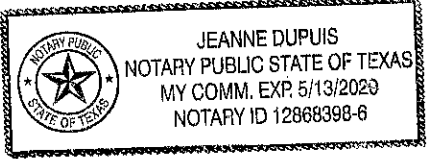
13 C / OH NAME Graff, Billy	14 Filer ID
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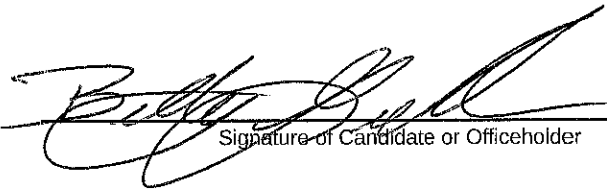
<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>
	<b>COMMITTEE ADDRESS</b>	
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,050.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,057.73
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 7,290.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

**17 AFFADAVIT**

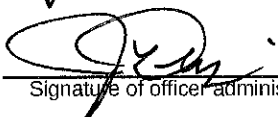
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Billy Graff, this the 15 day of January, 2020, to certify which, witness my hand and seal of office.

  
 Signature of officer administering

J. Dupuis  
 Printed name of officer administering

N/A  
 Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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**18 FILER NAME**

Graff, Billy

**19 Filer ID****20 SCHEDULE SUBTOTALS**

SUBTOTAL AMOUNT

NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 14,050.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,000.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 17,038.59
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,019.14
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 90.14

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/8 Rpt: 4/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 08/05/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Myla  <b>6</b> Contributor address; City; State; Zip Code 112 Moonspinner  Montgomery, TX 77356	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 07/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Geraldine (Mrs.)  Contributor address; City; State; Zip Code PO Box 882  Lumberton, TX 77657	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Gerry (Mr.)  Contributor address; City; State; Zip Code PO Box 882  Lumberton, TX 77657	Amount of Contribution (\$)  \$1,250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/18/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Gerry (Mr.)  Contributor address; City; State; Zip Code PO Box 882  Lumberton, TX 77657	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 09/14/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boaz, Angie (Mrs.)  Contributor address; City; State; Zip Code 7416 Circle8  Orange, TX 77632	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Kings Club

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/37
2 FILER NAME Graff, Billy		3 Filer ID
4 Date 08/16/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Callahan, Phyllis (Mrs.)	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code 1823 Sara St  Sulphur, LA 70663		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 07/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Marvin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 110 Canterbury  Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 11/25/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Marisa (Mrs.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 8960 County Line Rd  Willis, TX 77378-4842		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/08/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coats, Robert (Mr.)	Amount of Contribution (\$) \$400.00
Contributor address; City; State; Zip Code 152 Golfview  Montgomery, TX 77356		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 08/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Gary (Mr.)	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 1780 Riksan Cr  Beaumont, TX 77706		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/8 Rpt: 6/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 10/01/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ener, Donald (Mr.)	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>6</b> Contributor address; City; State; Zip Code PO Box  Sour Lake, TX 77659		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
<b>Date</b> 08/05/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ener, Margaret (Ms.)	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Contributor address; City; State; Zip Code</b> 219 N loop 336 E Apt 23102 Conroe, TX 77304		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 12/06/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ener, Margaret (Ms.)	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Contributor address; City; State; Zip Code</b> 219 N loop 336 E Apt 23102 Conroe, TX 77304		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 08/28/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Fehnel, Judy (Mr.)	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Contributor address; City; State; Zip Code</b> 5765 Kathy Lane  Beaumont, TX 77713		
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 07/15/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Mark (Mr.)	<b>Amount of Contribution (\$)</b>  \$40.00
<b>Contributor address; City; State; Zip Code</b> 1308 S 7th st.  Conroe, TX 77304		
<b>Principal occupation / Job title (See Instructions)</b> Bookkeeper		<b>Employer (See Instructions)</b> Owner

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/8 Rpt: 7/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 07/15/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank, Mark (Mr.)	<b>7</b> Amount of Contribution (\$) \$40.00
<b>6</b> Contributor address; City; State; Zip Code 1308 S 7th st.  Conroe, TX 77304		
<b>8</b> Principal occupation / Job title (See Instructions) Bookkeeper		<b>9</b> Employer (See Instructions) Owner
Date 08/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goetschius, Diane (Mrs.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 880 Norwood  Beaumont, TX 77706		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) BISD
Date 07/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Jacob (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 120 Quail Run St  Nacogdoches, TX 75965		
Principal occupation / Job title (See Instructions) Data Analyst		Employer (See Instructions) Self
Date 07/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Jacob (Mrs.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 120 Quail Run St  Nacogdoches, TX 75965		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 07/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Josh (Mr.)	Amount of Contribution (\$) \$3,000.00
Contributor address; City; State; Zip Code 2501 Belton Shores  Conroe, TX 77304		
Principal occupation / Job title (See Instructions) Sales/owner		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/8 Rpt: 8/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 12/26/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Josh (Mr.)	<b>7</b> Amount of Contribution (\$)  \$6,000.00
<b>6</b> Contributor address; City; State; Zip Code 2501 Belton Shores  Conroe, TX 77304		
<b>8</b> Principal occupation / Job title (See Instructions) Sales/owner		<b>9</b> Employer (See Instructions) Self
Date 08/28/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Yulia (Mrs.)	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code 385 Bradford Dr  Beaumont, TX 77707		
Principal occupation / Job title (See Instructions) Hairdresser		Employer (See Instructions) Self
Date 07/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gustason, Teresa (Mrs.)	Amount of Contribution (\$)  \$10.00
Contributor address; City; State; Zip Code PO Box 457  Coalgate, TX 74538		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 08/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havens, Connie (Mrs.)	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 3005 Wedgescale Pass  leander, TX 78641		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions)
Date 08/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jean, Steve (Mr.)	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 12865 Fir Lane  Beaumont, TX 77713		
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) Christ Community Church



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 6/8 Rpt: 9/37

2 FILER NAME  
Graff, Billy

3 Filer ID

4 Date  
07/14/2019

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Kaiser, Adrian

7 Amount of Contribution (\$) \$10.00

6 Contributor address; City; State; Zip Code  
9311 Shady ln  
  
Magnolia, TX 77354

8 Principal occupation / Job title (See Instructions)  
Welder

9 Employer (See Instructions)

Date  
10/07/2019

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
McConathy, Kailey (Mrs.)

Amount of Contribution (\$) \$10.00

Contributor address; City; State; Zip Code  
510 Fisherman Trail  
  
Melissa, TX 77454

Principal occupation / Job title (See Instructions)  
MOM

Employer (See Instructions)  
self

Date  
07/30/2019

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Molnar, Suzette (Mrs.)

Amount of Contribution (\$) \$10.00

Contributor address; City; State; Zip Code  
211 Hannah Lane  
  
Lumberton, TX 77657

Principal occupation / Job title (See Instructions)  
Ministry Assistant

Employer (See Instructions)  
Westgate Memorial Baptist

Date  
07/21/2019

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Moore, Claire (Mrs.)

Amount of Contribution (\$) \$10.00

Contributor address; City; State; Zip Code  
9161 Black Buck lake  
  
Conroe, TX 77303

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)

Date  
07/22/2019

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Moore, William

Amount of Contribution (\$) \$750.00

Contributor address; City; State; Zip Code  
2818 Chaucer dr  
  
Montgomery, TX 77356

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
The Edge Restaurant

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/8 Rpt: 10/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 07/21/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patient, Theresa (Mrs.)	<b>7</b> Amount of Contribution (\$) \$10.00
<b>6</b> Contributor address; City; State; Zip Code 9161 Buck lane  Conroe, TX 77303		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 07/16/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roebuck, MARY (Mrs.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code po box 458  Coalgate, OK 74538		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 07/01/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sadighi, Jeff (Mr.)	Amount of Contribution (\$) \$35.00
Contributor address; City; State; Zip Code 1504 Gary Ave.  Nederland, TX 77627		
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Self
Date 12/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shirley, Charles (Mr.)	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code 3226 West Benders Landing Blve  Spring, TX 77386		
Principal occupation / Job title (See Instructions) Investment Banker		Employer (See Instructions) Self
Date 09/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Streelman, Stanley (Mr.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 12211 Emerald Mist ln  Conroe, TX 77304-1695		
Principal occupation / Job title (See Instructions) Medical Sales		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/8 Rpt: 11/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 08/15/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toman, Sue (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 630 Bancroft  Beaumont, TX 77706	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Tax manager		<b>9</b> Employer (See Instructions)
Date 10/21/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wessel, Wes (Mr.) <hr/> Contributor address; City; State; Zip Code 10941 JoAnn St  Willis, TX 77318	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Self
Date 08/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Sharon (Mrs.) <hr/> Contributor address; City; State; Zip Code 4100 Binley Dr  Richardson, TX 75082	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Infection Preventionist		Employer (See Instructions)

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/2 Rpt: 12/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 11/12/2019	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy, Graff (Dr.)	<b>9</b> Loan Amount (\$) \$4,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 2405 Winter Trail  Conroe, TX 77304	<b>10</b> Interest Rate
		<b>11</b> Maturity Date 12/31/2020
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)
Date of loan 07/15/2019	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy, Graff (Dr.)	Loan Amount (\$) \$500.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 2405 Winter Trail  Conroe, TX 77304	Interest Rate
		Maturity Date 12/31/2020
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

**LOANS****SCHEDULE E**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 2/2 Rpt: 13/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 07/16/2019	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy, Graff (Dr.)	<b>9</b> Loan Amount (\$) \$500.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 2405 Winter Trail  Conroe, TX 77304	<b>10</b> Interest Rate
		<b>11</b> Maturity Date 12/31/2020
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/21 Rpt: 14/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 07/02/2019		<b>5</b> Payee name AT&T			
<b>6</b> Amount (\$) \$33.08		<b>7</b> Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/01/2019		Payee name AT&T			
Amount (\$) \$33.08		Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/03/2019		Payee name AT&T			
Amount (\$) \$33.08		Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/21 Rpt: 15/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 09/30/2019		<b>5</b> Payee name AT&T			
<b>6</b> Amount (\$) \$33.08		<b>7</b> Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/30/2019		Payee name AT&T			
Amount (\$) \$33.08		Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/29/2019		Payee name AT&T			
Amount (\$) \$33.08		Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/21 Rpt: 16/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 12/30/2019	<b>5</b> Payee name AT&T	
<b>6</b> Amount (\$) \$33.08	<b>7</b> Payee address; City; State; Zip Code PO Box 537104  Atlanta, GA 30353	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2019	Candidate/Officeholder name Amegy Bank	
Amount (\$) \$2.00	Office sought Office held	
	Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statement fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/03/2019	Candidate/Officeholder name Amegy Bank	
Amount (\$) \$2.00	Office sought Office held	
	Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statement fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

1 Total pages Schedule F1: Sch; 4/21 Rpt: 17/37		2 FILER NAME Graff, Billy		3 Filer ID	
4 Date 09/30/2019		5 Payee name Amegy Bank			
6 Amount (\$) \$2.00		7 Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statement fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/31/2019		Payee name Amegy Bank			
Amount (\$) \$2.00		Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statement fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/27/2019		Payee name Amegy Bank			
Amount (\$) \$10.00		Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense transaction fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/21 Rpt: 18/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 11/29/2019	<b>5</b> Payee name Amegy Bank	
<b>6</b> Amount (\$) \$2.00	<b>7</b> Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statement fee
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 12/31/2019	Payee name Amegy Bank	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 2125 West Davis St.  Conroe, TX 77304	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Statement fee
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	
Date 07/05/2019	Payee name Barnes, James (Mr.)	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 711 Scarlet Ibis  San Antonio, TX 78245	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dataset for Campaign Sidekick software
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/21 Rpt: 19/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 07/07/2019	<b>5</b> Payee name Campaign Sidekick LLC	
<b>6</b> Amount (\$) \$248.00	<b>7</b> Payee address; City; State; Zip Code 1550 Old Annetta Road  Aledo, TX 76008	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly subscription for block walking software
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/19/2019	Candidate/Officeholder name Campaign Sidekick LLC	
Amount (\$) \$496.00	Office sought Office held	
	Payee address; City; State; Zip Code 1550 Old Annetta Road  Aledo, TX 76008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Block Blocking Software	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Month subscription, (two months)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/01/2019	Candidate/Officeholder name Campaign Sidekick LLC	
Amount (\$) \$248.00	Office sought Office held	
	Payee address; City; State; Zip Code 1550 Old Annetta Road  Aledo, TX 76008	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software monthly subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/21 Rpt: 20/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 12/01/2019		<b>5</b> Payee name Campaign Sidekick LLC			
<b>6</b> Amount (\$) \$248.00		<b>7</b> Payee address; City; State; Zip Code 1550 Old Annetta Road  Aledo, TX 76008			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software monthly subscription	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/04/2019		Payee name Campaign Sidekick LLC			
Amount (\$) \$248.00		Payee address; City; State; Zip Code 1550 Old Annetta Road  Aledo, TX 76008			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/15/2019		Payee name Coats, Robert (Mr.)			
Amount (\$) \$800.00		Payee address; City; State; Zip Code 152 Golfview  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/21 Rpt: 21/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 07/19/2019		<b>5</b> Payee name Coats, Robert (Mr.)			
<b>6</b> Amount (\$) \$400.00		<b>7</b> Payee address; City; State; Zip Code 152 Golfview  Conroe, TX 77304			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/03/2019		Payee name Coats, Robert (Mr.)			
Amount (\$) \$1,196.25		Payee address; City; State; Zip Code 152 Golfview  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/23/2019		Payee name Coats, Robert (Mr.)			
Amount (\$) \$650.00		Payee address; City; State; Zip Code 152 Golfview  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/21 Rpt: 22/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 07/31/2019		<b>5</b> Payee name Coats, Robert (Mr.)			
<b>6</b> Amount (\$) \$400.00		<b>7</b> Payee address; City; State; Zip Code 152 Golfview  Conroe, TX 77304			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Retainer	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/13/2019		Payee name Direct Texas			
Amount (\$) \$162.38		Payee address; City; State; Zip Code PO Box 312100  New Braunfels, TX 78131			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Rack Cards	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/05/2019		Payee name Fastsigns			
Amount (\$) \$48.32		Payee address; City; State; Zip Code 206H South loop 336 W  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Small Banner	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

1 Total pages Schedule F1: Sch: 10/21 Rpt: 23/37		2 FILER NAME Graff, Billy		3 Filer ID	
4 Date 08/30/2019		5 Payee name Greystone Hills			
6 Amount (\$) \$75.00		7 Payee address; City; State; Zip Code 2030 Greystone hills dr  conroe, TX 77304			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Room Rental	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/21/2019		Payee name Greystone Hills			
Amount (\$) \$75.00		Payee address; City; State; Zip Code 2030 Greystone hills dr  conroe, TX 77304			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Room Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/14/2019		Payee name Greystone Hills			
Amount (\$) \$75.00		Payee address; City; State; Zip Code 2030 Greystone hills dr  conroe, TX 77304			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Room Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

1 Total pages Schedule F1: Sch: 11/21 Rpt: 24/37		2 FILER NAME Graff, Billy		3 Filer ID	
4 Date 07/22/2019		5 Payee name Intuit "Quickbooks"			
6 Amount (\$) \$21.32		7 Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting Software subscription	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/22/2019		Payee name Intuit "Quickbooks"			
Amount (\$) \$21.32		Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting software subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/23/2019		Payee name Intuit "Quickbooks"			
Amount (\$) \$42.64		Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/21 Rpt: 25/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 10/22/2019		<b>5</b> Payee name Intuit "Quickbooks"			
<b>6</b> Amount (\$) \$42.64		<b>7</b> Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting subscription	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/22/2019		Payee name Intuit "Quickbooks"			
Amount (\$) \$42.64		Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 12/23/2019		Payee name Intuit "Quickbooks"			
Amount (\$) \$42.64		Payee address; City; State; Zip Code 2700 Coast Ave  Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/21 Rpt: 26/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 08/06/2019		<b>5</b> Payee name Leadership Institute			
<b>6</b> Amount (\$) \$51.00		<b>7</b> Payee address; City; State; Zip Code 1101 N. Highland St.  Arlington, VA 22201			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) How to run for office		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate training seminar	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/05/2019		Payee name Macias Strategies LLC			
Amount (\$) \$1,028.00		Payee address; City; State; Zip Code 655 Loop 337 Unit 303 New Braunfels, TX 78130			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer and Facebook ads	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/09/2019		Payee name Macias Strategies LLC			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 655 Loop 337 Unit 303 New Braunfels, TX 78130			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/21 Rpt: 27/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 09/09/2019	<b>5</b> Payee name Macias Strategies LLC	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code 655 Loop 337 Unit 303 New Braunfels, TX 78130	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Retainer
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 09/09/2019	Payee name Montgomery County Republican party	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 1648  Conroe, TX 77305	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Party fundraiser "Golf Tournament" event with Sign display
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held
Date 11/15/2019	Payee name Montgomery County Republican party	
Amount (\$) \$750.00	Payee address; City; State; Zip Code PO Box 1648  Conroe, TX 77305	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/21 Rpt: 28/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 11/22/2019	<b>5</b> Payee name Montgomery County Tea party	
<b>6</b> Amount (\$) \$100.00	<b>7</b> Payee address; City; State; Zip Code 2603 E. Bluelake Drive  Magnolia, TX 77354	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table rental
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held
Date 12/10/2019	Payee name Montgomery County Tea party	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2603 E. Bluelake Drive  Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held
Date 07/03/2019	Payee name Name Badges International	
Amount (\$) \$38.27	Payee address; City; State; Zip Code 4601 Sheridan Street, Suite 300  Hollywood, FL 33021	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badges
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 16/21 Rpt: 29/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 11/09/2019		<b>5</b> Payee name Netbrands Media			
<b>6</b> Amount (\$) \$2,304.86		<b>7</b> Payee address; City; State; Zip Code 14550 Beechnut St.  Houston, TX 77083			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name: _____ Office sought: _____ Office held: _____			
Date 08/20/2019		Payee name North Shore Republican Women			
Amount (\$) \$200.00		Payee address; City; State; Zip Code PO Box 1993  Montgomery, TX 77356			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser, sign display	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/24/2019		Payee name Office Depot			
Amount (\$) \$110.00		Payee address; City; State; Zip Code 1319 W. DAVIS STREET  Conroe, TX 77304			
<b>PURPOSE OF EXPENDITURE</b>		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels for signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 17/21 Rpt: 30/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 11/24/2019	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) \$17.30	<b>7</b> Payee address; City; State; Zip Code 1319 W. DAVIS STREET  Conroe, TX 77304	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name Badge
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2019	Payee name Office Depot	
Amount (\$) \$140.00	Payee address; City; State; Zip Code 1319 W. DAVIS STREET  Conroe, TX 77304	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/25/2019	Payee name Print Runner	
Amount (\$) \$90.14	Payee address; City; State; Zip Code 8000 Haskell Ave  Van Nuys, CA 91406	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 18/21 Rpt: 31/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 08/22/2019		<b>5</b> Payee name Shirt of my back			
<b>6</b> Amount (\$) \$199.18		<b>7</b> Payee address; City; State; Zip Code 17018 FM1314  Conroe, TX 77302			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/25/2019		Payee name Sticker Mule			
Amount (\$) \$59.00		Payee address; City; State; Zip Code 336 forest Ave.  Amsterdam , NY 12010			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Window Stickers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/30/2019		Payee name Sticker Mule			
Amount (\$) \$123.00		Payee address; City; State; Zip Code 336 forest Ave.  Amsterdam , NY 12010			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Window Stickers	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 19/21 Rpt: 32/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 09/22/2019		<b>5</b> Payee name Vernon's Kuntry Katfish			
<b>6</b> Amount (\$) \$50.00		<b>7</b> Payee address; City; State; Zip Code 5901 W Davis St  Conroe, TX 77304			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Room Rental	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/05/2019		Payee name Vici Media			
Amount (\$) \$324.75		Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website monthly subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/16/2019		Payee name Vici Media			
Amount (\$) \$320.25		Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website monthly subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 20/21 Rpt: 33/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
<b>4</b> Date 10/16/2019	<b>5</b> Payee name Vici Media	
<b>6</b> Amount (\$) \$320.25	<b>7</b> Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website monthly Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held
Date 11/16/2019	Payee name Vici Media	
Amount (\$) \$320.25	Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website monthly subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held
Date 12/16/2019	Payee name Vici Media	
Amount (\$) \$340.50	Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule F1: Sch: 21/21 Rpt: 34/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 07/01/2019		<b>5</b> Payee name Vici Media			
<b>6</b> Amount (\$) \$1,244.88		<b>7</b> Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Initial website design and setup	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/20/2019		Payee name Vici Media			
Amount (\$) \$320.25		Payee address; City; State; Zip Code 816 Big Woods  Longview, TX 75605			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website subscription	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/09/2019		Payee name Wayne Mack Campaign			
Amount (\$) \$50.00		Payee address; City; State; Zip Code P.O. Box 2234  Conroe, TX 77305			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Prayer Breakfast	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

**POLITICAL EXPENDITURES FROM PERSONAL FUNDS**

**SCHEDULE G**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/2 Rpt: 35/37		<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID	
<b>4</b> Date 11/13/2019		<b>5</b> Payee name Kasprzak Campaign			
<b>6</b> Amount (\$) \$30.00  <input type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address; City; State; Zip Code Kasprzakforjudge.com  Conroe, TX 77304			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Fund raiser event		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ticket to hear guest speaker	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/19/2019		Payee name Office Depot			
Amount (\$) \$9.33  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1319 W. DAVIS STREET  Conroe, TX 77304			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Precinct map printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/31/2019		Payee name Signs on the Cheap			
Amount (\$) \$445.06  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 11525A Stonehollow Dr Suite 100 Austin, TX 78758			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Sign purchase	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

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

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
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 complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/2 Rpt: 36/37	<b>2</b> FILER NAME Graff, Billy	<b>3</b> Filer ID
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<b>4</b> Date 07/22/2019	<b>5</b> Payee name Vista Print
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<b>6</b> Amount (\$)  \$131.80  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 275 Wyman Street  Waltham, MA 02451
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase of flyers in Spanish and English
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/26/2019	Payee name Vista Print
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Amount (\$)  \$315.28  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 275 Wyman Street  Waltham, TX 02451
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase push-cards using Personal Discover Card
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/10/2019	Payee name Vista Print
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Amount (\$)  \$87.67  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 275 Wyman Street  Waltham, MA 02451
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business Card printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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**INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER**

**SCHEDULE K**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/1 Rpt: 37/37
<b>2</b> FILER NAME Graff, Billy		<b>3</b> Filer ID
<b>4</b> Date 12/05/2019	<b>5</b> Name of person from whom amount is received Print Runner	<b>8</b> Amount (\$) \$90.14
<b>6</b> Address of person from whom amount is received; City; State; Zip Code 8000 Haskell Ave  Van Nuys, CA 91406		
<b>7</b> Purpose for which amount is received Return due to lost product in the mail		<input type="checkbox"/> Check if political contribution returned to filer