FORM C/OH **CANDIDATE / OFFICEHOLDER COVER SHEET PG 1 CAMPAIGN FINANCE REPORT** Total pages filed: 1 Filer ID The C/OH Instruction Guide explains how to complete this form. 22 FIRST М CANDIDATE / MS/MRS/MR OFFICE USE ONLY **OFFICEHOLDER** Cynthia Date Received RECEIVED NAME SUFFIX NICKNAME LAST Asche DE AND SERVICE SAL ASSMARDIFICE ZIP CODE CITY; ADDRESS / PO BOX; APT / SUITE #; CANDIDATE / **OFFICEHOLDER** 6142 Cove Creek Lane MAILING Amount Receipt # **ADDRESS** Change of Address Frisco, TX 75034 Date Processed Date Imaged MI CAMPAIGN **FIRST** MS/MRS/MR TREASURER M NAME Melanie **SUFFIX** NICKNAME LAST Royer ZIP CODE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; CAMPAIGN **TREASURER ADDRESS** (Residence or Business) 5159 Stillwater Trail, Frisco, Texas 75034 PHONE NUMBER **EXTENSION** CAMPAIGN AREA CODE TREASURER 972-731-0719 PHONE REPORT 15th day after campaign treasurer TYPE January 15 30th day before election Runoff appointment (officeholder only) Final Report (Attach C/OH-FR) Exceeded \$500 limit 8th day before election July 15 Year Month Day PERIOD Month Day Year COVERED 03/28/2016 **THROUGH** 01/01/2016 **ELECTION TYPE ELECTION DATE** 10 ELECTION Year Primary Runoff Other Month Day 05/07/2016 X General Special 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) 11 OFFICE City of Frisco None City Council Place 4 **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2**

					2 of 22
13 C / OH NAME	Asche, Cynthia		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without to d officeholders are required to report this information	he candidate's or officeh	holder's know	vledae or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS	S		
16 CONTRIBUTION TOTALS	LOANS, OR GUA	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TI ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGES,	\$	50.00
	(OTHER THAN F	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	5,517.32
EXPENDITURE TOTALS		AL EXPENDITURES OF \$100 OR LESS, UNLESS I	TEMIZED	\$	8.40
	4. TOTAL POLITIC	AL EXPENDITURES		\$	13,561.58
CONTRIBUTION BALANCE	REPORTING PE			\$	7,397.93
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPA OF THE REPORT	AL AMOUNT OF ALL OUTSTANDING LOANS AS C TING PERIOD	OF THE LAST DAY	\$	10,000.00
17 AFFADAVIT					
		I swear, or affirm, under penalty of true and correct and includes all i under Title 15, Election Code.	of perjury, that the accor information required to t	mpanying rep be reported b	port is by me
Con	KRISTI MORROW ory Public, State of Texa- orm. Expires 02-25-2018 otary ID 12972623-3	y llua Ci	Askl Candidate or Officeholder	r	
AFFIX NOT	TARY STAMP / SEAL ABO			•	
Sworn to and subsc	cribed before me, by the sa	rify Which, witness my hand and seal of office.	_, this the	c	day
Signature of office	er administering	Printed name of officer administering	SSISTANT Lite Title of officer ad	SOUT Inninistering o	oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

3 of 22

				30122			
18 FILER NAM Asche, Cy		19 Filer ID					
20 SCHEDULI NAME OF	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,850.00			
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	667.32			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4. X	4. X SCHEDULE E: LOANS						
5. X	5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				

The Instruc	tion Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/22	
FILER NAME		5. 100 a. (1)	3	Filer ID	
Asche, Cynth	ia				
Date 01/12/2016	5 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
	6 Contributor address; City; State; Zip Code 7701 Pasatiempo				
	Frisco, TX 75034				
Principal occup	oation / Job title (See Instructions)	9 Employer (See Instructions	5)		
			_	A	
Date 01/30/2016	Full name of contributor out-of-state PAC (I	D#:)		Amount of Contribution (\$)	\$450.00
	Contributor address; City; State; Zip Code 4745 Star Ridge Lane				
	Frisco, TX 75034				
Principal occup Retired	ation / Job title (See Instructions)	Employer (See Instructions	5)		
Date	Full name of contributor out-of-state PAC (I		Amount of Contribution (\$)		
02/12/2016	Casteel, Toni				\$50.00
ľ	Contributor address; City; State; Zip Code				
	3900 Cadoz Court				
	Austin, TX 78728				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions	;)		
Admin Asst		Wm R Crocker, Attorney	/		
Date	Full name of contributor ut-of-state PAC (I	D#:)		Amount of Contribution (\$)	
03/03/2016	Clark, Neal				\$250.00
ľ	Contributor address; City; State; Zip Code				
	5632 Mallard Trce				
	Frisco, TX 75034				
•	ation / Job title (See Instructions)	Employer (See Instructions))		
Retired					
Date 01/15/2016	Full name of contributor	D#:)		Amount of Contribution (\$)	\$50.00
01/13/2010	Contributor address; City; State; Zip Code				φ50.00
	10521 Chablis Lane				
	Frisco, TX 75035				
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions))		
		1			

MONET	ARY POLITICAL CONTRIBUTI		SCHEDULE A1		
The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 5/22	
2 FILER NAME			3	Filer ID	
Asche, Cyn	hia				
4 Date 03/17/2016	5 Full name of contributor out-of-state PAC (ID# Cypher, James		7	Amount of Contribution (\$)	\$100.00
	6 Contributor address; City; State; Zip Code 6089 Dripping Springs Drive				
	Frisco, TX 75034				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Retired					
Date	Full name of contributor out-of-state PAC (ID#	#:)	Т	Amount of Contribution (\$)	
02/20/2016	Dillingham, Roger				\$250.00
	Contributor address; City; State; Zip Code		1		
	5017 Oak Knoll Lane				
	Frisco, TX 75034				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 s)		
Retired	,		•		
Date	Full name of contributor ut-of-state PAC (ID#	T	Amount of Contribution (\$)		
01/20/2016	Eakin, Doug				\$100.00
	Contributor address; City; State; Zip Code		1		
	TX.				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
•					
Date	Full name of contributor out-of-state PAC (ID#	:)	Π	Amount of Contribution (\$)	
01/12/2016	Fabry, Thomas				\$100.00
	Contributor address; City; State; Zip Code	***************************************	1		
	4992 Iroquois Drive				
	Frisco, TX 75034				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 5)		
Retired					
Date	Full name of contributor ut-of-state PAC (ID#	:	Т	Amount of Contribution (\$)	
01/16/2016	Farinacci, Patricia				\$500.00
	Contributor address; City; State; Zip Code	***************************************	1		
	5362 Monterey Drive				
	Frisco, TX 75034				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
Retired					

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/4 Rpt: 6/22 2 FILER NAME Filer ID Asche, Cynthia 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 01/12/2016 \$50.00 Gallagher, Robert 6 Contributor address; City; State; Zip Code 7070 Glen Abbey Court Frisco, TX 75034 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 01/29/2016 Gunst, Keith \$100.00 Contributor address; City; State; Zip Code 11070 Katy Freeway Houston, TX 77043 Principal occupation / Job title (See Instructions) Employer (See Instructions) Treasury Manager Sidewinder Drilling, Inc. Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$1,000.00 01/20/2016 Hartnett, Jim Contributor address; City; State; Zip Code 2920 N Pearl Street Dallas, TX 75201 Employer (See Instructions) Principal occupation / Job title (See Instructions) Hartnett Law Firm Attorney Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) 03/17/2016 \$50.00 Hawks, Tammeria Contributor address; City; State; Zip Code 5242 Buena Vista Drive Frisco, TX 75034 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 02/29/2016 \$100.00 McIlhaney, Joe Contributor address; City; State; Zip Code 6101 Ohio Drive Plano, TX 75024 Principal occupation / Job title (See Instructions) Employer (See Instructions) MD Retired

				SCHEDUI	E A1
The Instru	ction Guide explains how to complete t	his form.	1 Total pages So Sch: 4/4 Rpt:		
2 FILER NAME			3 Filer ID		
Asche, Cynt	T				
4 Date 01/24/2016	5 Full name of contributor out-of-state PAC Royer, Christian	(ID#:)	7 Amount of Cor	itribution (\$)	\$1,000.00
	6 Contributor address; City; State; Zip Code 5159 Stillwater Trail				
	Frisco, TX 75034				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions) Self	5)		
Date	Full name of contributor out-of-state PAC	(ID#:)	Amount of Con	tribution (\$)	
03/17/2016	Shanahan, J.W.				\$200.00
	Contributor address; City; State; Zip Code				
	5155 Spanish Oaks				
	Frisco, TX 75034				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
Retired	,				
Date	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Con	tribution (\$)	
01/12/2016	Sharp, Dianna				\$100.00
	Contributor address; City; State; Zip Code				
	7614 Pasatiempo Drive				
	Frisco, TX 75034				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
Retired					
Date	Full name of contributor	(ID#:)			
Date	Tail Harrie of contributor	(10#)	Amount of Con	tribution (\$)	
01/15/2016	Walsh, Lisa	(10#)	Amount of Con	tribution (\$)	\$250.00
	Walsh, Lisa Contributor address; City; State; Zip Code	(10#)	Amount of Con	tribution (\$)	\$250.00
	Walsh, Lisa	(10#)	Amount of Con	tribution (\$)	\$250.00
	Walsh, Lisa Contributor address; City; State; Zip Code	(10#)	Amount of Con	tribution (\$)	\$250.00
01/15/2016	Walsh, Lisa Contributor address; City; State; Zip Code 6164 Cove Creek Lane	Employer (See Instructions)		tribution (\$)	\$250.00

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/22 2 FILER NAME 3 Filer ID Asche, Cynthia TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Amount of 9 In-kind contribution contribution (\$) description 6 Full name of contributor out-of-state PAC (ID#: 01/14/2016 Horn, Peter \$374.55 I Photos Contributor address; City; State; Zip Code 10716 Camelot Drive Frisco, TX 75035 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 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) Date Full name of contributor Amount of In-kind contribution ut-of-state PAC (ID#: contribution (\$) description 01/12/2016 Livingston, Brian \$292.77 i Food Contributor address; City; State; Zip Code 3520 Preston Road Frisco, TX 75034 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) Celebrity Cafe & Bakery Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) 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)

			SCHEDULE E			
on Guide explains how to complete this f	form.	1	ges Schedule E: 1 Rpt: 9/22			
		3 Filer ID				
NITEMIZED LOANS			\$			
7 Name of lender out-of-state PA Asche, Cindy	AC (ID#:)	9 Loan Amount (\$) \$10,000.00			
8 Lender address; City; State; 6142 Cove Creek	Zip Code		10 Interest Rate			
Frisco, TX 75034			11 Maturity Date 01/22/2017			
ion / Job title (See Instructions)	1					
llateral	15 Check if personal funds we	re deposited	into political account (See Instructions)			
X None X 6 GUARANTOR INFORMATION 17 Name of guarantor						
18 Guarantor address; City; State;	Zip Code	************				
ion	21 Employer (See Instructions)				
	NITEMIZED LOANS 7 Name of lender	NITEMIZED LOANS 7 Name of lender	Sch: 1/. 3 Filer ID			

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ommittee	Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services	ense Pri Sa	olling Exper rinting Expe alaries/Wag	ense ges/Contract Labor		Travel in District Travel Out of Dis	
_				The Instruction Guide	explains how	/ to com	plete this form.			
1	Total pages Schedule F1:	2						3	Filer ID	
	Sch: 1/13 Rpt: 10/22		Asche, Cyn	nthia						
4	Date	5	Payee name)						
	01/14/2016		Ahh! Photo							
6	Amount (\$)	+	Payee addre	ess; City;	State; Zi	in Code	<u> </u>			
Ĭ	\$428.67	Ι.	10716 Cam	•	Jidio,	ip cour	F			
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	I		Frisco, TX	75035						
8	PURPOSE	(a	Category (S	See Categories listed at the top	o of this schedule	e) (t) Description			
	OF EVDENDITUDE	ľ	Advertising		J 0. 4.10 C	"		outs	side of Texas. Comp	plete Schedule T.
	EXPENDITURE		-	•			Check if Austin	ı, TX	K, officeholder living	expense
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9	Complete ONLY if direct		Candidate/Off	iceholder name	Offic	e sough	ıt		Office he	∍ld
	expenditure to benefit C/Oł	<u>н</u>								
	Date	Γ	Payee name					<u> </u>		
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		L	Frisco, TX 7	75035						
	PURPOSE	(a)	Category (S	iee Categories listed at the top	p of this schedule	₃₎ (b) Description			
	OF EXPENDITURE		Advertising				<u></u>		ide of Texas. Comp	
İ								, TX,	, officeholder living	expense
							Photos			
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	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Sandidate/Oπ	iceholder name	Office	e sough	t		Office hel	ld
	experience to believe and									
	Date		Payee name						<u></u>	
	01/07/2016		City of Frisc	00						
	Amount (\$)		Payee addres	ss; City;	State; Zi	p Code	:			
	\$1,250.00		6101 Frisco	Square Blvd						
i				·						
			Frisco, TX 7	75034						
	PURPOSE	(a)	Category (Sr	ee Categories listed at the top	of this schedule) (b	Description			
	OF EXPENDITURE		Event Exper	nse			<u></u>		ide of Texas. Compl	
								TX,	, officeholder living o	expense
							Event Space			
		L						-		
	Complete ONLY if direct		Candidate/Offi	iceholder name	Office	e sought	i		Office hel	ld
	expenditure to benefit C/OF	4								

SCHEDULE F1

	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		mmittee	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Finting Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		se s/Contract Labor		Transportation Equipment & Rel Travel in District Travel Out of District OTHER (enter a category not list	ated Expense		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	
	Sch: 2/13 Rpt: 11/22		Asche, Cyn					:			
4	Date	5	Payee name						•		
	01/16/2016		•	ty Republican Pa	ırty						
6	Amount (\$)	7	Payee addres	ss; City;	State:	Zip Co	ode				
	\$1,750.00		8416 Stacy			•					
	42,.00.00		0.20 0.20,								
			McKinney,	TX 75070							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Advertising		•	ŕ		Check if travel	outsi	de of Texas. Complete Schedule 1	:
	EXPENDITORE							l	, TX,	officeholder living expense	
								Ad			
		L					<u> </u>	****			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder name		ffice sou	ıght			Office held	
	Date	Г	Payee name								
	01/12/2016		Consulting [*]	Transition							
	Amount (\$)	┢	Payee addres	ss; City;	State:	Zip Co	ode				
	\$50.00		15150 Pres	,							
	400.00	ĺ									
			Dallas, TX 7	75248							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Event Expe					<u></u>		de of Texas. Complete Schedule T	
							ĺ	lumil .	, TX,	officeholder living expense	
								Event			
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	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Jandidate/Offic	ceholder name	O	ffice sou	ignt			Office held	
	•										
	Date		Payee name								
	01/27/2016		Costco Who	olesale							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$90.74		11220 Dalla	s Parkway							
			Frisco, TX 7	5033			1				
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schee	dule)	(b)	Description			
	OF EXPENDITURE		Event Exper	nse				<u></u>		le of Texas. Complete Schedule T	
							l	1d		officeholder living expense	
								Water & Food	4		
	Commission ONE V # disc.	L	>====diale + = 10 **		~		L_	·		Office held	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Offic	ceholder name	Of	fice sou	gnt			Office held	
								·			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	pense Prini	ing Expens iting Expens aries/Wages			Travel in District Travel Out of District OTHER (enter a category not listed above)		
	•		The Instruction Guide	e explains how t	to compl	ete this form.			·····	
1	Total pages Schedule F1:	2 FILER NAM	ΛE				3	Filer ID		
	Sch: 3/13 Rpt: 12/22	Asche, Cy	nthia nthia							
4	Date	5 Payee nam	le							
	01/27/2016	Costco Wi								
6	Amount (\$)	7 Payee addr	ress; City;	State; Zip	Code					
	\$55.77	1 1	llas Parkway							
			•							
		Frisco, TX	75033							
8	PURPOSE	(a) Category	(See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Exp						ide of Texas. Complete Schedu	ıle T.	
						Supplies	1, 1 X,	, officeholder living expense		
	!					ouppiico				
9	Complete ONLY if direct	Candidate/O	officeholder name	Office	sought			Office held		
<i>3</i>	expenditure to benefit C/O		IIICENDIUEI HAME	Office	Sough		-	Office rigid		
	Date	Payee name	e							
	01/16/2016	Denton Co	ounty Republican Pa	arty						
	Amount (\$)	Payee addr	ress; City;	State; Zip	Code			<u></u>		
	\$1,250.00	729 Ft Wo	orth Drive			·				
		Denton, T	X 76201							
	PURPOSE	(a) Category ((See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising	g Expense					ide of Texas. Complete Schedu	ıle T.	
						ad Check if Austin	ì, 1A,	, officeholder living expense		
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	Complete ONLY if direct	Candidate/O	fficeholder name	Office	sought	***************************************		Office held		
	expenditure to benefit C/OF		.HCenoider name	Onico	Sough			Office ricia		
-	Date	Payee name	e							
	02/25/2016	FRC Race	N Timing							
	Amount (\$)	Payee addr	ress; City;	State; Zip	Code					
	\$300.00									
		Frisco, TX								
	PURPOSE	(a) Category ((See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Advertising				-		ide of Texas. Complete Schedu	le T.	
	EXPENDITORE	ĺ					ı, TX,	, officeholder living expense		
		ĺ				Paddy Dash				
		<u> </u>								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		fficeholder name	Office	sought			Office held		
	experiulture to benefit C/Oi	1								
	rme provided by Toyae Et	thing Commin	200	v othics state	tv. uo				Version V/1 0 324	

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 Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expo Printing Exp Salaries/Wa	ense ges/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	-	·	The Instruction Guide explains	how to com	plete this form.					
1	Total pages Schedule F1:	1				3	Filer ID			
	Sch: 4/13 Rpt: 13/22	Asche, Cy	nthia ————————————————————————————————————			L				
4	Date	5 Payee name	9							
	02/13/2016	FedEx Off	ce							
6	Amount (\$)	7 Payee addr	ess; City; State	; Zip Cod	e					
	\$224.08	5062 Main	Street							
		Frisco, TX								
8	PURPOSE OF	3	See Categories listed at the top of this sch	nedule) (b) Description					
	EXPENDITURE	Advertising	j Expense	1	<u>Lumid</u>		ide of Texas. Complete Schedule T. , officeholder living expense			
				1	Printing	, 17.	, officeriolider living expense			
					g					
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sough	nt .		Office held			
_	expenditure to benefit C/O					******	Office field			
	Date	Payee name								
	01/29/2016	FedEx Offi	ce							
	Amount (\$)	Payee addr	ess; City; State	; Zip Cod	9					
	\$12.12 5062 Main Street									
		Frisco, TX	75034							
	PURPOSE	(a) Category	Gee Categories listed at the top of this sch	nedule) (I	Description					
	OF	Advertising		loudic)		outsi	de of Texas. Complete Schedule T.			
	EXPENDITURE		•	l		, TX,	officeholder living expense			
					Ad					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ficeholder name (Office sough	nt		Office held			
		•								
	Date	Payee name	!							
	02/22/2016	First Graph	ic Services, Inc.							
	Amount (\$)	Payee addre	ess; City; State	; Zip Code)					
	\$1,001.31	229 Garvo	n Street							
		Garland, T	X 75040							
	PURPOSE OF	(a) Category (s	see Categories listed at the top of this sch	edule) (t	Description					
	EXPENDITURE	Advertising	Expense				de of Texas. Complete Schedule T.			
					4 x 4 Signs	IX,	officeholder living expense			
					4 X 4 Oighs					
	Complete ONLY if direct	Candidate/Off	iceholder name C	Office sough	t		Office held			
	expenditure to benefit C/OF		icciolaci name (zince sougi	ı		Office field			

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling E Printing E	xpense Expens			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
			The Instruction Guide expla	ins how to co	omple	te this form.		
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID
	Sch: 5/13 Rpt: 14/22	Asche, Cyr	nthia					
4	Date	5 Payee name	3				<u> </u>	
	01/28/2016	1	nic Services, Inc.					
-	Amount (\$)	7 Payee addre		nto. Zin Co	- d -			
ľ	\$191.97	1	•	ate; Zip Co	oue			
	\$191.97	229 Garvo	i Street					
		Garland, T	X 75040					
8	PURPOSE	(a) Category (5	See Categories listed at the top of this	schedule)	(b)	Description		
	OF EXPENDITURE	Advertising		,			outsi	de of Texas. Complete Schedule T.
	EXI ENDITORE						TX,	officeholder living expense
						Sign		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office sou	ght			Office held
	Date	Payee name						
	02/29/2016	First Graph	ic Services, Inc.					
	Amount (\$)	Payee addre	ess; City; Sta	ate; Zip Co	de			
	\$97.43	229 Garvoi	•	, <u></u> p 00	uc			
	457.75	220 00,10,	Gucci					
			/ 750 to					
		Garland, T	K 75040					
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of this	schedule)	(b)	Description		
	EXPENDITURE	Advertising	Expense		ļ			le of Texas. Complete Schedule T.
					Ļ		TX,	officeholder living expense
					•	Signs		
	0 1/ 04/1/7/1							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ght			Office held
	Date	Payee name						
	03/15/2016	First Graph	ic Services, Inc.					
	Amount (\$)	Payee addre	ss; City; Sta	te; Zip Co	de			
	\$495.24	229 Garvon	=					
		Garland, TX	75040					
	PURPOSE OF	(a) Category (Se	ee Categories listed at the top of this s	schedule)	(b) [Description		
	EXPENDITURE	Advertising	Expense					e of Texas. Complete Schedule T.
					Ļ		TX, c	fficeholder living expense
				l	3	Signs		
								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Offi	ceholder name	Office soug	jht			Office held
	,	-						

SCHEDULE F1

Candidate/Officeholder/Politic Credit Card Payment	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.		Travel in District Travel Out of District	ment & Related Expense		
1 Total pages Schedule F1:	2 FILER NAME				3 Filer ID			
Sch: 6/13 Rpt: 15/22	Asche, Cyn	thia						
4 Date	5 Payee name		***************************************					
03/16/2016	First Graph	ic Services, Inc.						
6 Amount (\$) \$535.84	7 Payee addre 229 Garvon Garland, TX	Street	ate; Zip Code	\$				
8 PURPOSE	(a) Category		[/h) Description				
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 Yard Signs						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offi H	ceholder name	Office sough	t	Office held			
Date	Payee name							
03/07/2016	Frisco Spor	ts Center						
Amount (\$)	Payee addres	ss; City; Sta	ate; Zip Code					
\$371.84	8715 Leban	on Road						
	Frisco, TX 7							
PURPOSE OF EXPENDITURE	(a) Category (Se	e Categories listed at the top of this Expense	schedule) (b)	lanced .	utside of Texas. Complete TX, officeholder living expe			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	ceholder name	Office sought		Office held			
Date	Payee name							
03/15/2016	Frisco Sport	s Center						
Amount (\$) \$371.84	Payee addres 8715 Leband		te; Zip Code					
	Frisco, TX 7	5034						
PURPOSE OF EXPENDITURE	(a) Category (See Advertising E	e Categories listed at the top of this s Expense	schedule) (b)		ntside of Texas. Complete S	3		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	eholder name	Office sought		Office held			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Political Credit Card Payment							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID						
Sch: 7/13 Rpt: 16/22	Asche, Cynthia						
4 Date	5 Payee name						
01/06/2016	Frist Graphic Services, Inc.						
6 Amount (\$) \$822.70	Payee address; City; State; Zip Code 229 Garvon Street						
	Garland, TX 75040						
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 Signs						
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
02/22/2016	Frist Graphic Services, Inc.						
Amount (\$)	Payee address; City; State; Zip Code						
\$1,001.31	229 Garvon Street						
DUDDOG	Garland, TX 75040						
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 Signs						
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
01/08/2016	GotPrint.com						
Amount (\$) \$30.80	Payee address; City; State; Zip Code 7651 N San Fernando Road						
	Burbank, CA 91505						
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 Ad						
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						
Forms provided by Toyas Et							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Exper Legal Services The Instruction Guide e	Salaries	Expen: Wage:	se s/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: 8/13 Rpt: 17/22	Asche, Cyr	thia								
4	Date	5 Payee name									
	02/16/2016	GotPrint.co	m								
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode						
	\$186.80	7651 N Sai	n Fernando Road								
		Burbank, C	A 91505								
8	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description					
	OF EXPENDITURE	Advertising	Expense					de of Texas. Complete Schedule T.			
						Ad Check if Austin	, тх,	officeholder living expense			
						Au					
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office	L abt			Office hold			
9	Complete ONLY if direct expenditure to benefit C/OH		cenoider name	Office so	ugni			Office held			
	Date	Payee name									
	02/03/2016	Harland Cla	arke								
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode						
	\$130.77	4055 Corpo	4055 Corporate Drive								
		Grapevine,	TX 76051								
	PURPOSE OF	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description					
	EXPENDITURE	Accounting	/Banking					le of Texas. Complete Schedule T. officeholder living expense			
						Checks	, 17,	Unicerolder living expense			
	Complete ONLY if direct	Candidate/Off	ceholder name	Office so	ught			Office held			
	expenditure to benefit C/OF	-									
	Date	Payee name									
	01/28/2016	Hobby Lob	ру								
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode						
	\$56.65	5288 Presto	on Road								
		Frisco, TX	75034								
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description					
	OF EXPENDITURE	Event Expe	nse			<u></u>		le of Texas. Complete Schedule T.			
	27. 2.701.01.2						TX,	officeholder living expense			
						Supplies					
	Complete ON! V if direct	Candidata/Off	ooholder name	Office co	l labt			Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		ceholder name	Office so	Jynt			Office held			
		····		***************************************							

SCHEDULE F1

Advertising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Office Overhead/Rental Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Control Payment Neumann Services Office Overhead/Rental Expense Polling 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 Guid	e explains hov	v to con	nplete	this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID		
	Sch: 9/13 Rpt: 18/22		Asche, Cynt	hia								
4	Date	5	Payee name									
	01/29/2016	1	Hobby Lobb	у								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Coc	le			·		
	\$14.23	1	5288 Presto	•	•	•						
			Frisco, TX 7	5034								
8	PURPOSE	╀—				- T	(b) =					
0	OF			e Categories listed at the t	op of this schedule	e)	_	escription	uteir	ie of Texas. Complete Schedul	o T	
	EXPENDITURE		Event Exper	is e			F	<u>l</u>		officeholder living expense	е г.	
							s	upplies				
		l				l						
9	Complete ONLY if direct		andidate/Offic	eholder name	Offic	e soug	ht			Office held		
	expenditure to benefit C/O	Н										
	Date		Payee name									
	01/14/2016	1	Horn, Peter									
	Amount (\$)		Payee addres	s; City;	State; Zi	in Cod	e					
	\$54.12		•		,							
		Ι,	Frisco, TX									
	PURPOSE	├				1,	L\ _					
	OF			Categories listed at the to	op of this schedule) [D) De	escription Check if travel or	uteid	e of Texas. Complete Scheduk	, T	
EXPENDITURE			Advertising Expense					Check if Austin, TX, officeholder living expense				
							Ad	dvertising				
	Complete ONLY if direct		andidate/Offic	eholder name	Office	e sougl	ht			Office held		
	expenditure to benefit C/OI	H										
	Date	F	Payee name									
	03/17/2016	,	Metro Mailer									
	Amount (\$)	F	Payee address	s; City;	State; Zi	p Code	е					
	\$2,186.84	٤	719 E Rose			•						
		l f	ort Worth, T	X 76112								
	PURPOSE					10	J D-					
	OF		Advertising E	Categories listed at the to	p of this schedule)) ["	_	scription Check if travel ou	utside	of Texas. Complete Schedule	т.	
	EXPENDITURE	ĺ	tavertioning L	мреное			H			fficeholder living expense		
							Ma	ailer				
	Complete ONLY if direct		andidate/Office	eholder name	Office	sough	ıt			Office held		
	expenditure to benefit C/OF	1										
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District
Travel Out of District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 10/13 Rpt: 19/22 Asche, Cynthia 4 Date Payee name **NTSRW** 03/24/2016 State; Zip Code Payee address; City; 6 Amount (\$) \$110.00 Frisco, TX (b) Description **PURPOSE** 8 (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 **Event Expense EXPENDITURE** Dinner 9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2016 PayPal Payee address; City; State; Zip Code Amount (\$) \$3.20 1840 Embarcadero Road Palo Alto, CA 94303 **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 PayPal Fee Office sought Office held Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 01/12/2016 PayPal Amount (\$) Payee address; City; State; Zip Code \$1.75 1840 Embarcadero Road Palo Alto, CA 94303 **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** PayPal Fee Candidate/Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Accounting/Banking Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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: 11/13 Rpt: 20/22 Asche, Cynthia 4 Date Payee name 02/20/2016 PayPal 6 Amount (\$) Payee address; City; State; Zip Code \$7.55 1840 Embarcadero Road Palo Alto, CA 94303 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense PayPal Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/24/2016 PayPal Amount (\$) Payee address; City; State; Zip Code 1840 Embarcadero Road \$29.30 Palo Alto, CA 94303 **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 PavPal Fee Candidate/Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 01/27/2016 Staples Amount (\$) Payee address; City; State; Zip Code \$126.06 3333 Preston Road Frisco, TX 75035 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies Complete ONLY if direct Office sought Candidate/Officeholder name Office held 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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor				Travel in District Travel Out of District OTHER (enter a category not listed above	/e)			
	Credit Card Payment			The Instruction Guide	explains h	ow to c	omple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME	Ξ.					3	Filer ID	
	Sch: 12/13 Rpt: 21/22		Asche, Cyn	thia							
4	Date	5	Payee name								
	01/27/2016		Staples								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip C	ode				
	\$42.21		3333 Presto	on Road							
			Frisco, TX 7	risco, TX 75035							
8	PURPOSE	(a)		ee Categories listed at the to	op of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Event Expe	nse				<u></u>		ide of Texas. Complete Schedule T. , officeholder living expense	
								Supplies	ly 1	, Ullicationer living expenses	
	!										
9	Complete ONLY if direct		Candidate/Offi	iceholder name	0	ffice so	ught			Office held	
	expenditure to benefit C/OF	Н									
	Date	Γ	Payee name								
	01/12/2016	L	The Home I	Depot							
	Amount (\$)		Payee addre	ss; City;	State;	Zip C	ode	Mark 201 100 100			
\$4.06 5995 E				ado Parkway							
	!										
			Frisco, TX 7	75033							
	PURPOSE	(a)	Category (S	ee Categories listed at the to	op of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Event Expe	nse						ide of Texas. Complete Schedule T. , officeholder living expense	
								Sand		, oniconolaci iring erpenie	
	Complete ONLY if direct		Candidate/Offi	iceholder name	0	ffice so	ught			Office held	
	expenditure to benefit C/Oł	Н									
	Date	Γ	Payee name								
	01/12/2016		Walmart								
	Amount (\$)	Г	Payee addres	ss; City;	State;	Zip C	ode				
	\$42.81		4268 Legac	y Drive							
		L	Frisco, TX 7	75034							
	PURPOSE	(a)		ee Categories listed at the to	op of this sche	dule)	(b)	Description			
	OF EXPENDITURE		Food/Bever	rage Expense						ide of Texas. Complete Schedule T. , officeholder living expense	
	1							F&B	4	, omocrosco. ning or	
	!										
	Complete ONLY if direct		 Candidate/Offi	iceholder name	Of	ffice sou	ught			Office held	
	expenditure to benefit C/Oł	Н									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Loan Repayment/Reimbursement

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling E: Printing E Salaries/\	pense xpens Vages	se s/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
_		T= =:-== :	The Instruction Guide explair	is now to co	mpie	ete this form.	T			
1	Total pages Schedule F1: Sch: 13/13 Rpt: 22/22	1	2 FILER NAME Asche, Cynthia					Filer ID		
4	Date	5 Payee name		***************************************			<u> </u>			
•	01/25/2016	Web.com	•							
6	Amount (\$)	7 Payee addre	ess; City; Sta	te; Zip Co	ode					
	\$24.90	12808 Gra	12808 Gran Bay Parkway							
		Jacksonville, FL 32258								
8	PURPOSE	(a) Category (s	see Categories listed at the top of this s	schedule)	(b)	Description				
	OF EXPENDITURE	Advertising			<u></u>		ide of Texas. Complete Schedule T. , officeholder living expense			
0	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	abt	***************************************		Office held		
J	expenditure to benefit C/OI		cenduel name	Office sou	gm			Onice neid		
	Date	Payee name								
	02/25/2016	Web.com								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$24.90	12808 Gra	12808 Gran Bay Parkway							
		Jacksonvill	e, FL 32258							
	PURPOSE OF		ee Categories listed at the top of this s	chedule)	(b)	Description				
	EXPENDITURE	Advertising	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
						Website	ı,	officerolder living expense		
	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office sou	ght			Office held		
									_	
	Date	Payee name								
	03/25/2016	Web.com								
	Amount (\$)	Payee addre	ss; City; Stat	e; Zip Co	de					
	\$24.90	12808 Grar	n Bay Parkway							
		Jacksonville	e, FL 32258							
	PURPOSE OF		ee Categories listed at the top of this s	chedule)	(b)	Description				
	EXPENDITURE	Advertising	Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
						Website	.,,	onider name expense		
	Complete ONLY if direct	Candidate/Off	ceholder name	Office sou	aht	······································		Office held	4	
	expenditure to benefit C/O									
				······································					4	
									-	