

**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(Ethics Commission filers)	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI
	Hon.	Jack	
	NICKNAME	LAST	SUFFIX
		Christie	
OFFICE USE ONLY			
Date Received			
10/5/2015			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY; STATE; ZIP CODE
	12421 Memorial Dr.		
Houston TX 77024			
Date Hand-delivered or Date Postmarked			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	467-5367	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
	Mr.	George	
	NICKNAME	LAST	SUFFIX
	Trey	Strake	III
Receipt #		Amount	
Date Processed			
Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY; STATE; ZIP CODE
	2 Stagestop Circle		
Houston TX 77024			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	827-1892	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	7/1/2015		9/24/2015
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	11/3/2015		
12 OFFICE	OFFICE HELD (if any)	13	OFFICE SOUGHT (if known)
	City Council - At Large Position 5		City Council - At Large Position 5

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

14 FILER NAME Jack Christie

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S) <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. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS		

17 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)	\$33,202.83
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$0.00
	4	TOTAL POLITICAL EXPENDITURES	\$50,153.94
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$84,899.32
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$0.00

18 AFFIDAVIT

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.

Jack Christie

Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

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

19 FILER NAME Jack Christie		20 Filer ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS	SUBTOTAL
	NAME OF SCHEDULE	AMOUNT
1	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 33170
2	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4	SCHEDULE E: LOANS	\$ 0
5	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 50153.94
6	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0
8	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 0
9	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
10	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
11	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 32.83

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)**

**FORM C/OH
ADDENDUM**

C/OH NAME Jack Christie

ACCOUNT # (Ethics
Commission filers)

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Jack Christie			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)	7	Amount of contributions (\$)
		6 Contributor address; City; State; Zip Code		
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) George Strake	7	Amount of contributions (\$)
	8/12/2015	6 Contributor address; City; State; Zip Code Houston TX 77002		\$200.00
8	Principal occupation / Job title (See Instructions) self		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Harriett Foster	7	Amount of contributions (\$)
	7/27/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		\$500.00
8	Principal occupation / Job title (See Instructions) n/a		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Martha Adger	7	Amount of contributions (\$)
	8/12/2015	6 Contributor address; City; State; Zip Code Houston TX 77027		\$50.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3	Filer ID (Ethics Commission filers)
8/12/2015	PAC of Winstead PC ----- 6 Contributor address; City; State; Zip Code Dallas TX 75201	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/12/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) John Fedorko ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 250.00
8 Principal occupation / Job title (See Instructions) C&F Interests		9 Employer (See Instructions)	
8/17/2015	4 Date 5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# C00085316) Cigna ----- 6 Contributor address; City; State; Zip Code Washington DC 20004	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
8/25/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Robert Chambers ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) n/a		9 Employer (See Instructions)	
8/25/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Jim Skelly ----- 6 Contributor address; City; State; Zip Code Houston TX 77019	7	Amount of contributions (\$) 500.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule A1:
2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77079	50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Dorothy Caram	7 Amount of contributions (\$)
8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77025	25.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Frank Liu	7 Amount of contributions (\$)
8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77005	1,000.00
8 Principal occupation / Job title (See Instructions) Lovett Homes		9 Employer (See Instructions)
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Garnet Coleman	7 Amount of contributions (\$)
8/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77288	1,000.00
8 Principal occupation / Job title (See Instructions) State of Texas		9 Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Jack Christie			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Bobby Singh	7	Amount of contributions (\$)
	8/26/2015	6 Contributor address; City; State; Zip Code Houston TX 77054		500.00
8	Principal occupation / Job title (See Instructions) ISAN Consultants		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) David Peacock	7	Amount of contributions (\$)
	8/28/2015	6 Contributor address; City; State; Zip Code Houston TX 77090		500.00
8	Principal occupation / Job title (See Instructions) Tom Peacock Nissan		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Mary Ann Wilkins	7	Amount of contributions (\$)
	9/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77025		100.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Jim Jard	7	Amount of contributions (\$)
	9/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77043		1,000.00
8	Principal occupation / Job title (See Instructions) self		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3	Filer ID (Ethics Commission filers)
9/1/2015	Huitt-Zollars Inc Texas PAC ----- 6 Contributor address; City; State; Zip Code Dallas TX 75202	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor Shannon Christian <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Irving TX 75039	7	Amount of contributions (\$) 150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor Richard Rivera <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Dallas TX 75354	7	Amount of contributions (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor Mary Fairchild <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Southlake TX 76092	7	Amount of contributions (\$) 250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/1/2015	4 Date 5 Full name of contributor Darryl Carter <input type="checkbox"/> out of state PAC(ID#)	7	Amount of contributions (\$)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)	
9/1/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		400.00
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions)	
9/7/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Tommy Allen 6 Contributor address; City; State; Zip Code Houston TX 77096	7	Amount of contributions (\$) 125.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/10/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Elizabeth Butler 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/10/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Frances Gantt 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) Fashions by Fran		9 Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3	Filer ID (Ethics Commission filers)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/10/2015		Kathaleen Wall
		6	Contributor address; City; State; Zip Code
			Houston TX 77001
		7	Amount of contributions (\$)
			5,000.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	n/a		
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/10/2015		Dan Clinton
		6	Contributor address; City; State; Zip Code
			Houston TX 77024
		7	Amount of contributions (\$)
			250.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	n/a		
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/10/2015		Claudia Janssens
		6	Contributor address; City; State; Zip Code
			Houston TX 77057
		7	Amount of contributions (\$)
			20.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
4	Date	5	Full name of contributor <input type="checkbox"/> out of state PAC(ID#)
	9/10/2015		Curtis McLemore
		6	Contributor address; City; State; Zip Code
			The Woodlands TX 77382
		7	Amount of contributions (\$)
			2,500.00
8	Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
	MBM Inc		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	David Baird					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
9/14/2015			Houston	TX	77056	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
-------------------------------------------------------	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	Barbara Patton					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
9/15/2015			Houston	TX	77056	100.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
-------------------------------------------------------	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	Nancy Horacek					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
9/15/2015			Houston	TX	77024	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
	Continental Airlines PAC					
	6 Contributor address; City; State; Zip Code					7 Amount of contributions (\$)
9/16/2015			Houston	TX	77002	1,000.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)			
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3	Filer ID (Ethics Commission filers)
9/16/2015	Bob Long ----- 6 Contributor address; City; State; Zip Code Katy TX 77494	7	Amount of contributions (\$) 2,500.00
8 Principal occupation / Job title (See Instructions) Transocean		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Theldon Branch ----- 6 Contributor address; City; State; Zip Code Houston TX 77025	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) The Branch Companies		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Carolyn Williams ----- 6 Contributor address; City; State; Zip Code Houston TX 77079	7	Amount of contributions (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Hall Attorneys ----- 6 Contributor address; City; State; Zip Code Austin TX 78701	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/16/2015	4 Date 5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) LAN-PAC	7	Amount of contributions (\$) 500.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)	
9/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77042	500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Bill Kvinta	7 Amount of contributions (\$)	
9/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77227	100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Gary Moss	7 Amount of contributions (\$)	
9/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77027	250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Leonard Bedell	7 Amount of contributions (\$)	
9/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77255	250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Jack Christie			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ann Lents	7	Amount of contributions (\$)
	9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		250.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input checked="" type="checkbox"/> out of state PAC(ID# C00428391) Republic Services PAC	7	Amount of contributions (\$)
	9/17/2015	6 Contributor address; City; State; Zip Code Phoenix AZ 85054		500.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Cindy Clifford	7	Amount of contributions (\$)
	9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		500.00
8	Principal occupation / Job title (See Instructions) self		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Al Keller	7	Amount of contributions (\$)
	9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		200.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3	Filer ID (Ethics Commission filers)
9/17/2015	Helen Motion ----- 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/17/2015	4 Date 5 Full name of contributor Centerpoint Energy PAC <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77210	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/17/2015	4 Date 5 Full name of contributor Ken Tomlin <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77015	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/17/2015	4 Date 5 Full name of contributor Jeanette Rash <input type="checkbox"/> out of state PAC(ID#) ----- 6 Contributor address; City; State; Zip Code Houston TX 77020	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) Fast Tow		9 Employer (See Instructions)	
9/17/2015	4 Date 5 Full name of contributor Jim McSpadden <input type="checkbox"/> out of state PAC(ID#)	7	Amount of contributions (\$) 500.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)	
9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77077	100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Edwin Friedrichs	7 Amount of contributions (\$)	
9/17/2015	6 Contributor address; City; State; Zip Code Bellaire TX 77401	500.00	
8 Principal occupation / Job title (See Instructions) Walter P Moore		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ed Wulfe	7 Amount of contributions (\$)	
9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	1,000.00	
8 Principal occupation / Job title (See Instructions) Wulfe & Co		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Associated Builders & Contractors PAC	7 Amount of contributions (\$)	
9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77092	250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Harriett Foster	7 Amount of contributions (\$)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)	
9/17/2015	6 Contributor address; City; State; Zip Code Houston TX 77024	250.00	
8 Principal occupation / Job title (See Instructions) n/a		9 Employer (See Instructions)	
4 Date 9/17/2015	5 Full name of contributor Matt Fuqua out of state PAC(ID#) 6 Contributor address; City; State; Zip Code Hempstead TX 77445	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) Blazer Building		9 Employer (See Instructions)	
4 Date 9/23/2015	5 Full name of contributor Marc Melcher out of state PAC(ID#) 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions) Merrill Lynch		9 Employer (See Instructions)	
4 Date 9/24/2015	5 Full name of contributor Hunter Martin out of state PAC(ID#) 6 Contributor address; City; State; Zip Code Houston TX 77024	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)		
	Ron Cuenod				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015	Houston TX 77019				500.00

8 Principal occupation / Job title (See Instructions) Freedom CNG	9 Employer (See Instructions)
----------------------------------------------------------------------	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)		
	Scott Wizig				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015	Houston TX 77274				500.00

8 Principal occupation / Job title (See Instructions) SWE Homes	9 Employer (See Instructions)
--------------------------------------------------------------------	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)		
	Elizabeth Starkey				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015	Houston TX 77027				50.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
-------------------------------------------------------	-------------------------------

4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)		
	Ursula Jimenez				
	6 Contributor address; City; State; Zip Code				7 Amount of contributions (\$)
9/24/2015	Houston TX 77027				200.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)		
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
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2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
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	Houston Apartment Association	7 Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77041	1,000.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
-------------------------------------------------------	-------------------------------

4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Ronald Cuenod	7 Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77055	250.00

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Carolyn Hodges	7 Amount of contributions (\$)
9/24/2015	6 Contributor address; City; State; Zip Code Houston TX 77056	250.00

8 Principal occupation / Job title (See Instructions) n/a	9 Employer (See Instructions)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 8/4/2015	5 Payee name Barrage	
6 Amount (\$) 12,390.00	7 Payee address; City; State; Zip Code 823 Congress Ave, #1300 Austin TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category Consulting 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 Grassroots work
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/1/2015	5 Payee name Barrage	
6 Amount (\$) 12,766.29	7 Payee address; City; State; Zip Code 823 Congress Ave, #1300 Austin TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category Consulting 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 Grassroots work
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/24/2015	5 Payee name Barrage	
6 Amount (\$) 2,606.66	7 Payee address; City; State; Zip Code 823 Congress Ave, #1300 Austin TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Grassroots work
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 8/27/2015	5 Payee name Black Walnut Café		
6 Amount (\$) 57.73	7 Payee address; City; State; Zip Code 5512 Memorial Dr Houston TX 77007		

8 PURPOSE OF EXPENDITURE	(a) Category Food/Beverage Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Staff meeting
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 8/4/2015	5 Payee name Campaign Monitor	
6 Amount (\$) 26.51	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising 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 Eblast fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/14/2015	5 Payee name Campaign Monitor	
6 Amount (\$) 36.89	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising 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 Eblast fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/25/2015	5 Payee name Campaign Monitor	
6 Amount (\$) 37.24	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Eblast fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 9/15/2015	5 Payee name Campaign Monitor		
6 Amount (\$) 38.02	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Eblast fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 8/15/2015	5 Payee name Campaign Monitor	
6 Amount (\$) 37.07	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising 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 Eblast fees
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/23/2015	5 Payee name Campaign Monitor	
6 Amount (\$) 7.62	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising 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 Eblast fees
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held	

4 Date 9/22/2015	5 Payee name Campaign Monitor	
6 Amount (\$) 37.52	7 Payee address; City; State; Zip Code Suite 201 3/5 Stapleton Ave NSW 2232 Sydney AUS 0	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
	Advertising Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Eblast fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 7/27/2015	5 Payee name City of Houston		
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 901 Bagby Houston TX 77002		

8 PURPOSE OF EXPENDITURE	(a) Category Fees	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ballot filing fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 8/6/2015	5 Payee name Downtown Houston Pachyderm	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 411 Fannin, #300 Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense event sponsor
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/16/2015	5 Payee name Jewish Herald Voice	
6 Amount (\$) 510.00	7 Payee address; City; State; Zip Code PO Box 153 Houston TX 77001	
8 PURPOSE OF EXPENDITURE	(a) Category Advertising 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 Ad
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/17/2015	5 Payee name La Griglia	
6 Amount (\$) 1,441.86	7 Payee address; City; State; Zip Code 2002 West Gray Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
	Event Expense	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event location, food & bev
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 8/26/2015	5 Payee name Logo Loc		
6 Amount (\$) 338.77	7 Payee address; City; State; Zip Code 540 North Commercial St Manchester NH *03101		

8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense tshirts printed
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 7/15/2015	5 Payee name Jennifer Naedler	
6 Amount (\$) 3,000.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston TX 77241	
8 PURPOSE OF EXPENDITURE	(a) Category Consulting 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 fundraising, compliance, strategy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/14/2015	5 Payee name Jennifer Naedler	
6 Amount (\$) 3,000.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston TX 77241	
8 PURPOSE OF EXPENDITURE	(a) Category Consulting 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 fundraising, compliance, strategy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/10/2015	5 Payee name Jennifer Naedler	
6 Amount (\$) 3,000.00	7 Payee address; City; State; Zip Code PO Box 41964 Houston TX 77241	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
	Consulting Expense	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense fundraising, compliance, strategy
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

4 Date 7/7/2015	5 Payee name Neumann & Company		
6 Amount (\$) 3,609.44	7 Payee address; City; State; Zip Code 1002 Pauline Ave Bellaire TX 77401		
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense print & post mailer
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought	office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 7/1/2015	5 Payee name Office Depot	
6 Amount (\$) 22.72	7 Payee address; City; State; Zip Code 25821 HIGHWAY 290 Cypress TX 77429	
8 PURPOSE OF EXPENDITURE	(a) Category 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 check endorser stamp
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/20/2015	5 Payee name PayPal	
6 Amount (\$) 216.33	7 Payee address; City; State; Zip Code PO Box 45950 Omaha NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category 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 Online Contribution Fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 9/24/2015	5 Payee name PayPal	
6 Amount (\$) 23.38	7 Payee address; City; State; Zip Code PO Box 45950 Omaha NE 68145	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie		3 Filer ID (Ethics Commission filers)
	Accounting/Banking	<input type="checkbox"/> <input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Online Contribution Fees
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		

4 Date 9/16/2015	5 Payee name Premier IMS		
6 Amount (\$) 2,950.64	7 Payee address; City; State; Zip Code PO Box 670547 Houston TX 77267		

8 PURPOSE OF EXPENDITURE	(a) Category Event Expense	<input type="checkbox"/> <input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Print & post invitations
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name office sought office held		
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**POLITICAL EXPENDITURES
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 Date 9/9/2015	5 Payee name Spectrum Marketing	
6 Amount (\$) 110.00	7 Payee address; City; State; Zip Code 95 Eddy Rd, #101 Manchester NH *03102	
8 PURPOSE OF EXPENDITURE	(a) Category 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 design invitation
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

4 Date 8/4/2015	5 Payee name Sprint 2 Print	
6 Amount (\$) 3,139.25	7 Payee address; City; State; Zip Code 8748 Clay Road, #300 Houston TX 77080	
8 PURPOSE OF EXPENDITURE	(a) Category Printing 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 printing
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Jack Christie	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$x	
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILERS

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule K:	
2 FILER NAME Jack Christie	Filer ID (Ethics Commission filers)
4 Date 7/29/2015	5 Name of person whom amount is received Community Trust Bank
	6 Address of person from whom amount is received; City; State; Zip Code Houston TX 77024
	8 Amount (\$)
7 Purpose for which amount is received interest	<input type="checkbox"/> Check if political contribution returned to filer

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILERS

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total Pages Schedule K:	
2 FILER NAME Jack Christie		Filer ID (Ethics Commission filers)	
4	Date	5 Name of person whom amount is received	8
		Community Trust Bank	Amount
		6 Address of person from whom amount is received; City; State; Zip Code	(\$)
	9/18/2015	Houston TX 77024	
		7 Purpose for which amount is received	<input type="checkbox"/> Check if political contribution returned to filer
		interest	
4	Date	5 Name of person whom amount is received	8
		Community Trust Bank	Amount
		6 Address of person from whom amount is received; City; State; Zip Code	(\$)
	8/31/2015	Houston TX 77024	
		7 Purpose for which amount is received	<input type="checkbox"/> Check if political contribution returned to filer
		interest	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			