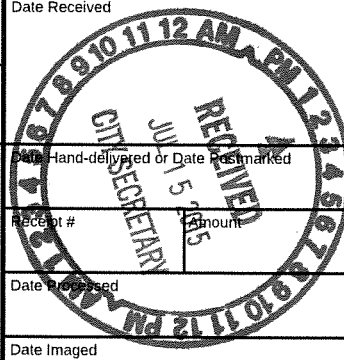


CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00020872	2 Total pages filed: 229	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Sylvester	MI	OFFICE USE ONLY 
	NICKNAME	LAST Turner	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 440 Louisiana Suite 1880 Houston, TX 77002		ZIP CODE	
	Date Hand-delivered or Date Postmarked Receipt # Date Processed Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST David	MI	
	NICKNAME	LAST Minberg	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1 Greenway Plaza Suite 750 Houston, TX 77046			
7 CAMPAIGN TREASURER PHONE	AREA CODE (713)	PHONE NUMBER 623-6000	EXTENSION	
8 REPORT TYPE	<input 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 checked="" 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 01/01/2015	THROUGH	Month Day Year 06/30/2015	
10 ELECTION	ELECTION DATE Month Day Year 11/03/2015		ELECTION TYPE	
			<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other
11 OFFICE	OFFICE HELD (if any) State Representative District 139		12 OFFICE SOUGHT (if known) Mayor of Houston	

GO TO PAGE 2

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

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

2 of 229

13 C / OH NAME Turner, Sylvester (The Honorable)	14 Filer ID (Ethics Commission Filers) 00020872
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15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

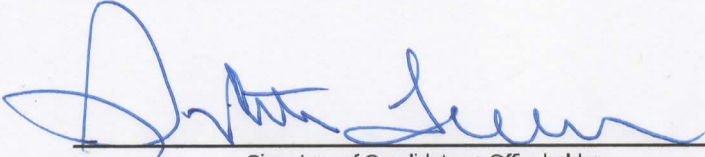
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required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

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
---	---

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 3,949.46
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 763,091.74
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 1,610.95
	4. TOTAL POLITICAL EXPENDITURES	\$ 601,853.08
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,160,813.23
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT

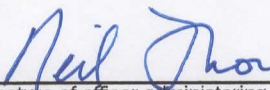
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sylvester Turner, this the 15th day of July, 2015, to certify which, witness my hand and seal of office.



 Signature of officer administering

Printed name of officer administering

Title of officer administering oath

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

3 of 229

18 FILER NAME Turner, Sylvester (The Honorable)		19 Filer ID 00020872	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	747,793.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	15,298.74
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	591,126.53
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	10,369.65
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	356.90
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/104 Rpt: 4/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AT&T Texas PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701-2471	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abraham, Robbie <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578-4896	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Occidental Petroleum Corporation
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ace, Lloyd <hr/> Contributor address; City; State; Zip Code Houston, TX 77041	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) The Men's Club
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Fredtrena <hr/> Contributor address; City; State; Zip Code Houston, TX 77049-2531	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Willie <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-9300	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) W.J. Alexander & Associates, P.C.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/104 Rpt: 5/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen II, Errol <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77021-5911	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Finance		9 Employer (See Instructions) NASA
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alsowayel, Dina <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Associate Director		Employer (See Instructions) University of Houston Women's, Gender & Sexuality Studies
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Darron <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-2856	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Express Energy Services
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Ray and Buffie <hr/> Contributor address; City; State; Zip Code Tempe, AZ 85281-6467	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) ASU
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Ricky <hr/> Contributor address; City; State; Zip Code Magnolia, TX 77355-5521	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/104 Rpt: 6/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/26/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sylvester	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77036-3320	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Sylvester	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77036-3320	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews & Kurth Texas PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77002-2929	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asakura, Keiji	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77006-5214	
Principal occupation / Job title (See Instructions) Landscape Architect		Employer (See Instructions) Asakura Robinson
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Linda	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77088-6961	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/104 Rpt: 7/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, M.S.	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Sugar Land, TX 77478-4325	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bacon, Mary E	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77027-9311	
Principal occupation / Job title (See Instructions) Retired State Judge		Employer (See Instructions) Retired
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Debra	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-5511	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Connelly Baker Wotring Maston & Jackson
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Bill	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77008-4218	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Baldwin Realty / Self Employed
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Ginger	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77009	
Principal occupation / Job title (See Instructions) Realtor Assistant		Employer (See Instructions) Boulevard Realty

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/104 Rpt: 8/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Jeffrey and Rosalind <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479-6968	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) Retired
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-6714	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballard, Charles <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ballard, Hoyt <hr/> Contributor address; City; State; Zip Code Houston, TX 77043-2907	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barksdale, Anita <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-7501	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Anita Barksdale Legal & Consulting Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/104 Rpt: 9/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/25/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barthelemy, Maryann	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77047-1401	
8 Principal occupation / Job title (See Instructions) Investigations		9 Employer (See Instructions) City of Houston
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates & Coleman, PC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77004-3910	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baumann, G. Marc	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Northbrook, IL 60062-5513	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) SP+
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Oliver	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77042-4249	
Principal occupation / Job title (See Instructions) Management Consulting		Employer (See Instructions) Oliver Bell, Inc.
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin, Arielle	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77006-5577	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) The Dow Chemical Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/104 Rpt: 10/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/28/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Robert <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-1641	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Bennett Licensing
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Sr., Walter <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Pastor		Employer (See Instructions) McGee Chapel Baptist Church
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bertani, Charles <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-5895	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Bertani and Associates, Inc.
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-7220	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Homebuilder		Employer (See Instructions) Urban Craft Custom Builders
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackridge <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2161	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/104 Rpt: 11/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/28/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blades, Theresa <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77042-1554	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Capital Market Associate		9 Employer (See Instructions) The Hanover Company
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bluitt, Robin <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-6026	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonham, Jeff <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2487	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Vice President, Texas State Relations		Employer (See Instructions) CenterPoint Energy
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bostic, Jacqueline <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-1617	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, Brandt <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) The Hanover Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/104 Rpt: 12/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/28/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, J. Murry <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057-3263	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) President, Chairman, and CEO		9 Employer (See Instructions) The Hanover Company
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, Jeb <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) The Hanover Company
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, Lane <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, Mary Kay <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Hanover GP LLC
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowden, Polly <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-3263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) The Hanover Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/104 Rpt: 13/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracey, Arthur <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77030	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) Gulf Coast Pathology
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brailey, Carla <hr/> Contributor address; City; State; Zip Code Houston, TX 77288-8176	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Texas Southern University
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branch, Ester <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-1324	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Branch/McGowen Ventures
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branch, III, Theldon R. <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-1324	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) The Branch Companies
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Gabriel <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-3929	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Braun Enterprises

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/104 Rpt: 14/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breining, Clifford	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Indian Wells, CA 92210-7805	
8 Principal occupation / Job title (See Instructions) Real estate development		9 Employer (See Instructions) Maple Multifamily Operations LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridge, Tracy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Humble, TX 77396-4280	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) CenterPoint Energy
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridy, Joseph	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code New York, NY 10128	
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Hamlin Capital Management LLC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, Yedobaty	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77016-2110	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broesche, Travis	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77005-1518	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/104 Rpt: 15/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Anne	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77098-5333	
8 Principal occupation / Job title (See Instructions) Philanthropist		9 Employer (See Instructions) self
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Joy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77019-4829	
Principal occupation / Job title (See Instructions) Affordable Housing		Employer (See Instructions) New Hope Housing Inc.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Rosie	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77066-4367	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self-employed
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Sabrina	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Austin, TX 78701-1859	
Principal occupation / Job title (See Instructions) Lobbyist/Consultant		Employer (See Instructions) Sabrina T. Brown Consulting
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Deborah	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code League City, TX 77573-1993	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Bryant Law Firm

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/104 Rpt: 16/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buck, Larry <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-7782	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Risk Management Consultant		9 Employer (See Instructions) Larry W. Buck & Associates
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burch, Scott <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-5200	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self Employed
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Ronald <hr/> Contributor address; City; State; Zip Code New Orleans, LA 70128-3622	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Global Parking Systems
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Michael <hr/> Contributor address; City; State; Zip Code Clute, TX 77531-2020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) firefighter		Employer (See Instructions) Houston Fire Department
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cain, Paul <hr/> Contributor address; City; State; Zip Code Houston, TX 77014-1969	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Personal Service Representative		Employer (See Instructions) Workforce Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/104 Rpt: 17/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caldwell, Katherine	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77019-4309	
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) Legacy community health
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun, John	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Jackson, MS 39201-2101	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) IMS Engineers
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calvin, Todd	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77096-4906	
Principal occupation / Job title (See Instructions) Binkley & Barfield, Inc.		Employer (See Instructions) VP-Municipal Infrastructure
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, James	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Cypress, TX 77433-5576	
Principal occupation / Job title (See Instructions) Fire Fighter		Employer (See Instructions) City of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannings, Paul	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77095-4592	
Principal occupation / Job title (See Instructions) Managing Principal		Employer (See Instructions) RPH Consulting Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/104 Rpt: 18/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cargas, James <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006-2380	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) City of Houston
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carmouche, Janaeya <hr/> Contributor address; City; State; Zip Code Houston, TX 77026-4721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Alday Group
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Darryl <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office Of Darryl B. Carter
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Eric <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5946	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Carter Law Firm
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castleberry, Grady <hr/> Contributor address; City; State; Zip Code Houston, TX 77094	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/104 Rpt: 19/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/25/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Randall <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704-4611	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas Legal Services
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Anthony <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Chasecom, L.L.P.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chase, Debra Martin <hr/> Contributor address; City; State; Zip Code Beverly Hills, CA 90210-6105	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO/President		Employer (See Instructions) Martin Chase Productions
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chawdhary, Raschid <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-4428	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Tax Preparer		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri Sr, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77053-4527	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Prime Operating Co

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/104 Rpt: 20/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chow, Hannah	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77046-1500	
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Joe	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Spring, TX 77379-7264	
Principal occupation / Job title (See Instructions) District Chief		Employer (See Instructions) Houston Fire Department
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clemmons, Lora	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77004-7010	
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) John B Clemmons MD PA
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford, Cindy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77019-4815	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) The Clifford Group
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cluff, Alsie	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77021-1238	
Principal occupation / Job title (See Instructions) Facilities and Operations Manager		Employer (See Instructions) Varnett Charter Schools

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/104 Rpt: 21/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096-6124	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Certified Financial Planner		9 Employer (See Instructions) Self Employed
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colbert, Paul <hr/> Contributor address; City; State; Zip Code Houston, TX 77035-3021	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) Self-employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Deborah <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77489-3059	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Deniza <hr/> Contributor address; City; State; Zip Code Houston, TX 77084-6226	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) State Farm
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier, Michael <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345-2150	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Energy M&A Consultant		Employer (See Instructions) Self-employed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/104 Rpt: 22/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77489	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Willie <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2618	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) NORTH MAIN CHURCH OF GOD IN CHRIST, INC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Willie <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2618	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PASTOR		Employer (See Instructions) NORTH MAIN CHURCH OF GOD IN CHRIST, INC
Date 06/29/2015	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00248716</u>) Comcast Corporation & NBCUniversal PAC <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19103-2833	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00002089</u>) Communications Workers of America - COPE PCC <hr/> Contributor address; City; State; Zip Code Washington, DC 20001-2760	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/104 Rpt: 23/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/25/2015	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002089) Communications Workers of America - COPE PCC	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code Washington, DC 20001-2760		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Raymond	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77007-5715		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Council, Tony	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77042-1326		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) TLC Engineering, Inc.
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Angela	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77054-6003		
Principal occupation / Job title (See Instructions) Development		Employer (See Instructions) Houston Habitat for Humanity
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creative Concourse Concessions LLC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Houston, TX 77042-4958		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/104 Rpt: 24/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creuzot, Cheryl	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77006-5427	
8 Principal occupation / Job title (See Instructions) Financial Advisor/Attorney		9 Employer (See Instructions) Wealth Development Strategies LLC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cummings, Claude	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77003	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) CWA District 6
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Ronald	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77071-2601	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cushingberry, Kimberly	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77479-3364	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Connections Educational Charter Schools
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Agostini, Craig	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Spring, TX 77379-4024	
Principal occupation / Job title (See Instructions) Government Affairs		Employer (See Instructions) Comcast

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/104 Rpt: 25/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daggett, Jai	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Pearland, TX 77584-3463	
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) United Healthcare
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Terry	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77004-4184	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Terry E. Daniels Attorney At Law
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Denise	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701-1724	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Davis Kaufman
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Gwendolyn	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77004-6602	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Mark	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Humble, TX 77346-1560	
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/104 Rpt: 26/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Marthea <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77021-2249	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Public Relations Coordinator		9 Employer (See Instructions) Lewis Affiliated
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Michael Scot <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-4847	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Developer		Employer (See Instructions) Trammell Crow Residential
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delicious Concepts LLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77008-6998	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dever, Sandra <hr/> Contributor address; City; State; Zip Code Houston, TX 77014-1969	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Neighborhood Centers Inc.
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dever, Sandra <hr/> Contributor address; City; State; Zip Code Houston, TX 77014-1969	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Office Manager		Employer (See Instructions) Neighborhood Centers Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/104 Rpt: 27/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dollinger, Salina	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Seabrook, TX 77586-5429		
8 Principal occupation / Job title (See Instructions) Office Administrator		9 Employer (See Instructions) DollingerLaw
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dominguez, Corina	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Sugar Land, TX 77479-6752		
Principal occupation / Job title (See Instructions) Managing Member		Employer (See Instructions) Cdom LLC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, David	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77056-3600		
Principal occupation / Job title (See Instructions) ACCOUNTANT		Employer (See Instructions) CARR RIGGS & INGRAM
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doyle, Scott	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Kingwood, TX 77345-1943		
Principal occupation / Job title (See Instructions) SVP		Employer (See Instructions) CenterPoint Energy
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Du, Haoyi	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Cypress, TX 77433-2309		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) American SMS Real Estate

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/104 Rpt: 28/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Brandon <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77003-4525	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Texas Senate
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eagleton, Gary <hr/> Contributor address; City; State; Zip Code Houston, TX 77091-5626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) Self
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easter, Barbara & William <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-7305	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Inspirera Ventures LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elberger, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77219-1231	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Concorde Realty
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Ronald <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-2243	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Houston Fire Department

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/104 Rpt: 29/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elias, Ronald 6 Contributor address; City; State; Zip Code Houston, TX 77057-2243	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Houston Fire Department
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Douglas Contributor address; City; State; Zip Code Houston, TX 77005-1504	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Investment management		Employer (See Instructions) Rooney management
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellmer, Mindy Contributor address; City; State; Zip Code Austin, TX 78701-4528	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Legislative Consultant		Employer (See Instructions) Self Employed
Date 06/29/2015	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00219642</u>) Enterprise Holdings, Inc. PAC Contributor address; City; State; Zip Code Saint Louis, MO 63105-4204	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ephrem, Solomon Contributor address; City; State; Zip Code Houston, TX 77093-5404	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Central Cab Co.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/104 Rpt: 30/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erwin, James <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-7436	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Executive Vice President		9 Employer (See Instructions) Chicago Title Commercial
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eugene, Darrick <hr/> Contributor address; City; State; Zip Code Austin, TX 78747-1303	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Darrick W. Eugene & Associates PC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eugene, Darrick <hr/> Contributor address; City; State; Zip Code Austin, TX 78747-1303	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fainter, Jr., John <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2491	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) The Assoc. of Electrical Companies of Texas, Inc.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fairchild, David <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092-0112	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Empire Media Services

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/104 Rpt: 31/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/28/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fein, Martin	7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77056-3008	
8 Principal occupation / Job title (See Instructions) Real Estate Developer		9 Employer (See Instructions) Martin Fein Interests, Ltd.
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felder, Chanda	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459-6079	
Principal occupation / Job title (See Instructions) Parking Manager		Employer (See Instructions) City of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felder, Chanda	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459-6079	
Principal occupation / Job title (See Instructions) Parking Manager		Employer (See Instructions) City of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fertitta, Tilman	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77019-1118	
Principal occupation / Job title (See Instructions) Chairman, President, C.E.O.		Employer (See Instructions) Landry's Seafood Restaurants, Inc.
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flanagan, Michael	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Seabrook, TX 77586-4621	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Houston Fire Dept

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/104 Rpt: 32/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/25/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontenot, Coretta <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77047-6760	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Houston Independent School District
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foreman, Jacquie <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Self
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Francis, Takasha <hr/> Contributor address; City; State; Zip Code Houston, TX 77054-3222	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Francis Firm PC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Ronald <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McGuire Woods
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frazier, Patricia <hr/> Contributor address; City; State; Zip Code Houston, TX 77045-3639	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/104 Rpt: 33/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulbright & Jaworski L.L.P. Texas Committee <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77010-3095	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00559609) GARVERPAC <hr/> Contributor address; City; State; Zip Code North Little Rock, AR 72115-1084	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GRIFFIN, FRED <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-3652	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) GRIFFIN PARTNERS INC
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galloway, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-5504	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Real Estate Services		Employer (See Instructions) HFF LP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galvan, Louis <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-3513	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Restaurant		Employer (See Instructions) Irma's Southwest Grill

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/104 Rpt: 34/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Danon	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057-1689	
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) D. C. Garrett Group
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garver, C.M. (Mike)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77098-4219	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) BRH-Garver Construction LP
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Peggy	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77008-4338	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert, Peggy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77008-4338	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Ramirez DBA Aaron's Plumbing & A/C	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77018-2107	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/104 Rpt: 35/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Diane <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77088-5655	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) HP/Engineer/Aduit		9 Employer (See Instructions) retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Herma <hr/> Contributor address; City; State; Zip Code Houston, TX 77038-2449	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glynn, Marcell <hr/> Contributor address; City; State; Zip Code Houston, TX 77038-2449	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golden, Samuel <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469-2001	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Banking Consultant		Employer (See Instructions) Alvarez & Marsal Financial Industry Advisory Services, LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Mitch <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-8246	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sr. Fire Inspector		Employer (See Instructions) City of Houston

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/104 Rpt: 36/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Richard <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) USA Auto Colliision Center
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Kathy <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2101	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Patricia <hr/> Contributor address; City; State; Zip Code Galveston, TX 77550-4824	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Research Professor		Employer (See Instructions) University of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Walt <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-2210	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) SP+
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graydon Group LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-5007	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/104 Rpt: 37/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Steve <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-9505	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Landry's Inc.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Edward <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-3423	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Griffin Partners
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guess, III, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-5630	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) Guess Group
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry-Moore, Demetrious <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-1131	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) City of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HILLCO PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2458	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/104 Rpt: 38/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HVJ PAC 6 Contributor address; City; State; Zip Code Houston, TX 77072-1010	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagerman, Thomas Contributor address; City; State; Zip Code New Albany, OH 43054-8426	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) SP+
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Deborah Contributor address; City; State; Zip Code Houston, TX 77022-2818	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, John Contributor address; City; State; Zip Code Austin, TX 78735-6122	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) The Assoc. of Electrical Companies of Texas, Inc.
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Mark Contributor address; City; State; Zip Code Austin, TX 78701-2496	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Hanna & Anderton

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/104 Rpt: 39/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanson, Tina <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76001-6903	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Sr. Project Manager		9 Employer (See Instructions) Garver, LLC
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harling, Michael <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-2057	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) McWilliams Governmental Affairs Consultants
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Lori <hr/> Contributor address; City; State; Zip Code Houston, TX 77022-2809	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Trauma Registrar		Employer (See Instructions) Texas Children's Hospital
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Lori <hr/> Contributor address; City; State; Zip Code Houston, TX 77022-2809	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Trauma Registrar		Employer (See Instructions) Texas Children's Hospital
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Ethel <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Houston ISD

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/104 Rpt: 40/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatchett, Dorita	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77036-8739	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) D. L. Hatchett & Associates
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatter, Evelyn	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77038-3044	
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) McConnell & Jones LLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, III, Albert	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Albert Hawkins Public Policy
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Jonathan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77042	
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Pam	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77042	
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/104 Rpt: 41/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Rod <hr/> 6 Contributor address; City; State; Zip Code Jackson, MS 39201-2101	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) IMS Engineers
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill & Hill, P.C. <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-3405	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, David <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578-7823	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Ollie <hr/> Contributor address; City; State; Zip Code Fresno, TX 77545	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) J's Partners LLC
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Timothy <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-5966	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Tim Hogans Dalton GA Carpet Outlet

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/104 Rpt: 42/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/27/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holiday, John	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Rosenberg, TX 77469-4992	
8 Principal occupation / Job title (See Instructions) Opera Singer		9 Employer (See Instructions) Self Employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollingsworth, Jarvis	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77002-2770	
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Bracewell & Giuliani LLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, Harry	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77251-1191	
Principal occupation / Job title (See Instructions) Health Care Consultant		Employer (See Instructions) GIS
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, Jamie	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-4707	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Smith Graham & Company
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) House, Kimberly	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Bellaire, TX 77401-4707	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) City of Houston

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/104 Rpt: 43/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston, Melvin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096-5724	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney at Law		9 Employer (See Instructions) Melvin Houston & Associates, P.C.
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Officers' Union PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-7730	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Retired Officers Assoc. PAC-FUND <hr/> Contributor address; City; State; Zip Code Houston, TX 77252-2288	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Professional Fire Fighters Assn Local #341 Political Action Fund <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-8334	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, Kenneth <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6552	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Howard Construction & Design

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/104 Rpt: 44/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/27/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hu, Shou Ting 6 Contributor address; City; State; Zip Code Bellaire, TX 77401-3711	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Aviles Engineering Corp.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Trinidad Contributor address; City; State; Zip Code Missouri City, TX 77459-1668	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self Employed
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Larry Contributor address; City; State; Zip Code Houston, TX 77077-2419	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Hunt and Hunt Engineering
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HuntJon LLC Contributor address; City; State; Zip Code Houston, TX 77069-1779	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Marvalette Contributor address; City; State; Zip Code Houston, TX 77069-1779	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) 3D Visions Planning Consultants

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/104 Rpt: 45/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huq, Mohdudul <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77070-2269	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Senior Planner		9 Employer (See Instructions) City of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) International Longshoremen's Assn. Local #24 (I.L.A. #24 PAC) <hr/> Contributor address; City; State; Zip Code Houston, TX 77012-1503	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00158576) International Longshoremen's Assoc. AFL-CIO Committee on Political <hr/> Contributor address; City; State; Zip Code North Bergen, NJ 07047-6439	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) International Union of Operating Engineers Local Union 450 OPEATE <hr/> Contributor address; City; State; Zip Code Houston, TX 77017-5066	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itima, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-3056	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) Hestia Homes LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/104 Rpt: 46/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Itima, Kevin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77036-3056	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Hestia Homes LLC
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Ann-Marie <hr/> Contributor address; City; State; Zip Code Houston, TX 77254-0871	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson-Hudson, Barbara <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-7106	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Office of Barbara J. Hudson
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Anna <hr/> Contributor address; City; State; Zip Code Spring, TX 77391-1897	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Floyd <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498-4653	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Floyd James & Associates, P.C.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/104 Rpt: 47/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77339-2073	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) LaTrelles Management Corp.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Shirley <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-3812	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President Global Business Development		Employer (See Instructions) Ardyss
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jard, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77043-2201	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Jard Group
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarmon, Iva <hr/> Contributor address; City; State; Zip Code Houston, TX 77091-5532	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) I J Realty LLC
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78722-1122	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Folklorist		Employer (See Instructions) Houston Art Alliance

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/104 Rpt: 48/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferson, Wallace <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78739-1804	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Alexander Dubose Jefferson & Townsend LLP
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-6875	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jewell, Michael <hr/> Contributor address; City; State; Zip Code Austin, TX 78726-1763	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jewell and Associates
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jiang, Ray <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2709	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johns, Mary <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-3275	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agency		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/104 Rpt: 49/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Carla <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Police Officer		9 Employer (See Instructions) Retired
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Lonnie and Eartha <hr/> Contributor address; City; State; Zip Code Houston, TX 77065-3320	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney. Business Owner		Employer (See Instructions) ExxonMobil LegalWATCH
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Monique <hr/> Contributor address; City; State; Zip Code Fresno, TX 77545-9226	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Alon Realty
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2166	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Johnson & Johnson Law Firm
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomasine <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459-4910	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Interior Designer		Employer (See Instructions) En'terior Designs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/104 Rpt: 50/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Carolyn D <hr/> 6 Contributor address; City; State; Zip Code Meadows Place, TX 77477-1812	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Geoscientist		9 Employer (See Instructions) Oasis Petroleum
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Earl <hr/> Contributor address; City; State; Zip Code Houston, TX 77050-3633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) HPD		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Jessica <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-5929	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Dow Chemical
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Thomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77081-2222	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) McConnell & Jones Llp
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Thomas <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-1411	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) McConnell, Jones, Lanier & Murphy LLP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/104 Rpt: 51/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamins, Duane <hr/> 6 Contributor address; City; State; Zip Code Bellaire, TX 77401-5324	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) Lone Star Cab
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamins, Duane <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-5324	Amount of Contribution (\$) \$3,500.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) Lone Star Cab
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamins, Ricky <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-7445	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Houston Transportation Services LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kamins, Ricky <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-7445	Amount of Contribution (\$) \$3,500.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Houston Transportation Services LLC
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasper, David <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336-0168	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Arkk Engineers		Employer (See Instructions) Senior Project Manager / Principal

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/104 Rpt: 52/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kaufman, Lisa <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701-1724	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Davis Kaufman
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeton, Richard <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-2906	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McGuireWoods LLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehoe, John P <hr/> Contributor address; City; State; Zip Code Rochester, NY 14607-3008	Amount of Contribution (\$) \$133.00
Principal occupation / Job title (See Instructions) Founder and Candidate		Employer (See Instructions) Kehoe for Congress 2016
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehoe, John P <hr/> Contributor address; City; State; Zip Code Rochester, NY 14607-3008	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Founder and Candidate		Employer (See Instructions) Kehoe for Congress 2016
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kellman, Monica <hr/> Contributor address; City; State; Zip Code Houston, TX 77085-3004	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/104 Rpt: 53/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, JaPaula <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459-4863	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kendrick, Martye <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Johnson Petrov LLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennard, Karen <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) City Attorney		Employer (See Instructions) City of Austin
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Nathelyne <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-3366	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Nathelyne A. Kennedy & Associates
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5412	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Community relations		Employer (See Instructions) UnitedHealthcare

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/104 Rpt: 54/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Shelley <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77018-5412	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Community relations		9 Employer (See Instructions) UnitedHealthcare
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessel, Julie <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-1560	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Human Relations Director		Employer (See Instructions) Veolia
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin A. Murray LLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-4180	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kilpatrick, Robert <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-6164	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kivowitz, Donald <hr/> Contributor address; City; State; Zip Code Victoria, TX 77901	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Regency Nursing & Rehabilitation Centers, Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/104 Rpt: 55/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/26/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kivowitz, Donald <hr/> 6 Contributor address; City; State; Zip Code Victoria, TX 77901	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Chairman		9 Employer (See Instructions) Regency Nursing & Rehabilitation Centers, Inc.
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinworth, Tom <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-4105	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) VP for Government Relations		Employer (See Instructions) Baylor College of Medicine
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAEEQ Health System (sole prop.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77091-4339	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAN-PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77042-3746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacerda, Heber <hr/> Contributor address; City; State; Zip Code Victoria, TX 77901-6530	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Regency Nursing & Rehabilitation Centers, Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/104 Rpt: 56/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/26/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacerda, Heber <hr/> 6 Contributor address; City; State; Zip Code Victoria, TX 77901-6530	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) Regency Nursing & Rehabilitation Centers, Inc.
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lai, Rocky <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-3410	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Rocky Lai & Associates Inc
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkins, Celesta <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-6104	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lampkins, Celesta <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-6104	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landers, Daniella <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-8190	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sutherland Asbill & Brennan

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/104 Rpt: 57/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langan, Eric <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584-4310	7 Amount of Contribution (\$) \$3,000.00
8 Principal occupation / Job title (See Instructions) President/CEO		9 Employer (See Instructions) RCI Hospitality Holdings Inc
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanham, Jr., Robert <hr/> Contributor address; City; State; Zip Code Katy, TX 77494-3917	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Williams Brothers Construction
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanier, Odysseus <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) McConnell Jones Lanier & Murphy, LLP
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanig, Sakina <hr/> Contributor address; City; State; Zip Code Houston, TX 77082-2923	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Person		Employer (See Instructions) Self-employed
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanig, Sakina <hr/> Contributor address; City; State; Zip Code Houston, TX 77082-2923	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Legislative Consultant		Employer (See Instructions) Self-employed

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/104 Rpt: 58/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/25/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapin, Robert <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-3621	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Lapin & Landa LLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laviage, Dennis <hr/> Contributor address; City; State; Zip Code Houston, TX 77206-0847	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) C&D Scrap Metal
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawal, Kase <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-3019	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) CAMAC Energy Inc.
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, C.C. <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) STOA Architects, Inc.
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Wea <hr/> Contributor address; City; State; Zip Code Houston, TX 77072-2608	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) President/CEO		Employer (See Instructions) Southern News Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/104 Rpt: 59/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Legal Group Services DBA Cheryl Irvin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-1741	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Arthur <hr/> Contributor address; City; State; Zip Code Houston, TX 77091	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Rhonda <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Sherman <hr/> Contributor address; City; State; Zip Code Edmond, OK 73034-6762	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, III, Sherman <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-1643	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Lewis Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/104 Rpt: 60/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/26/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebling, Avram <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095-4072	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liem, Richard <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2609	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Landry's Restaurants Inc.
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Janet <hr/> Contributor address; City; State; Zip Code La Porte, TX 77572-1032	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Janet <hr/> Contributor address; City; State; Zip Code La Porte, TX 77572-1032	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201-2748	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/104 Rpt: 61/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00117861) Locke Lord LLP PAC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77002-2914	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lohman, June <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-5621	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Community volunteer		Employer (See Instructions) Retired from Comcast
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longhofer, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-3240	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Vinson & Elkins LLP
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovell, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-3529	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockett, Wayne <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459-1668	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President & CEO		Employer (See Instructions) Branwar

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/104 Rpt: 62/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Vilma	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Austin, TX 78746-7234	
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) HillCo
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MacFarlane, Andrew	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78729-3506	
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Data Foundry, Inc
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maknoja, Jaher	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Spring, TX 77389-4855	
Principal occupation / Job title (See Instructions) Managing Member		Employer (See Instructions) 4 Super Star LLC
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manley, James	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Baytown, TX 77520-3758	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) James Manley, PC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mannchen, Brandt	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77096-1247	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/104 Rpt: 63/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Lester <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-3046	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) INVESTMENT MANAGER,PRESIDENT		9 Employer (See Instructions) LCM PARTNERS, LTD.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77339	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Houston
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Grant <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115-2526	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Storefront Political Media
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Grant <hr/> Contributor address; City; State; Zip Code San Francisco, CA 94115-2526	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Storefront Political Media
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Roman <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-6418	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President / CEO		Employer (See Instructions) Texas Taxi Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/104 Rpt: 64/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Isaac <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77091-2954	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Senior Pastor		9 Employer (See Instructions) God's Grace Community Church
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McAlpin, Kenneth <hr/> Contributor address; City; State; Zip Code Hitchcock, TX 77563-2504	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Xtralight
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCall, Brian <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-2406	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Texas State University System
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Demetrius <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2957	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Greenberg Traurig LLP
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDermott, Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252-2730	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) McDermott Place

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/104 Rpt: 65/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McFrazier, Michael	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77084-1265	
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) Prairie View A&M University
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarry, Mignon	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Austin, TX 78701-1724	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Mignon McGarry & Associates
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarthy, JoAnn	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77037-1441	
Principal occupation / Job title (See Instructions) Case Coordinator		Employer (See Instructions) Excel E Care
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGoldrick, Joseph	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77059-3718	
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) CenterPoint Energy
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, Gary	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77004-7678	
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/104 Rpt: 66/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKamie, Reginald <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055-6950	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) Law Office of Reginald E. McKamie, Sr., P.C.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Marquis <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-5263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) MIS Specialist		Employer (See Instructions) Total Premier Services Nigeria, Ltd.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMillian, Monaca <hr/> Contributor address; City; State; Zip Code Spring, TX 77379-5263	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Finance Manager		Employer (See Instructions) Total Premier Services Nigeria, Ltd.
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McWilliams, Dean <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-1851	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) McWilliams Governmental Affairs Consultants
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meek, Clara <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-6602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired Attorney		Employer (See Instructions) Unemployed

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/104 Rpt: 67/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meek, Clara <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-6602	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired Attorney		9 Employer (See Instructions) Unemployed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mercado, Kenneth <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-4320	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Electric Operations		Employer (See Instructions) CenterPoint Energy
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Milam, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-3469	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Milam and Company Painting, Inc.
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Dorothy <hr/> Contributor address; City; State; Zip Code Houston, TX 77088-6703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Office manager		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, James <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-7019	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Homebuilder		Employer (See Instructions) McGuyer Homebuilders

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/104 Rpt: 68/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, William <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Lobbyist		9 Employer (See Instructions) HillCo Partners
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mills, Tenisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-3492	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Credentialing		Employer (See Instructions) USPH
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minchberg, David <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-4717	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Flagship Properties Corporation
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moehlman, James <hr/> Contributor address; City; State; Zip Code Katy, TX 77494-1137	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) LJA Engineering, Inc.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moeller, Michael <hr/> Contributor address; City; State; Zip Code Wimberley, TX 78676-7312	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/104 Rpt: 69/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Laura <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77005-3725	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Director-Dietetic Internship Program		9 Employer (See Instructions) UT School of Public Health-Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Tammie <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77325-5743	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosley, Gary <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-2614	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Creek Group
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mullin, Michele <hr/> Contributor address; City; State; Zip Code Houston, TX 77054-2531	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Havins & Associates, PC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Sharon <hr/> Contributor address; City; State; Zip Code Houston, TX 77063-1305	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Management Consultant		Employer (See Instructions) McConnell Jones Lanier & MurphyLLP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/104 Rpt: 70/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Sharon	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Houston, TX 77063-1305		
8 Principal occupation / Job title (See Instructions) Management Consultant		9 Employer (See Instructions) McConnell Jones Lanier & MurphyLLP
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myres, Albert	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code Houston, TX 77002-6336		
Principal occupation / Job title (See Instructions) Group Managing Partner		Employer (See Instructions) OCTCET Inc
Date 06/30/2015	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00366559) NRG Energy Inc Political Action Committee (NRG PAC)	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Princeton, NJ 08540-6213		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nagesh & Carter, PLLC	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code Houston, TX 77040-5239		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neelley, Melissa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77081-6624		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/104 Rpt: 71/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noel, J. Tod <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027-4705	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Noel Furniture Design Center
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norden, Wayne <hr/> Contributor address; City; State; Zip Code Houston, TX 77088-4418	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Community Activist		Employer (See Instructions) Near Northwest District
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noyes, Tammy <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-4913	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) J. Simmons Group
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Elaine <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-2781	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) RETIRED
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivier, Raquel <hr/> Contributor address; City; State; Zip Code Dallas, TX 75207-3389	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Olivier, Inc.

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Sharon	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459-4538	
8 Principal occupation / Job title (See Instructions) VP community Relations		9 Employer (See Instructions) Retired
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Wallace	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Hockley, TX 77447-0567	
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Houston Fire Department
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pandya, Pulin	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Principal occupation / Job title (See Instructions) Urologist		Employer (See Instructions) Houston Urology Partners
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pappas, Dean	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Houston, TX 77024-6827	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Pappas & Suchma, PC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Alicia	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77028-3231	
Principal occupation / Job title (See Instructions) NYPD		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/104 Rpt: 73/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Rev. Joseph & LaVerne <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78731-3658	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Pastor		9 Employer (See Instructions) David Chapel Baptist Church
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Harsad <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-6305	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Gastroenterologist		Employer (See Instructions) GI Specialists of Houston
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Jayantilal <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498-5070	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Jai Ambay, Inc.
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Nilkanth <hr/> Contributor address; City; State; Zip Code Houston, TX 77093-7510	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Medical Supplies		Employer (See Instructions) Self
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patman, Carrin <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-2770	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Bracewell & Giuliani LLP

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/104 Rpt: 74/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peoples, Lisa <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-6513	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Econ Development Specialist		9 Employer (See Instructions) HUD
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Jana <hr/> Contributor address; City; State; Zip Code Austin, TX 78738-5379	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Self
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Brenda <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-7604	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) CPA/ Tax Director		Employer (See Instructions) Enterprise Products
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitcock, Jr., James <hr/> Contributor address; City; State; Zip Code Houston, TX 77096-5302	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Chairman of the Board/CEO		Employer (See Instructions) Williams Brothers Construction Company
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitre, Ann <hr/> Contributor address; City; State; Zip Code Houston, TX 77067-3782	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Help Desk Analyst		Employer (See Instructions) NRG Energy

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/104 Rpt: 75/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/27/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, LaToya <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459-6713	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Self-employed		9 Employer (See Instructions) Self-employed
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumbers Local #68 PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77249-8746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poindexter, Portia <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479-9720	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poisot, Maria <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-1038	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sr. Risk Practitioner		Employer (See Instructions) Shell
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polavarapu, Rao <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-2501	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) STEMACO International Inc

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polavarapu, Vijaya	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77042-2038	
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions) None
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poole, Carrie	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Spring, TX 77379-7508	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Professional Career Training Institute of Technology
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Carol	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77018-4520	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potter, Jacqueline	Amount of Contribution (\$) \$1,350.00
	Contributor address; City; State; Zip Code Humble, TX 77346-1560	
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Retired
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powell, Jim	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77098-3415	
Principal occupation / Job title (See Instructions) Architecture		Employer (See Instructions) Merriman Holt Powell Architects

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/26/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Charles <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77095-2617	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Project Director		9 Employer (See Instructions) Technip USA, Inc.
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purser and Hollowell, Ray and Doug <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-1003	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Vice President External Affairs, Marketing		Employer (See Instructions) Comcast, Motiva Enterprises
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RPS Klotz Associates Inc. PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77079-3098	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radnofsky, Barbara <hr/> Contributor address; City; State; Zip Code Houston, TX 77024-5602	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney mediator		Employer (See Instructions) Self : Barbara Radnofsky
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rae, Sean <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-7083	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Trammell Crow Residential

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/27/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rash, Jeanette <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77020-2030	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Fast Tow / Zone One Storage
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Richard Pena <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045-8952	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) State Representative		Employer (See Instructions) State of Texas
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rayon, Priscilla <hr/> Contributor address; City; State; Zip Code Huffman, TX 77336-4685	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reece, Verna <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-6107	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Administrative Assistant		Employer (See Instructions) Harris County Precinct 2
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reiser, Robert <hr/> Contributor address; City; State; Zip Code Cleveland, OH 44114-1888	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Sr. Vice President		Employer (See Instructions) SP+

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ricchiuto, John <hr/> 6 Contributor address; City; State; Zip Code Twinsburg, OH 44087-2640	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Executive Vice President		9 Employer (See Instructions) SP+
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Michael <hr/> Contributor address; City; State; Zip Code Livingston, TX 77351-3768	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) firefighter		Employer (See Instructions) Retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richie, Carl <hr/> Contributor address; City; State; Zip Code Austin, TX 78750-3416	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Kelly <hr/> Contributor address; City; State; Zip Code Richmond, TX 77407-2724	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Chief Administration Officer of Hospitality and Gaming		Employer (See Instructions) Landry's Restaurants Inc.
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Stevie <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) The Miracle Corp.

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Stevie	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77088	
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) The Miracle Corp.
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, David	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77024-7267	
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) ARM
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Diane	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Texas City, TX 77591	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) HR Hover Company
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, John	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77056-2818	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) JPR Construction
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Randy	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77070-2469	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Williams Brothers Construction

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/104 Rpt: 81/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, William <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77210	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Chief Financial Officer		9 Employer (See Instructions) Centerpoint Energy
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Lewis & Associates <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2157	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenberg, Ilia <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roth & Associates Law Group Inc., PLLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77006-5878	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rouse, Erica <hr/> Contributor address; City; State; Zip Code Houston, TX 77089-2272	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Sales		Cenage Learning

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowl, Doris <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-6503	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Retired Teacher		9 Employer (See Instructions) Retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Frank <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-5008	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Communications Strategist		Employer (See Instructions) Santos Alliances
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sarah, Goodfriend <hr/> Contributor address; City; State; Zip Code Austin, TX 78703-2404	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxenian, Stephen <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-4815	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Saxenian Family Partnership Ltd
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saxenian, Stephen <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-4815	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Saxenian Family Partnership Ltd

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scheinthal, Steven	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77081-6619		
8 Principal occupation / Job title (See Instructions) General Counsel		9 Employer (See Instructions) Landrys
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenke, Richard	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Houston, TX 77023-4003		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scherr, James and maxey	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code El Paso, TX 79901-1148		
Principal occupation / Job title (See Instructions) attorneys		Employer (See Instructions) scherr legate
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schulgen, Seth	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Houston, TX 77266-6428		
Principal occupation / Job title (See Instructions) Board Member		Employer (See Instructions) Williams Brothers Contruction
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seilheimer, Dan	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Bellaire, TX 77401-5117		
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) retired

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackelford, Ray <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-5846	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Shackelford & Assoc., L.L.C.
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackelford, Ray <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-4661	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Healthcare Account Manager		Employer (See Instructions) Grainger
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shackelford, Ray <hr/> Contributor address; City; State; Zip Code Houston, TX 77004-5846	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shackelford & Assoc., L.L.C.
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Ramesh <hr/> Contributor address; City; State; Zip Code Houston, TX 77083-4109	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shanklin, Paul <hr/> Contributor address; City; State; Zip Code Houston, TX 77291	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Baker Wotring LLP

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shrader, Marbella <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-4409	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Shrader Engineering
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sidiqi, Zahida <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77498-5046	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self-employed
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siff, Joe <hr/> Contributor address; City; State; Zip Code Houston, TX 77005-1645	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Access Strategies
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Christopher <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-5217	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) J. Simmons Group
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Janet <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-5217	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Sean <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77429-5217	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions) J. Simmons Group
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, Jr., James <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429-5217	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) J. Simmons Group, Inc.
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton, Gena <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-4309	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Assistant Dean		Employer (See Instructions) South Texas College of Law
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton, Orgena <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-4309	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Assistant Dean		Employer (See Instructions) South Texas College of Law
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sky-Eagle, Bryan <hr/> Contributor address; City; State; Zip Code Houston, TX 77065-4815	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) Houston Fire Department

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/25/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sky-Eagle, Bryan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77065-4815	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Firefighter		9 Employer (See Instructions) Houston Fire Department
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slovak, Trent <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5203	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KIT Professionals, Inc.
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Alton <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Dentist		Employer (See Instructions) Self employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Leslie <hr/> Contributor address; City; State; Zip Code Houston, TX 77288-0107	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Change Happens!

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/104 Rpt: 88/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Marquise <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77054	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) City of Houston
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77047-6730	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Tax Preparation		Employer (See Instructions) Elite Tax Services
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Prudence <hr/> Contributor address; City; State; Zip Code Houston, TX 77054-2020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) law		Employer (See Instructions) Texas Southern University
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Rudy <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-8900	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions) Self Employed
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Sherman <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478-1865	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) TAX EXAMINER		Employer (See Instructions) TEXAS WORKFORCE COMMISSION

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/104 Rpt: 89/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Summer	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Houston, TX 77009-6508		
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) DeGeurin Realty inc
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soliz, Joseph	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code Houston, TX 77063-3908		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Attorney
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon, Jimmie	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Miami, FL 33131-2668		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon, LaTricia	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Lilburn, GA 30047-2606		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) The Solomon Firm, LLC
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solomon, Vanessa	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Thompsons, TX 77481		
Principal occupation / Job title (See Instructions) nail stylist		Employer (See Instructions) self employed

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southern, Lisa	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Thompsons, TX 77481-0057	
8 Principal occupation / Job title (See Instructions) Program Coordinator		9 Employer (See Instructions) Thomas and Lewis and Associates, Inc.
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sowell, Donald	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Texon, TX 76932-0187	
Principal occupation / Job title (See Instructions) Construction, Real Estate		Employer (See Instructions) Don Sowell Interests, Inc
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sowell, Michael	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Waller, TX 77484-1879	
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) MWS Real Estate Services
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Melvin	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code Cypress, TX 77429-7282	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Civil Tech Engineering, Inc.
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinola, Lourdes	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Irving, TX 75038-6312	
Principal occupation / Job title (See Instructions) Physician Assistant		Employer (See Instructions) Irving Health Center

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stan Schlueter Consulting <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78768	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Standridge, Rebecca <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) State Rep. James R. Pitts Campaign Fund <hr/> Contributor address; City; State; Zip Code Waxahachie, TX 75168-0561	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77015-2737	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Real Estate Appraiser		Employer (See Instructions) Scott P Stephens
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Carl <hr/> Contributor address; City; State; Zip Code Houston, TX 77095-2754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strothers, Brucer <hr/> 6 Contributor address; City; State; Zip Code Stafford, TX 77477-5761	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) The Coca-Cola Company
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Switzer, Russell <hr/> Contributor address; City; State; Zip Code Houston, TX 77070	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Engineering Manager		Employer (See Instructions) Xtralight
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TX Friends of Time Warner Cable PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2468	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Jere <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-2921	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Jere <hr/> Contributor address; City; State; Zip Code Spring, TX 77373	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Frederick <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77489-3928	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Face2Face Media Group LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Kelley <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-3508	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Taylor Construction Management
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Raymond <hr/> Contributor address; City; State; Zip Code Houston, TX 77219-0198	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Industrial Electrician		Employer (See Instructions) NRG Energy
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Shawn <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479-3827	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Zaxby's Houston LLC
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Troi <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-3508	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Taylor Construction Management

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/104 Rpt: 94/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor III, William <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77021-1647	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Power generation		9 Employer (See Instructions) Calpine Corporation
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tervalon, Albert <hr/> Contributor address; City; State; Zip Code Houston, TX 77069-1426	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Good Leaders PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-6109	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Our Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78767-0426	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Strategy Group PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-2488	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/104 Rpt: 95/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Beverly Law Group, PLLC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-7675	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Gallagher Law Firm, LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-1127	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Jones Firm <hr/> Contributor address; City; State; Zip Code Austin, TX 78701-4055	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Parzivand Law Firm, PLLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-1044	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Neil <hr/> Contributor address; City; State; Zip Code Houston, TX 77010-3031	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Norton Rose Fulbright LLP

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Wretha	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Houston, TX 77047-4554	
8 Principal occupation / Job title (See Instructions) Union President		9 Employer (See Instructions) Houston Educational Support Personal Union Local 6315
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Charann	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Missouri City, TX 77459-5087	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Hill & Hill, PC
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillman, Jr., John	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toy, Robert	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Brentwood, TN 37027-8945	
Principal occupation / Job title (See Instructions) Sr. Vice President		Employer (See Instructions) SP+
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracy, Charles	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77005-2441	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Retired

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/104 Rpt: 97/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Jacqueline <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77044-5579	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner Haseman, Latrice <hr/> Contributor address; City; State; Zip Code Houston, TX 77071-2108	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self-employed
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyler-Dillard, Deborah <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-9557	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Community Outreach Director		Employer (See Instructions) Harris County Attorney's Office
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tyson, Hilary <hr/> Contributor address; City; State; Zip Code Murphy, TX 75094-4384	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Boyar & Miller, P.C.
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Usoro, Aniefiok <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77478-5460	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Usoro and Associates, PC

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valach, Christopher	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77008-3644	
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Valero
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valach, Kenneth	Amount of Contribution (\$) \$4,430.54
	Contributor address; City; State; Zip Code Houston, TX 77024-5006	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Trammell Crow Residential
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varma, Raj	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77057-7113	
Principal occupation / Job title (See Instructions) Lighting technology		Employer (See Instructions) IT Dimensions, Inc.
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vignaud, Laurie	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77054-6008	
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) Capital One
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viltz, Anna	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77071-3603	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Lamont <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77071-1323	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) ACCOUNTANT		9 Employer (See Instructions) RETIRED
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lisa <hr/> Contributor address; City; State; Zip Code Houston, TX 77021-1623	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ware, Larry <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77379	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Thomas Deon <hr/> Contributor address; City; State; Zip Code Houston, TX 77019-3908	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warshauer, Steven <hr/> Contributor address; City; State; Zip Code Highland Park, IL 60035-4036	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) SP+

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Karen <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77449-2911	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) First New Hope Bible Church
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watsom, Shirley <hr/> Contributor address; City; State; Zip Code Houston, TX 77068-2029	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) Retired
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77088-5501	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Park Ranger		Employer (See Instructions) City of Houston
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, David and Joan <hr/> Contributor address; City; State; Zip Code Houston, TX 77088-5501	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Evelyn Faye <hr/> Contributor address; City; State; Zip Code Houston, TX 77084-2283	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Anti-Corruption		Employer (See Instructions) HP

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2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Kimmy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77084	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Manager, HSE and Compliance		9 Employer (See Instructions) Triple Five Energy Resources, Inc.
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Ronald <hr/> Contributor address; City; State; Zip Code Spring, TX 77386-1893	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Firefighter		Employer (See Instructions) City of Houston
Date 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Teana <hr/> Contributor address; City; State; Zip Code Stafford, TX 77477-4094	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Principal Attorney		Employer (See Instructions) T.V. Watson Law PLLC
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Janice <hr/> Contributor address; City; State; Zip Code Houston, TX 77268-2363	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) HACS
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Damon <hr/> Contributor address; City; State; Zip Code Humble, TX 77346-1345	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) District Sales Representative		Employer (See Instructions) Ben E. Keith Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/104 Rpt: 102/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wedekind, Lawrence <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77346-1664	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) President and CEO		9 Employer (See Instructions) IntegraNet
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Elgin <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584-5900	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Orthodontist		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheat-Brown, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77088-8029	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) Harris Health System
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Jr., F.A. <hr/> Contributor address; City; State; Zip Code Houston, TX 77084-7547	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whiteing, Bridgette <hr/> Contributor address; City; State; Zip Code Houston, TX 77022	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Financial Secretary and Administrative Coordinator		Employer (See Instructions) Greater Mt Zion MBC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/104 Rpt: 103/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitlock, Gary <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382-2650	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Special Advisor, Business Unit Leadership		9 Employer (See Instructions) Centerpoint Energy
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitmire-Jenkins, Whitney <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-5032	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Consulting Services		Employer (See Instructions) Self employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Deloise <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459-7639	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) PHARMACIST		Employer (See Instructions) RETIRED
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiley, Joyce <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-4614	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Community Outreach		Employer (See Instructions) Lone Star College System
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkey, Timothy <hr/> Contributor address; City; State; Zip Code Humble, TX 77339-1251	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Fire Fighter		Employer (See Instructions) City of Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/104 Rpt: 104/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004-7813	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Chiropractor		9 Employer (See Instructions) Advanced Chiropractic /Self employed
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Patrice <hr/> Contributor address; City; State; Zip Code Gretna, LA 70056-3055	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Houston Area Community Services, Inc.
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Herschell <hr/> Contributor address; City; State; Zip Code Houston, TX 77025-2296	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) MHHS
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Welcome <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-5777	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Welcome Group
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sr., Welcome <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-5777	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Welcome Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/104 Rpt: 105/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Sr., Welcome <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057-5777	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) GSL Welcome Group
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witchet, Lennis <hr/> Contributor address; City; State; Zip Code Houston, TX 77066-4910	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Contract Negotiator		Employer (See Instructions) NetIQ Corporation
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-1996	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) podiatrist		Employer (See Instructions) self
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolf, Mathew <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-2716	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Pacific Strategic Investors
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Gerald <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Womack Development & Investment Realtors Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/104 Rpt: 106/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/29/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Clinton <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77024-7030	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Real Estate Developer		9 Employer (See Instructions) Skymark Development Co., Inc.
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods Law Firm, P.C. <hr/> Contributor address; City; State; Zip Code Houston, TX 77002-8842	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wotring, Earnest <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401-2812	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Connelly Baker Wotring Maston & Jackson
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Ashley <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77489-3077	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Public Relations Director		Employer (See Instructions) Elite Change, Inc.
Date 06/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yanamandala, Raviraj <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Geotest Engineering, Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/104 Rpt: 107/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/28/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yeoman, Carol <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77096-4032	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoe CPA LLC <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-2780	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yokubaitis, Ron <hr/> Contributor address; City; State; Zip Code Austin, TX 78746-6943	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Internet		Employer (See Instructions) Powerhouse mgmt.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoo, Diane <hr/> Contributor address; City; State; Zip Code Houston, TX 77279	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Entertainment professional		Employer (See Instructions) Self Employed
Date 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yoo, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77279-9195	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Owner/CEO		Employer (See Instructions) JDDA Group of Companies/HBS National Corp.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 108/229	
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/23/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Jose 7 Contributor address; City; State; Zip Code Houston, TX 77056	8 Amount of contribution (\$) \$719.40	9 In-kind contribution description Event refreshments <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Director of Business Development		11 Employer (FOR NON-JUDICIAL) (See instructions) BBVA Compass	
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 06/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Vivian Contributor address; City; State; Zip Code Houston, TX 77004	Amount of contribution (\$) \$1,631.78	In-kind contribution description Event venue and refreshments <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		Employer (FOR NON-JUDICIAL) (See instructions) Self Employed	
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)			
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landry's Seafood Restaurants, Inc. General PAC Contributor address; City; State; Zip Code Houston, TX 77027	Amount of contribution (\$) \$4,800.00	In-kind contribution description Event refreshments <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/3 Rpt: 109/229	
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/30/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDaniel, Demetrius	8 Amount of contribution (\$) \$1,322.78	9 In-kind contribution description Mailing & catering for event
	7 Contributor address; City; State; Zip Code Austin, TX 78701-2957		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney		11 Employer (FOR NON-JUDICIAL) (See instructions) Greenberg Traurig LLP	
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 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sky-Eagle, Bryan	Amount of contribution (\$) \$330.00	In-kind contribution description Office supplies & snacks for HQ
	Contributor address; City; State; Zip Code Houston, TX 77065-4815		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Firefighter		Employer (FOR NON-JUDICIAL) (See instructions) Houston Fire Department	
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)			
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valach, Jane (Mrs.)	Amount of contribution (\$) \$5,000.00	In-kind contribution description Catering for event
	Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Director		Employer (FOR NON-JUDICIAL) (See instructions) Valach Management Co. LLC	
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)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 110/229	
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/28/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valach, Kenneth	8 Amount of contribution (\$) \$569.46	9 In-kind contribution description Valet parking for event
	7 Contributor address; City; State; Zip Code Houston, TX 77024-5006		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) CEO		11 Employer (FOR NON-JUDICIAL) (See instructions) Trammell Crow Residential	
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 06/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zeidman, Fred	Amount of contribution (\$) \$925.32	In-kind contribution description Event refreshments
	Contributor address; City; State; Zip Code Houston, TX 77056-3820		
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) President		Employer (FOR NON-JUDICIAL) (See instructions) Corporate Strategies, Inc.	
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)			

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

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: 1/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 01/28/2015	5 Payee name AT&T Mobility	
6 Amount (\$) \$230.74	7 Payee address; City; State; Zip Code P.O. Box 537104 Atlanta, GA 30353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone and air card for candidate/officeholder
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/15/2015	Payee name AT&T Mobility	
Amount (\$) \$472.78	Payee address; City; State; Zip Code P.O. Box 537104 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone and air card for candidate/officeholder
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 04/23/2015	Payee name AT&T Mobility	
Amount (\$) \$235.00	Payee address; City; State; Zip Code P.O. Box 537104 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone and air card for candidate/officeholder
	9 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

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: 2/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/12/2015	5 Payee name AT&T Mobility	
6 Amount (\$) \$228.63	7 Payee address; City; State; Zip Code P.O. Box 537104 Atlanta, GA 30353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone and air card for candidate/officeholder
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 06/18/2015	Payee name AT&T Mobility	
Amount (\$) \$229.93	Payee address; City; State; Zip Code P.O. Box 537104 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone and air card for candidate/officeholder
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/19/2015	Payee name Acres Home Chamber for Business and Economic Development Inc.	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6112 Wheatley Street Houston, TX 77091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Sponsorship of Annual Awards Banquet
	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

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: 3/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/01/2015	5 Payee name Advantage Communication Consultants
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6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 131743 Houston, TX 77219
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media consulting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2015	Payee name Advantage Communication Consultants
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 131743 Houston, TX 77219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media consulting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2015	Payee name Advantage Communication Consultants
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 131743 Houston, TX 77219
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media consulting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 4/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/09/2015	5 Payee name African American News & Issues	
6 Amount (\$) \$1,755.00	7 Payee address; City; State; Zip Code 6130 Wheatley St. Houston, TX 77091	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Juneteenth ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2015	Payee name Allan Jamail/Jamail's Sales	
Amount (\$) \$773.07	Payee address; City; State; Zip Code 10710 Flaxman St. Houston, TX 77029	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 T-shirts for volunteers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Allan Jamail/Jamail's Sales	
Amount (\$) \$1,399.08	Payee address; City; State; Zip Code 10710 Flaxman St. Houston, TX 77029	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Women for Turner T-shirts
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/04/2015	5 Payee name Alonso, Arnaldo	
6 Amount (\$) \$923.50	7 Payee address; City; State; Zip Code 3719 Rey David Brownsville, TX 78521	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Alonso, Arnaldo	
Amount (\$) \$923.51	Payee address; City; State; Zip Code 3719 Rey David Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2015	Payee name Alonso, Arnaldo	
Amount (\$) \$477.23	Payee address; City; State; Zip Code 3719 Rey David Brownsville, TX 76521	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 6/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/04/2015	5 Payee name Apple	
6 Amount (\$) \$317.99	7 Payee address; City; State; Zip Code 1 Infinite Loop Cupertino, CA 95014	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Video editing software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2015	Payee name Aramark	
Amount (\$) \$4,563.83	Payee address; City; State; Zip Code 1800 Congress Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Campaign kick-off event refreshments
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2015	Payee name Aramark	
Amount (\$) \$649.50	Payee address; City; State; Zip Code 1800 Congress Ave. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Campaign kick-off event refreshments
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

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: 7/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/23/2015	5 Payee name Ayrshire Corp.	
6 Amount (\$) \$960.00	7 Payee address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office rent
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 03/09/2015	Payee name Ayrshire Corp.	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office rent
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 04/06/2015	Payee name Ayrshire Corp.	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office rent
	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

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: 8/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/26/2015	5 Payee name B. Miles Insurance Agency	
6 Amount (\$) \$419.65	7 Payee address; City; State; Zip Code 5302 Alameda Rd. Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Insurance for campaign kick-off event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2015	Payee name B. Miles Insurance Agency	
Amount (\$) \$1,164.52	Payee address; City; State; Zip Code 5302 Alameda Rd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2015	Payee name Bartz, Danielle	
Amount (\$) \$923.50	Payee address; City; State; Zip Code 2111 Welch St. #A207 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 9/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/05/2015	5 Payee name Beaver, Randi L.	
6 Amount (\$) \$1,035.96	7 Payee address; City; State; Zip Code 1122 Keatiche Rd. Keatiche, LA 71046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2015	Payee name Beaver, Randi L.	
Amount (\$) \$1,035.96	Payee address; City; State; Zip Code 1122 Keatiche Rd. Keatiche, LA 71046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Birkicht, Cassandra	
Amount (\$) \$1,271.86	Payee address; City; State; Zip Code 3433 W. Dallas St. Apt 1147 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Birkicht, Cassandra	
6 Amount (\$) \$1,271.85	7 Payee address; City; State; Zip Code 3433 W. Dallas St. Apt 1147 Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2015	Payee name Birkicht, Cassandra	
Amount (\$) \$1,380.64	Payee address; City; State; Zip Code 3433 W. Dallas St. Apt 1147 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2015	Payee name Bishop, Harper	
Amount (\$) \$923.50	Payee address; City; State; Zip Code 9940 Richmond Ave. #2104 Houston, TX 77042	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 11/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 01/16/2015	5 Payee name Black Heritage Society	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 1730 Jefferson St. Houston, TX 77003	
8 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 MLK Parade registration
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/14/2015	Payee name Blanquita's Mexican Restaurant	
Amount (\$) \$106.18	Payee address; City; State; Zip Code 10615 Market St. Jacinto City, TX 77029	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Breakfast for striking workers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2015	Payee name Bravo Key & Lock	
Amount (\$) \$194.85	Payee address; City; State; Zip Code 1756 Westheimer Rd. Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters keys and locks
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

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: 12/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Bravo Key & Lock	
6 Amount (\$) \$64.95	7 Payee address; City; State; Zip Code 1756 Westheimer Rd. Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Keys for campaign headquarters
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Brentwood Baptist Church	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 450409 Houston, TX 77245	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Commemorative luncheon table purchase
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2015	Payee name Brooks, Royce	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code 5032 Highland Meadow Dr. Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Policy consulting services
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/01/2015	5 Payee name Brooks, Royce	
6 Amount (\$) \$5,500.00	7 Payee address; City; State; Zip Code 5032 Highland Meadow Dr. Fort Worth, TX 76132	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Policy consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Brooks, Royce	
Amount (\$) \$5,500.00	Payee address; City; State; Zip Code 5032 Highland Meadow Dr. Fort Worth, TX 76132	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Policy consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Burns, Jacob	
Amount (\$) \$1,349.72	Payee address; City; State; Zip Code 802 N. 2nd Street Bellaire, TX 77401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Burns, Jacob	
6 Amount (\$) \$1,349.74	7 Payee address; City; State; Zip Code 802 N. 2nd Street Bellaire, TX 77401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2015	Payee name Burns, Jacob Robert	
Amount (\$) \$1,349.74	Payee address; City; State; Zip Code 802 N. 2nd St. Bellaire, TX 77401	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/20/2015	Payee name Carnell, Emanuel	
Amount (\$) \$589.59	Payee address; City; State; Zip Code 11106 Sageview Dr. Houston, TX 77089	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 15/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/27/2015	5 Payee name Caughman, Carla	
6 Amount (\$) \$969.66	7 Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2015	Payee name Caughman, Carla	
Amount (\$) \$969.66	Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2015	Payee name Caughman, Carla	
Amount (\$) \$969.66	Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/07/2015	5 Payee name Caughman, Carla	
6 Amount (\$) \$969.67	7 Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2015	Payee name Caughman, Carla	
Amount (\$) \$969.66	Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Caughman, Carla	
Amount (\$) \$969.66	Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Caughman, Carla	
6 Amount (\$) \$969.66	7 Payee address; City; State; Zip Code 7518 Rolling Fork Lane Houston, TX 77040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Chandler, Suzanne	
Amount (\$) \$1,870.09	Payee address; City; State; Zip Code 3433 West Dallas Street Apt 1147 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Chandler, Suzanne	
Amount (\$) \$1,870.09	Payee address; City; State; Zip Code 3433 West Dallas Street Apt 1147 Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 18/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/08/2015	5 Payee name Chandler, Suzy	
6 Amount (\$) \$2,582.17	7 Payee address; City; State; Zip Code 1879 Alexandria St. Los Angeles, CA 90028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2015	Payee name Chandler, Suzy	
Amount (\$) \$1,870.10	Payee address; City; State; Zip Code 1879 Alexandria St. Los Angeles, CA 90028	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Charter Furniture Rental	
Amount (\$) \$421.46	Payee address; City; State; Zip Code 15101 Midway Road Addison, TX 75001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Furniture rental for Legislator's Austin apartment
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/27/2015	5 Payee name Charter Furniture Rental	
6 Amount (\$) \$367.94	7 Payee address; City; State; Zip Code 15101 Midway Road Addison, TX 75001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Furniture rental for Legislator's Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2015	Payee name City of Austin	
Amount (\$) \$97.44	Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities - Legislator's Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/25/2015	Payee name City of Austin	
Amount (\$) \$57.86	Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities - Legislator's Austin apartment
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

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: 20/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/30/2015	5 Payee name City of Austin	
6 Amount (\$) \$75.49	7 Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities - Legislator's Austin apartment
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/01/2015	Payee name City of Austin	
Amount (\$) \$49.14	Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities - Legislator's Austin apartment
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 05/27/2015	Payee name City of Austin	
Amount (\$) \$50.83	Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities - Legislator's Austin apartment
	9 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

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: 21/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 06/26/2015	5 Payee name City of Austin
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6 Amount (\$) \$56.70	7 Payee address; City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Utilities - Legislator's Austin apartment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/26/2015	Payee name City of Houston
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Amount (\$) \$55.04	Payee address; City; State; Zip Code PO Box 1562 Houston, TX 77256
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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 City permit
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/03/2015	Payee name City of Houston
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Amount (\$) \$12.50	Payee address; City; State; Zip Code Planning & Development Dept.-GIS Division P.O. Box 1562 Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Shapefile for precinct maps
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 22/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/17/2015	5 Payee name City of Houston	
6 Amount (\$) \$37.50	7 Payee address; City; State; Zip Code Planning & Development Dept. - GIS Division P.O. Box 1562 Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Precinct maps
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2015	Payee name City of Houston - HHS Dept	
Amount (\$) \$145.64	Payee address; City; State; Zip Code P.O. Box 1562 Houston, TX 77002	
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 Rental of Acres Homes Multi-Service Center
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2015	Payee name Comcast	
Amount (\$) \$348.72	Payee address; City; State; Zip Code P.O.Box 660618 Dallas, TX 75266-0618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters cable service
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

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: 23/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/11/2015	5 Payee name Comcast	
6 Amount (\$) \$131.88	7 Payee address; City; State; Zip Code P.O.Box 660618 Dallas, TX 75266-0618	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cable and internet access - Legislator's Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Corjulo, Michael	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4635 Wild Indigo Dr. Building 30 Unit 519 Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Corjulo, Michael	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 4635 Wild Indigo Dr. Building 30 Unit 519 Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
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

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: 24/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/21/2015	5 Payee name Corjulo, Michael	
6 Amount (\$) \$2,125.90	7 Payee address; City; State; Zip Code 4635 Wild Indigo Dr. Building 30 Unit 519 Houston, TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Corjulo, Michael	
Amount (\$) \$2,125.89	Payee address; City; State; Zip Code 4635 Wild Indigo Dr. Building 30 Unit 519 Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Corjulo, Michael	
Amount (\$) \$2,125.90	Payee address; City; State; Zip Code 4635 Wild Indigo Dr. Building 30 Unit 519 Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 25/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/11/2015	5 Payee name Corjulo, Michael	
6 Amount (\$) \$3,050.40	7 Payee address; City; State; Zip Code 4635 Wild Indigo Dr. Building 30 Unit 519 Houston, TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/16/2015	Payee name Cricket Wireless	
Amount (\$) \$360.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/10/2015	Payee name Cricket Wireless	
Amount (\$) \$443.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
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

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: 26/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/14/2015	5 Payee name Cricket Wireless	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/12/2015	Payee name Cricket Wireless	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/13/2015	Payee name Cricket Wireless	
Amount (\$) \$105.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
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

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: 27/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/26/2015	5 Payee name Cricket Wireless	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/10/2015	Payee name Cricket Wireless	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2015	Payee name Cricket Wireless	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
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

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: 28/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/22/2015	5 Payee name Cricket Wireless	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/22/2015	Payee name Cricket Wireless	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/22/2015	Payee name Cricket Wireless	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2533 Southmore Blvd. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phones for campaign field organizers
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

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: 29/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/11/2015	5 Payee name Dennis, Shekira	
6 Amount (\$) \$1,100.00	7 Payee address; City; State; Zip Code 5825 Gulfton Rd. Houston, TX 77081	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent outreach services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Dennis, Shekira	
Amount (\$) \$1,100.00	Payee address; City; State; Zip Code 5825 Gulfton Rd. Houston, TX 77081	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent outreach services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2015	Payee name Dukes, Meaghan	
Amount (\$) \$514.69	Payee address; City; State; Zip Code 6102 Winsom Ln. Apt. 136 Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 30/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/20/2015	5 Payee name Dukes, Meaghan	
6 Amount (\$) \$969.66	7 Payee address; City; State; Zip Code 6102 Winsom Ln. Apt. 136 Houston, TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2015	Payee name Dupree II, Lawrence Lee	
Amount (\$) \$204.00	Payee address; City; State; Zip Code 5238 Canterway Dr. Houston, TX 77048	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constituent outreach services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/05/2015	Payee name Environcon Termite & Pest Control	
Amount (\$) \$162.38	Payee address; City; State; Zip Code 23306 Roberts Cemetery Rd. Hockley, TX 77447	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Exterminator for campaign headquarters
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 31/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/25/2015	5 Payee name FBO Dwight Bazile	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 4919 Reed Rd. Houston, TX 77033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Family assistance donation for HFD firefighter killed in line of duty
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/09/2015	Payee name Fairbank, Maslin, Maulin, Metz & Assoc.	
Amount (\$) \$26,530.00	Payee address; City; State; Zip Code 1999 Harrison St. Suite 2020 Oakland, CA 94612-3598	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling 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 Voter survey
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2015	Payee name Fast Frame Houston	
Amount (\$) \$238.98	Payee address; City; State; Zip Code 6535 Woodway Dr. Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Frame article for state office
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

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: 32/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/27/2015	5 Payee name First Class Tours	
6 Amount (\$) \$547.50	7 Payee address; City; State; Zip Code 12703 Eastex Freeway Houston, TX 77039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Bus for Seniors to attend campaign kick-off
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/08/2015	Payee name Fort Bend County Ministers Coalition	
Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 1628 Richmond, TX 77406	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Sponsorship and table for event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2015	Payee name Forward Times	
Amount (\$) \$1,060.00	Payee address; City; State; Zip Code 4411 Alameda Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Juneteenth ads
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 33/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/17/2015	5 Payee name Freestone Communications	
6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code P.O. Box 8943 St Louis, MO 63101	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Autodialer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/19/2015	Payee name Frontier Airlines	
Amount (\$) \$342.50	Payee address; City; State; Zip Code 7001 Tower Road Denver, CO 80249	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight for Ben Tyson to interview in Houston
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2015	Payee name Gay & Lesbian Victory Fund	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 1133 15th St. NW Suite 350 Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Donation for event tickets
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

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: 34/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/20/2015	5 Payee name Goldberg, Reid	
6 Amount (\$) \$923.50	7 Payee address; City; State; Zip Code 5127 Jackson St. Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2015	Payee name Goode Co.	
Amount (\$) \$201.78	Payee address; City; State; Zip Code 5109 Kirby Drive Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Legislative Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2015	Payee name Greater Houston Partnership	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1200 Smith Suite 700 Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 tickets
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

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: 35/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/23/2015	5 Payee name Greater Houston Partnership	
6 Amount (\$) \$85.00	7 Payee address; City; State; Zip Code 1200 Smith Suite 700 Houston, TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 State of the City Address luncheon ticket
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Green Mountain Energy	
Amount (\$) \$528.99	Payee address; City; State; Zip Code Dept 1233 P.O Box 121233 Dallas, TX 78312-1233	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters electricity
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/02/2015	Payee name Gutierrez, Enrique	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 9201 Friendly Rd. Houston, TX 77093	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
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

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: 36/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 06/05/2015	5 Payee name Gutierrez, Enrique
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6 Amount (\$) \$1,113.78	7 Payee address; City; State; Zip Code 9201 Friendly Rd. Houston, TX 77093
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/18/2015	Payee name Gutierrez, Enrique
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Amount (\$) \$1,400.64	Payee address; City; State; Zip Code 9201 Friendly Rd. Houston, TX 77093
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/17/2015	Payee name HEB
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Amount (\$) \$23.57	Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Snacks for legislative office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 37/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/13/2015	5 Payee name HEB	
6 Amount (\$) \$39.73	7 Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Staff birthday celebration supplies (cake, beverages)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2015	Payee name HEB	
Amount (\$) \$27.71	Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Snacks for Capitol office
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/15/2015	Payee name HEB	
Amount (\$) \$13.20	Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Snacks for Capitol office
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

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: 38/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/01/2015	5 Payee name HEB	
6 Amount (\$) \$30.51	7 Payee address; City; State; Zip Code 2400 S. Congress Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Snacks for Capitol office
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name HEB	
Amount (\$) \$11.32	Payee address; City; State; Zip Code 14540 Memorial Drive Houston, TX 77079	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign water and pens
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2015	Payee name HEB Grocery Company, LP	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code P.O. Box 839955 San Antonio, TX 78283-3955	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters deposit
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

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: 39/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/30/2015	5 Payee name HEB Grocery Company, LP
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6 Amount (\$) \$12,000.00	7 Payee address; City; State; Zip Code P.O. Box 839955 San Antonio, TX 78283-3955
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters Rent
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2015	Payee name HEB Grocery Company, LP
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Amount (\$) \$12,000.00	Payee address; City; State; Zip Code P.O. Box 839955 San Antonio, TX 78283-3955
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign headquarters Rent
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/19/2015	Payee name HOUEquality
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Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 66693 Houston, TX 77266
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Sponsorship for Power Summit
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 40/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/03/2015	5 Payee name Harland Clarke Corp.	
6 Amount (\$) \$198.92	7 Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio, TX 78256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign checks
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2015	Payee name Harris County Democratic Party	
Amount (\$) \$120.00	Payee address; City; State; Zip Code 1445 N. Loop West Houston, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Sustaining membership dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2015	Payee name Harris County Democratic Party	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 1445 N. Loop West Houston, TX 77008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Living Legends event sponsorship
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

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: 41/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/04/2015	5 Payee name Harry's
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6 Amount (\$) \$387.99	7 Payee address; City; State; Zip Code 318 Tuam St. Houston, TX 77006
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Campaign Meeting
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/15/2015	Payee name House Democratic Caucus
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Caucus membership donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/24/2015	Payee name Houston Astros Baseball Club
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Amount (\$) \$3,464.00	Payee address; City; State; Zip Code 501 Crawford St. Houston, TX 77002
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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 Campaign kick-off event room rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 42/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/25/2015	5 Payee name Houston Astros Baseball Club	
6 Amount (\$) \$135.31	7 Payee address; City; State; Zip Code 501 Crawford St. Houston, TX 77002	
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 Insurance coverage for kick-off event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2015	Payee name Houston Black Real Estate Association	
Amount (\$) \$120.00	Payee address; City; State; Zip Code 11303 Chimney Rock Suite 110 Houston, TX 77035	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Tickets to 66th annual Awards & Installation Gala
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/09/2015	Payee name Houston Defender	
Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 12401 S. Post Oak Suite 223 Houston, TX 77045	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Juneteenth ads
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

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: 43/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 03/19/2015	5 Payee name Houston GLBT Political Caucus
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6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266-6664
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Spring Fling Sponsorship
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/22/2015	Payee name Houston GLBT Political Caucus
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Amount (\$) \$280.00	Payee address; City; State; Zip Code P.O. Box 66664 Houston, TX 77266-6664
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Membership dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/22/2015	Payee name Houston ISD Asian Advisory Committee
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 4400 W. 18th St. Houston, TX 77092
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Community table donation
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 44/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/09/2015	5 Payee name Houston Style Magazine	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 14035 Houston, TX 77221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Juneteenth ads
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2015	Payee name Human Rights Campaign	
Amount (\$) \$264.50	Payee address; City; State; Zip Code 1435 Lamonte Lane Houston, TX 77018	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 18th Annual Houston Gala tickets
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/24/2015	Payee name Jason's Deli	
Amount (\$) \$8.64	Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Legislative Meeting
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

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: 45/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/15/2015	5 Payee name Jason's Deli	
6 Amount (\$) \$8.64	7 Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Legislative Meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Jason's Deli	
Amount (\$) \$584.98	Payee address; City; State; Zip Code 1200 Smith St. Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Food for Seniors
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2015	Payee name Jason's Deli	
Amount (\$) \$5.40	Payee address; City; State; Zip Code 1000 E. 41st St. Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Legislative Meeting
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

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: 46/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/11/2015	5 Payee name Jewish Family Services	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 4131 S. Braeswood Blvd. Houston, TX 77025	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Donation for Meyerland flood relief
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2015	Payee name Johnson, Antron	
Amount (\$) \$213.10	Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2015	Payee name Johnson, Antron	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 47/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/23/2015	5 Payee name Johnson, Antron
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6 Amount (\$) \$946.58	7 Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/30/2015	Payee name Johnson, Antron
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Amount (\$) \$969.66	Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/07/2015	Payee name Johnson, Antron
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Amount (\$) \$946.59	Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 48/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/21/2015	5 Payee name Johnson, Antron	
6 Amount (\$) \$946.58	7 Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Johnson, Antron	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Johnson, Antron	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 5950 Antoine Drive Apt. 2007 Houston, TX 77091	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 49/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 06/19/2015	5 Payee name Jones, Ray
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P.O. Box 11071 Houston, TX 77016
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Community outreach services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/19/2015	Payee name KPFT
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Amount (\$) \$408.98	Payee address; City; State; Zip Code 419 Lovett Houston, TX 77006
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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 Ray Hill Comedy Roast tickets
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/23/2015	Payee name Kinder Institute
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 6100 Main St Houston, TX 77005
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Kinder Institute luncheon ticket
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 50/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/22/2015	5 Payee name LULAC District 8	
6 Amount (\$) \$175.00	7 Payee address; City; State; Zip Code P.O. Box 8620 Houston, TX 77249	
8 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 Parade entry fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2015	Payee name LeFebvre, Andrew	
Amount (\$) \$609.71	Payee address; City; State; Zip Code 2611 Silverado Trail Sherman, TX 75072	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/22/2015	Payee name LeFebvre, Andrew	
Amount (\$) \$969.66	Payee address; City; State; Zip Code 2611 Silverado Trail Sherman, TX 75072	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 51/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 06/04/2015	5 Payee name Lefebvre, Andrew
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6 Amount (\$) \$969.66	7 Payee address; City; State; Zip Code 2611 Silverado Trail Sherman, TX 75072
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/18/2015	Payee name Lefebvre, Andrew
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Amount (\$) \$969.66	Payee address; City; State; Zip Code 2611 Silverado Trail Sherman, TX 75072
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/22/2015	Payee name Legislative Study Group
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Amount (\$) \$600.00	Payee address; City; State; Zip Code P.O. Box 12943 Capitol Station Austin, TX 78711-2943
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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 Membership dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 52/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 01/15/2015	5 Payee name Lincoln Automotive Financial Services	
6 Amount (\$) \$691.53	7 Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/06/2015	Payee name Lincoln Automotive Financial Services	
Amount (\$) \$691.53	Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2015	Payee name Lincoln Automotive Financial Services	
Amount (\$) \$691.53	Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
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

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: 53/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/20/2015	5 Payee name Lincoln Automotive Financial Services	
6 Amount (\$) \$691.53	7 Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2015	Payee name Lincoln Automotive Financial Services	
Amount (\$) \$691.53	Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2015	Payee name Lincoln Automotive Financial Services	
Amount (\$) \$691.53	Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
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

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: 54/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 06/05/2015	5 Payee name Lincoln Automotive Financial Services
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6 Amount (\$) \$691.53	7 Payee address; City; State; Zip Code P.O. Box 542000 Omaha, NE 68154-8000
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Auto lease for campaign and legislative use
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/02/2015	Payee name Locke Lord LLP
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Amount (\$) \$2,550.00	Payee address; City; State; Zip Code P.O. Box 301170 Dallas, TX 75303-1170
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal consultation fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/06/2015	Payee name Memorial Hermann Health Insurance
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Amount (\$) \$968.80	Payee address; City; State; Zip Code 7737 Southwest Freeway #C-97 Houston, TX 77074
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff health insurance
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 55/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/29/2015	5 Payee name Memorial Hermann Health Insurance	
6 Amount (\$) \$30.70	7 Payee address; City; State; Zip Code 7737 Southwest Freeway #C-97 Houston, TX 77074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff health insurance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/29/2015	Payee name Memorial Hermann Health Insurance	
Amount (\$) \$1,771.47	Payee address; City; State; Zip Code 7737 Southwest Freeway #C-97 Houston, TX 77074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff health insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2015	Payee name Memorial Hermann Health Insurance	
Amount (\$) \$2,558.79	Payee address; City; State; Zip Code 7737 Southwest Freeway #C-97 Houston, TX 77074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff health insurance
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

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: 56/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 03/19/2015	5 Payee name Memorial Hermann Health Insurance
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6 Amount (\$) \$968.80	7 Payee address; City; State; Zip Code 7737 Southwest Freeway #C-97 Houston, TX 77074
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff health insurance
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/22/2015	Payee name NGP VAN, Inc.
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Amount (\$) \$960.00	Payee address; City; State; Zip Code 1101 15th Street NW Suite 500 Washington, DC 20005
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Database software lease
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/30/2015	Payee name NGP VAN, Inc.
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Amount (\$) \$960.00	Payee address; City; State; Zip Code 1101 15th Street NW Suite 500 Washington, DC 20005
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Database software lease
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 57/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/26/2015	5 Payee name NGP VAN, Inc.	
6 Amount (\$) \$960.00	7 Payee address; City; State; Zip Code 1101 15th Street NW Suite 500 Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Database software lease
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2015	Payee name National Office Liquidators	
Amount (\$) \$622.98	Payee address; City; State; Zip Code 7700 N. Freeway Houston, TX 77037	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Tables and for campaign headquarters
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2015	Payee name New Bethel MBC	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 7731 Schneider St. Houston, TX 77093	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Pastor's anniversary donation
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

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: 58/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/03/2015	5 Payee name Office Depot	
6 Amount (\$) \$16.13	7 Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2015	Payee name Office Depot	
Amount (\$) \$695.20	Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2015	Payee name Office Depot	
Amount (\$) \$253.27	Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
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

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: 59/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/28/2015	5 Payee name Office Depot	
6 Amount (\$) \$62.19	7 Payee address; City; State; Zip Code 3443 Kirby Drive Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Office Depot	
Amount (\$) \$212.16	Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Office Depot	
Amount (\$) \$212.16	Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
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

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: 60/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/04/2015	5 Payee name Office Depot	
6 Amount (\$) \$476.52	7 Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Office Depot	
Amount (\$) \$48.60	Payee address; City; State; Zip Code 3443 Kirby Drive Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/19/2015	Payee name Office Depot	
Amount (\$) \$228.44	Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign office supplies
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

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: 61/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/20/2015	5 Payee name Oliver, Emma	
6 Amount (\$) \$946.58	7 Payee address; City; State; Zip Code 10314 Five Oaks Lane Missouri City, TX 77459	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2015	Payee name Pappadeauxs	
Amount (\$) \$12.42	Payee address; City; State; Zip Code 6319 I-35 Austin, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Legislative Meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/19/2015	Payee name Pappadeauxs	
Amount (\$) \$112.28	Payee address; City; State; Zip Code 2410 Richmond Ave Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Legislative Meeting
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 62/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/08/2015	5 Payee name Park Plaza Hospital	
6 Amount (\$) \$450.00	7 Payee address; City; State; Zip Code P.O. Box 849988 Dallas, TX 75284	
8 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 Check up for injured field worker
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/17/2015	Payee name Pharms, Cynthia	
Amount (\$) \$1,100.00	Payee address; City; State; Zip Code 4700 Wenda, # 236 Houston, TX 77033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Community outreach services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/22/2015	Payee name Pharms Helping Arms Foundation	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 4700 Wenda Suite 236 Houston, TX 77033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Sponsorship donation for human services charity
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 63/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/30/2015	5 Payee name Photo Rental Source	
6 Amount (\$) \$169.95	7 Payee address; City; State; Zip Code 8584 Katy Freeways Suite 322 Houston, TX 77024	
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 Film Equipment Rental
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Pressley, Nicholas	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2015	Payee name Pressley, Nicholas	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
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

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: 64/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 05/01/2015	5 Payee name Pressley, Nicholas
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/12/2015	Payee name Pressley, Nicholas
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Amount (\$) \$880.41	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/26/2015	Payee name Pressley, Nicholas
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Amount (\$) \$1,659.63	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 65/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/09/2015	5 Payee name Pressley, Nicholas
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6 Amount (\$) \$1,659.62	7 Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/23/2015	Payee name Pressley, Nicholas
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Amount (\$) \$1,659.63	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/07/2015	Payee name Pressley, Nicholas
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Amount (\$) \$1,659.62	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 66/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/21/2015	5 Payee name Pressley, Nicholas	
6 Amount (\$) \$1,659.63	7 Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Pressley, Nicholas	
Amount (\$) \$1,659.62	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Pressley, Nicholas	
Amount (\$) \$1,659.64	Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 67/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/12/2015	5 Payee name Pressley, Nicholas	
6 Amount (\$) \$862.41	7 Payee address; City; State; Zip Code 20031 RollingHills Lane Katy, TX 77449	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign mileage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2015	Payee name Pride Houston 2015	
Amount (\$) \$905.00	Payee address; City; State; Zip Code P.O. Box 66071 Houston, TX 77266	
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 Parade entry fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/24/2015	Payee name Print Source	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 14019 Southwest Freeway Suite 301-734 Sugar Land, TX 77478	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign printer
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 68/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/27/2015	5 Payee name Quattro	
6 Amount (\$) \$1,361.11	7 Payee address; City; State; Zip Code 1300 Lamar St. Houston, TX 77010	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Campaign committee meeting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Quattro	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 1300 Lamar St. Houston, TX 77010	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Campaign committee meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2015	Payee name Quattro	
Amount (\$) \$175.06	Payee address; City; State; Zip Code 1300 Lamar St. Houston, TX 77010	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Campaign Meeting
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

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: 69/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/04/2015	5 Payee name ROADwomen	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code P.O. Box 22678 Houston, TX 77227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Sponsorship donation for Blue Ribbon Lobby Day
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2015	Payee name ROADwomen	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 22678 Houston, TX 77227	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Heart of the City brunch -- Founders Level Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2015	Payee name Rhodes, Brandon	
Amount (\$) \$1,326.65	Payee address; City; State; Zip Code 10010 Cullen Apt 1122 Houston, TX 77051	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 70/113 Rpt:		2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872	
4 Date 05/21/2015		5 Payee name Rhodes, Brandon			
6 Amount (\$) \$969.66		7 Payee address; City; State; Zip Code 10010 Cullen Apt 1122 Houston, TX 77027			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/04/2015		Payee name Rhodes, Brandon			
Amount (\$) \$969.66		Payee address; City; State; Zip Code 10010 Cullen Apt 1122 Houston, TX 77027			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 06/18/2015		Payee name Rhodes, Brandon			
Amount (\$) \$969.66		Payee address; City; State; Zip Code 10010 Cullen Apt 1122 Houston, TX 77027			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll	
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

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: 71/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/09/2015	5 Payee name Riverside United Methodist Church	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 4920 Cullen Blvd. Houston, TX 77004	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 75th Anniversary booklet advertisement
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/11/2015	Payee name Roberts, Jonaphan	
Amount (\$) \$566.49	Payee address; City; State; Zip Code 1920 Calumet Apt 1 Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/26/2015	Payee name Roberts, Jonaphan	
Amount (\$) \$923.50	Payee address; City; State; Zip Code 1920 Calumet Apt 1 Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 72/113 Rpt:	2	FILER NAME Turner, Sylvester (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020872
4	Date 06/04/2015	5	Payee name Roberts, Jonaphan		
6	Amount (\$) \$923.50	7	Payee address; City; State; Zip Code 1920 Calumet Apt 1 Houston, TX 77004		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 06/18/2015		Payee name Roberts, Jonaphan		
	Amount (\$) \$923.50		Payee address; City; State; Zip Code 1920 Calumet Apt 1 Houston, TX 77004		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 06/18/2015		Payee name Robinson, Mack		
	Amount (\$) \$450.00		Payee address; City; State; Zip Code 3102 Brill St. Houston, TX 77026		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Headquarters carpet cleaning services		
		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

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: 73/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/05/2015	5 Payee name Royal Performance Group	
6 Amount (\$) \$220.97	7 Payee address; City; State; Zip Code 2100 Western Court Suite 80 Lisle, IL 60532	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas cards for campaign field organizers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/03/2015	Payee name Skyhouse Austin	
Amount (\$) \$2,160.00	Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent - Legislator's Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2015	Payee name Skyhouse Austin	
Amount (\$) \$2,160.00	Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent - Legislator's Austin apartment
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

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: 74/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/28/2015	5 Payee name Skyhouse Austin	
6 Amount (\$) \$2,160.00	7 Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent - Legislator's Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/09/2015	Payee name Skyhouse Austin	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Parking - Legislator's Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Skyhouse Austin	
Amount (\$) \$2,310.00	Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent and parking - Legislator's Austin apartment
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

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: 75/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/23/2015	5 Payee name Skyhouse Austin
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6 Amount (\$) \$2,310.00	7 Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent and parking - Legislator's Austin apartment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/03/2015	Payee name Skyhouse Austin
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Amount (\$) \$1,848.00	Payee address; City; State; Zip Code 51 Rainey Street Austin, TX 78701
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Rent and parking - Legislator's Austin apartment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/20/2015	Payee name Smiley, Erika
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Amount (\$) \$923.50	Payee address; City; State; Zip Code 606 Northlawn Drive Houston, TX 77073
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 76/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 01/22/2015	5 Payee name Smiley, Erika	
6 Amount (\$) \$32.00	7 Payee address; City; State; Zip Code 606 Northlawn Drive Houston, TX 77073	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Parking reimbursement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/16/2015	Payee name Sparkletts & Sierra Springs	
Amount (\$) \$178.08	Payee address; City; State; Zip Code P.O. Box 660579 Dallas, TX 75266-0579	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water for state office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2015	Payee name Sparkletts & Sierra Springs	
Amount (\$) \$100.14	Payee address; City; State; Zip Code P.O. Box 660579 Dallas, TX 75266-0579	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water for state office
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

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: 77/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Sparkletts & Sierra Springs	
6 Amount (\$) \$15.16	7 Payee address; City; State; Zip Code P.O. Box 660579 Dallas, TX 75266-0579	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Water for state office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Spirit Airlines (via Priceline)	
Amount (\$) \$286.18	Payee address; City; State; Zip Code 2800 Executive Way Miramar, FL 33025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight for Suzy Chandler to work at announcement event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/22/2015	Payee name St. Julien Communications Group, LLC	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code P.O. Box 3724 Houston, TX 77253-3724	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Political web site maintenance
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

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: 78/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/24/2015	5 Payee name Starbucks	
6 Amount (\$) \$64.73	7 Payee address; City; State; Zip Code 710 Meyerland Plaza Houston, TX 77035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Breakfast for media event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/13/2015	Payee name Starbucks	
Amount (\$) \$129.47	Payee address; City; State; Zip Code 1801 Durham Houston, TX 77007	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Coffee for Wake Up City Hall meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2015	Payee name Storefront Political Media	
Amount (\$) \$23,882.81	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Advertising and printing
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

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: 79/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/26/2015	5 Payee name Storefront Political Media	
6 Amount (\$) \$2,712.58	7 Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Officeholder holiday cards printing and mailing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2015	Payee name Storefront Political Media	
Amount (\$) \$15,074.03	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Advertising and printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2015	Payee name Storefront Political Media	
Amount (\$) \$11,999.00	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Advertising and printing
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

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: 80/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 01/02/2015	5 Payee name Storefront Political Media	
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2015	Payee name Storefront Political Media	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2015	Payee name Storefront Political Media	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 81/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/01/2015	5 Payee name Storefront Political Media	
6 Amount (\$) \$15,000.00	7 Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2015	Payee name Storefront Political Media	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Storefront Political Media	
Amount (\$) \$15,000.00	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 82/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/01/2015	5 Payee name Storefront Political Media	
6 Amount (\$) \$15,000.00	7 Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 General political consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2015	Payee name Storefront Political Media	
Amount (\$) \$20,458.71	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Research	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political research services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/26/2015	Payee name Storefront Political Media	
Amount (\$) \$13,000.00	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Research	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political research services
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 83/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 01/02/2015	5 Payee name Strong Strategies, LLC	
6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/02/2015	Payee name Strong Strategies, LLC	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2015	Payee name Strong Strategies, LLC	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
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

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: 84/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 04/01/2015	5 Payee name Strong Strategies, LLC
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6 Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/04/2015	Payee name Strong Strategies, LLC
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Amount (\$) \$1,750.82	Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2015	Payee name Strong Strategies, LLC
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Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 85/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/01/2015	5 Payee name Strong Strategies, LLC	
6 Amount (\$) \$7,500.00	7 Payee address; City; State; Zip Code 5100 San Felipe #117-E Houston, TX 77056	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 and compliance services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2015	Payee name Sue Davis Communications	
Amount (\$) \$4,500.00	Payee address; City; State; Zip Code 4721 Hummingbird St. Houston, TX 77035-4915	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media and communications consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/29/2015	Payee name Sue Davis Communications	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 4721 Hummingbird St. Houston, TX 77035-4915	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media and communications consulting services
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

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: 86/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/02/2015	5 Payee name Sue Davis Communications	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 4721 Hummingbird St. Houston, TX 77035-4915	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media and communications consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2015	Payee name Sue Davis Communications	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 4721 Hummingbird St. Houston, TX 77035-4915	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media and communications consulting services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Sue Davis Communications	
Amount (\$) \$6,000.00	Payee address; City; State; Zip Code 4721 Hummingbird St. Houston, TX 77035-4915	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media and communications consulting services
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 87/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/01/2015	5 Payee name Sue Davis Communications	
6 Amount (\$) \$7,500.00	7 Payee address; City; State; Zip Code 4721 Hummingbird St. Houston, TX 77035-4915	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Media and communications consulting services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2015	Payee name Syptak, Jeff	
Amount (\$) \$1,400.00	Payee address; City; State; Zip Code 6827 Cloudswept Lane Houston, TX 77086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing at political events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/02/2015	Payee name Syptak, Jeff	
Amount (\$) \$1,400.00	Payee address; City; State; Zip Code 6827 Cloudswept Lane Houston, TX 77086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing at campaign events
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

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: 88/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/02/2015	5 Payee name Syptak, Jeff	
6 Amount (\$) \$1,400.00	7 Payee address; City; State; Zip Code 6827 Cloudswept Lane Houston, TX 77086	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing at campaign events
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2015	Payee name Syptak, Jeff	
Amount (\$) \$1,600.00	Payee address; City; State; Zip Code 6827 Cloudswept Lane Houston, TX 77086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing at campaign events
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Syptak, Jeff	
Amount (\$) \$1,600.00	Payee address; City; State; Zip Code 6827 Cloudswept Lane Houston, TX 77086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing at campaign events
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

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: 89/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 06/01/2015	5 Payee name Syptak, Jeff
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6 Amount (\$) \$1,600.00	7 Payee address; City; State; Zip Code 6827 Cloudswept Lane Houston, TX 77086
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staffing at campaign events
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/17/2015	Payee name Target
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Amount (\$) \$127.37	Payee address; City; State; Zip Code 4323 San Felipe St. Houston, TX 77027
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Tables, chairs, tape and paper for HQ
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/28/2015	Payee name Target
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Amount (\$) \$139.96	Payee address; City; State; Zip Code 4323 San Felipe St. Houston, TX 77027
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Folding tables for HQ
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 90/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/19/2015	5 Payee name Tejano Assoc. for Historical Preservation	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code P.O. Box 231021 Houston, TX 77223-1021	
8 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 Parade entry fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/23/2015	Payee name Texas Democratic Party	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 4818 E. Ben White Blvd. Suite 104 Austin, TX 78741	
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 Fee for voter file database access
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/02/2015	Payee name Texas Democratic Party	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 4818 E. Ben White Blvd. Suite 104 Austin, TX 78741	
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 Fee for voter file database access
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

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: 91/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/14/2015	5 Payee name Texas Democratic Women of the Harris County Metro Area	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 766 Thornbranch Dr. Houston, TX 77079	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 sponsorship donation
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/12/2015	Payee name The Houston Sun	
Amount (\$) \$756.00	Payee address; City; State; Zip Code 1520 Isabella St. Houston, TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 MLK Day advertisement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/04/2015	Payee name Tightline Strategies, Inc.	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code P.O. Box 8943 St. Louis, MO 63101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Data consulting services
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

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: 92/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 05/01/2015	5 Payee name Tightline Strategies, Inc.
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6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 8943 St. Louis, MO 63101
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Data consulting services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2015	Payee name Tightline Strategies, Inc.
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code P.O. Box 8943 St. Louis, MO 63101
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Data consulting services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 01/29/2015	Payee name Time Warner Cable
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Amount (\$) \$142.44	Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cable and Internet - Legislator's Austin apartment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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

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: 93/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/05/2015	5 Payee name Time Warner Cable	
6 Amount (\$) \$142.44	7 Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cable and Internet - Legislator's Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Time Warner Cable	
Amount (\$) \$142.44	Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cable and Internet - Legislator's Austin apartment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/01/2015	Payee name Time Warner Cable	
Amount (\$) \$142.44	Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cable and Internet - Legislator's Austin apartment
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

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: 94/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/27/2015	5 Payee name Time Warner Cable	
6 Amount (\$) \$142.44	7 Payee address; City; State; Zip Code P.O. Box 60074 City of Industry, CA 91716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Cable and Internet - Legislator's Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/15/2015	Payee name Turner, Sylvester	
Amount (\$) \$502.02	Payee address; City; State; Zip Code 440 Louisiana 18th Floor Houston, TX 77002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of Schedule G expenses
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/01/2015	Payee name Tyson, Benjamin	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
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

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: 95/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/01/2015	5 Payee name Tyson, Benjamin	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Tyson, Benjamin	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Cell phone allowance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2015	Payee name Tyson, Benjamin	
Amount (\$) \$350.00	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Health insurance offset payment
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 96/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/02/2015	5 Payee name Tyson, Benjamin	
6 Amount (\$) \$2,125.90	7 Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2015	Payee name Tyson, Benjamin	
Amount (\$) \$2,125.89	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2015	Payee name Tyson, Benjamin	
Amount (\$) \$170.47	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 97/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/26/2015	5 Payee name Tyson, Benjamin	
6 Amount (\$) \$2,125.89	7 Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2015	Payee name Tyson, Benjamin	
Amount (\$) \$2,436.73	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2015	Payee name Tyson, Benjamin	
Amount (\$) \$2,436.74	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 98/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/07/2015	5 Payee name Tyson, Benjamin	
6 Amount (\$) \$2,436.74	7 Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2015	Payee name Tyson, Benjamin	
Amount (\$) \$2,436.74	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Tyson, Benjamin	
Amount (\$) \$2,436.73	Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 99/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Tyson, Benjamin	
6 Amount (\$) \$2,436.73	7 Payee address; City; State; Zip Code 1515 Missouri St Apt 12 Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/30/2015	Payee name U-Haul Rental	
Amount (\$) \$144.38	Payee address; City; State; Zip Code 4217 San Felipe St. Houston, TX 77027	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related 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 Vehicle lease to furniture to campaign HQ
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2015	Payee name U.S. Postal Service	
Amount (\$) \$343.00	Payee address; City; State; Zip Code 3740 Greenbriar Dr. Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Postage for campaign mailing
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

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: 100/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/01/2015	5 Payee name U.S. Postal Service	
6 Amount (\$) \$110.25	7 Payee address; City; State; Zip Code 2802 Timmons Lane Houston, TX 77027	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Postage
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name U.S. Postal Service	
Amount (\$) \$27.81	Payee address; City; State; Zip Code 3740 Greenbriar Dr. Houston, TX 77098	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2015	Payee name U.S. Postal Service	
Amount (\$) \$8.82	Payee address; City; State; Zip Code 4300 Speedway Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Postage
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 101/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 02/19/2015	5 Payee name U.S. Postal Service	
6 Amount (\$) \$92.00	7 Payee address; City; State; Zip Code 11805 Chimney Rock Houston, TX 77035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 PO Box Rental
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/17/2015	Payee name U.S. Postal Service	
Amount (\$) \$5.75	Payee address; City; State; Zip Code 4300 Speedway Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/08/2015	Payee name University of Houston Democrats	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 4100 University Drive Box 274 Houston, TX 77204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Donation
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

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: 102/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/26/2015	5 Payee name Vasquez, Azlee	
6 Amount (\$) \$946.58	7 Payee address; City; State; Zip Code 2601 Bandera Dr. Laredo, TX 78046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Vasquez, Azlee	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 2601 Bandera Dr Laredo, TX 78046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/18/2015	Payee name Vasquez, Azlee	
Amount (\$) \$946.59	Payee address; City; State; Zip Code 2601 Bandera Dr Laredo, TX 78046	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 103/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/26/2015	5 Payee name Vasquez, Daniel	
6 Amount (\$) \$419.68	7 Payee address; City; State; Zip Code 212 English St. Houston, TX 77009	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/26/2015	Payee name Vasquez, Daniel	
Amount (\$) \$319.67	Payee address; City; State; Zip Code 212 English St. Houston, TX 77009	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Vasquez, Daniel	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 212 English Street Houston, TX 77009	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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

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: 104/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/09/2015	5 Payee name Vasquez, Daniel	
6 Amount (\$) \$969.66	7 Payee address; City; State; Zip Code 212 English Street Houston, TX 77009	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/04/2015	Payee name Verizon Wireless	
Amount (\$) \$542.30	Payee address; City; State; Zip Code P.O. Box 4005 Acworth, GA 30101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Temporary internet access for campaign HQ
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2015	Payee name Verizon Wireless	
Amount (\$) \$479.23	Payee address; City; State; Zip Code P.O. Box 4005 Acworth, GA 30101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Campaign Internet services
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

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: 105/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 05/07/2015	5 Payee name War on Drugs
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 725 E. 41st St. Houston, TX 77002
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Donation
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2015	Payee name Wells Fargo Bank, N.A.
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Amount (\$) \$31.00	Payee address; City; State; Zip Code 1404 W. Gray St. Houston, TX 77019
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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 Lost check stop payment fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/23/2015	Payee name Wells Fargo Bank, N.A.
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Amount (\$) \$12.00	Payee address; City; State; Zip Code 1404 W. Gray St. Houston, TX 77019
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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 Fee for NSF donor check
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 106/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/30/2015	5 Payee name Wells Fargo Bank, N.A.	
6 Amount (\$) \$59.50	7 Payee address; City; State; Zip Code 1404 W. Gray St. Houston, TX 77019	
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 Transaction fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$31.98	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$31.98	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service 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

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: 107/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/26/2015	5 Payee name Wells Fargo Business Payroll	
6 Amount (\$) \$35.57	7 Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$135.57	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$35.57	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service 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

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: 108/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/07/2015	5 Payee name Wells Fargo Business Payroll	
6 Amount (\$) \$40.37	7 Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$43.97	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$46.53	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service 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

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: 109/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Wells Fargo Business Payroll	
6 Amount (\$) \$53.25	7 Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll service fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$946.56	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$1,218.33	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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

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: 110/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 03/26/2015	5 Payee name Wells Fargo Business Payroll	
6 Amount (\$) \$2,871.68	7 Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$2,992.86	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$2,726.44	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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

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: 111/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 05/07/2015	5 Payee name Wells Fargo Business Payroll	
6 Amount (\$) \$6,027.94	7 Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/21/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$6,405.92	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/04/2015	Payee name Wells Fargo Business Payroll	
Amount (\$) \$7,202.25	Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
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

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: 112/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 06/18/2015	5 Payee name Wells Fargo Business Payroll	
6 Amount (\$) \$9,339.51	7 Payee address; City; State; Zip Code 1650 West 82nd Street Suite 300 Minneapolis, MN 55431	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll taxes
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/26/2015	Payee name Whitaker, John	
Amount (\$) \$213.10	Payee address; City; State; Zip Code 876 Birchwood Dr. Alliance, OH 44601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/30/2015	Payee name Whitaker, John	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 876 Birchwood Dr. Alliance, OH 44601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 113/113 Rpt:	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
4 Date 04/09/2015	5 Payee name Whitaker, John	
6 Amount (\$) \$946.58	7 Payee address; City; State; Zip Code 876 Birchwood Dr. Alliance, OH 44601	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/23/2015	Payee name Whitaker, John	
Amount (\$) \$946.58	Payee address; City; State; Zip Code 876 Birchwood Dr. Alliance, OH 44601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2015	Payee name Whitaker, John	
Amount (\$) \$946.59	Payee address; City; State; Zip Code 876 Birchwood Dr. Alliance, OH 44601	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 1/3 Rpt: 224/229	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 06/22/2015	6 Payee name Copy.com
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7 Amount (\$) \$53.04	8 Payee address; City; State; Zip Code 1201-F Westheimer Houston, TX 77006
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Host Board for event
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/29/2015	Payee name Storefront Political Media
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Amount (\$) \$2,809.34	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Email broadcasts
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 2/3 Rpt: 225/229	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 06/29/2015	6 Payee name Storefront Political Media
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7 Amount (\$) \$2,965.34	8 Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Letterhead, remits, lapel stickers
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/29/2015	Payee name Storefront Political Media
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Amount (\$) \$4,168.18	Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Online advertising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 3/3 Rpt: 226/229	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$
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5 Date 06/29/2015	6 Payee name Storefront Political Media
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7 Amount (\$) \$373.75	8 Payee address; City; State; Zip Code 160 Pine Street Suite 700 San Francisco, CA 94111
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 design
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 227/229	2 FILER NAME Turner, Sylvester (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020872
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4 Date 02/16/2015	5 Payee name P.F. Chang's China Bistro
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6 Amount (\$) \$282.15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 201 San Jacinto Blvd. Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Lunch with Committee members
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/16/2015	Payee name Raising Cane's
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Amount (\$) \$74.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 415 W. Martin Luther King Blvd. Austin, TX 78701
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff luncheon
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: Sch: 1/2 Rpt: 228/229
2 FILER NAME Turner, Sylvester (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020872
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Frontier Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B - SS		
6 Dates of Travel 01/22/2015 01/22/2015	7 Name of person(s) traveling Tyson, Ben	
	8 Departure city or name of departure location Phoenix AZ	
	9 Destination city or name of destination location Houston TX	
10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) Travel to Houston for interview	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Frontier Airlines		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B - SS		
Dates of Travel 01/23/2015 01/23/2015	Name of person(s) traveling Tyson, Ben	
	Departure city or name of departure location Houston TX	
	Destination city or name of destination location Phoenix AZ	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Return to Phoenix	
Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Spirit Airlines (via Priceline)		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input checked="" type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B - SS		
Dates of Travel 03/29/2015 03/29/2015	Name of person(s) traveling Chandler, Suzy	
	Departure city or name of departure location Houston TX	
	Destination city or name of destination location Detroit MI	
Means of transportation Commercial Airplane	Purpose of travel (including name of conference, seminar, or other event) Return to Detroit	

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
Spirit Airlines (via Priceline)

5 Contribution / Expenditure reported on:

Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule G Schedule H Schedule COH-UC Schedule B - SS

6 Dates of Travel

7 Name of person(s) traveling

Changler, Suzy

03/25/2015

8 Departure city or name of departure location

Detroit MI

03/25/2015

9 Destination city or name of destination location

Houston TX

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

Assist with campaign kick-off event