CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form	1 Filer ID(Ethics Commission filers)	2 Total pages filed

3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR: Hon.	FIRST: Marty	MI: L.	**OFFICE USE ONLY**
	NICKNAME:	LAST: McVey	SUFFIX:	Date Received: 10/26/2015
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of address	ADDRESS / PO BOX; PO Box 27388	APT/SUITE #; CITY;	STATE; ZIP CODE: Houston TX 77227	Date Hand-delivered or Date Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: (713)	PHONE NUMBER: 334-0800	EXTENSION	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR: Mr.	FIRST: Jason	MI	Receipt # / Amount
	NICKNAME: Luong	LAST	SUFFIX	Date Processed / Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence)	STREET ADDRESS (No PO Box Please): 3019 Stoney Brook Dr	APT/SUITE # ;	CITY; STATE; ZIP CODE: Houston TX 77063	
8 CAMPAIGN TREASURER PHONE	AREA CODE: (713)	PHONE NUMBER: 256-8650	EXTENSION	

9 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Final repport (Attach C/OH - FR) ☐ Exceeded $500 limit

☐ July 15 ☒ 8th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment(officeholder only)

10 PERIOD COVERED	Month Day Year		Month Day Year
	9/24/2015	THROUGH	10/24/2015

11 ELECTION	ELECTION DATE (Month Day Year)	ELECTION TYPE
	11/3/2015	☐ Primary ☐ Runoff ☒ General ☐ Special

12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
		Mayor

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Marty L. McVey	15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

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.

☐ additional pages

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$
	2	**TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$4,800.74
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$638.93
	4	**TOTAL POLITICAL EXPENDITURES**	$87,216.63
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$954,729.50
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$1,075,000.00

18 AFFIDAVIT

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

Marty McVey

Signature of Candidate or Officeholder

AFFIX NOT STAMP / SEAL ABOVE

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

Signature of officer administering oath	Print name of officer administering oath	Title of officer administering oath

SUBTOTALS - COH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Marty L. McVey	20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	2000
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	2800.74
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS	
4.		SCHEDULE E: LOANS	
5.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	23451.54
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	54831.83
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS	
8.		SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	8294.32
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)	FORM C/OH ADDENDUM
C/OH NAME Marty L. McVey	ACCOUNT # (Ethics Commission filers)

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A1:
2 FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)

4 Date	5 Full name of contributor / out of state PAC(ID#)	6 Contributor address; City; State; Zip Code	7 Amount of contributions ($)
9/27/2015	Hirachi Grill & Buffet	Houston TX 77078	$2,000.00

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule A2:

2 FILER NAME Marty L. McVey

3 Filer ID (Ethics Commission filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS $

5 Date	6 Full name of contributor / out of state PAC(ID#)	7 Contributor address; City; State; Zip Code	8 Amount of contributions ($)	9 In-Kind contribution description
10/9/2015	He Gao	Katy TX 77450	232.74	Push Card

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
Analyst	Sysco Co.

5 Date	6 Full name of contributor / out of state PAC(ID#)	7 Contributor address; City; State; Zip Code	8 Amount of contributions ($)	9 In-Kind contribution description
10/9/2015	He Gao	Katy TX 77450	215.00	Radio Ad

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
Analyst	Sysco Co.

5 Date	6 Full name of contributor / out of state PAC(ID#)	7 Contributor address; City; State; Zip Code	8 Amount of contributions ($)	9 In-Kind contribution description
10/19/2015	He Gao	Katy TX 77450	2353.00	Newspaper Ad

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (See Instructions)	11 Employer (See Instructions)
Analyst	Sysco Co.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)

4 Date	**5** Payee name
9/28/2015	FaceBook
6 Amount ($)	**7** Payee address; City; State; Zip Code
750.08	1601 S California Ave Palo Alto CA 94304

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Post Boost

9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

4 Date	**5** Payee name
10/1/2015	FaceBook
6 Amount ($)	**7** Payee address; City; State; Zip Code
299.09	1601 S California Ave Palo Alto CA 94394

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Post Boost

9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

4 Date	**5** Payee name
10/20/2015	FaceBook
6 Amount ($)	**7** Payee address; City; State; Zip Code
750.18	1601 S California Ave Palo Alto CA 94394

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
	Advertising Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Post Boost
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

4 Date	**5** Payee name
10/22/2015	EPOC Times
6 Amount ($)	**7** Payee address; City; State; Zip Code
500.00	9073 Knight Rd Houston TX 77054

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Newspapr Ad
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)

4 Date	**5** Payee name
10/10/2015	Johnston Campaigns
6 Amount ($)	**7** Payee address; City; State; Zip Code
10,262.19	1415 S Voss Rd Ste 110-217 Houston TX 77057

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Mailer Printing & Postage

9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

4 Date	**5** Payee name
10/10/2015	ABTV
6 Amount ($)	**7** Payee address; City; State; Zip Code
450.00	1400 McGowen St Houston TX 77004

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Online Ad

9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

4 Date	**5** Payee name
10/23/2015	Matala D. Idi
6 Amount ($)	**7** Payee address; City; State; Zip Code
440.00	12635 Burdine St Houston TX 77085

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

4 Date	**5** Payee name
10/23/2015	Michelle Smith
6 Amount ($)	**7** Payee address; City; State; Zip Code
1,000.00	14 Alpine Ct Bellaire TX 77401

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)

4 Date	**5** Payee name
10/23/2015	Michelle Smith
6 Amount ($)	**7** Payee address; City; State; Zip Code
1,000.00	14 Alpine Ct Bellaire TX 77401

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff

9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

4 Date	**5** Payee name
10/23/2015	Ken Olive
6 Amount ($)	**7** Payee address; City; State; Zip Code
5,000.00	5522 Sylmar Houston TX 77081

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff

9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

4 Date	**5** Payee name
10/23/2015	Mike Moreno
6 Amount ($)	**7** Payee address; City; State; Zip Code
3,000.00	7636 Ave J Houston TX 77012

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	**2** FILER NAME Marty L. McVey		3 Filer ID (Ethics Commission filers)
	Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$	

5 Date: 9/25/2015	**6** Payee name: AT&T		
7 Amount ($): 442.44	**8** Payee address; City; State; Zip Code: PO Box 105414 Atlanta GA 30348		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category: Office Overhead/Rental Expense	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T; [ ] Check if Austin, TX, officeholder living expense; Telephone	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date: 6/1/2015	**6** Payee name: Fletcher Rowley		
7 Amount ($): 5,889.40	**8** Payee address; City; State; Zip Code: 1720 West End Ave Ste 630 Nashville TN 32703		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category: Consulting Expense	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T; [ ] Check if Austin, TX, officeholder living expense; Consultant & Travel	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date: 2/1/2015	**6** Payee name: Melissa Noriega		
7 Amount ($): 1,000.00	**8** Payee address; City; State; Zip Code: 4430 Pease St		

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$

Houston TX 77023

9	**TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10	**PURPOSE OF EXPENDITURE**	(a) Category: Consulting Expense	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T; [ ] Check if Austin, TX, officeholder living expense; Consultant	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date: 3/1/2015	**6** Payee name: Melissa Noriega		
7	Amount ($): 2,000.00	**8** Payee address; City; State; Zip Code: 4430 Pease St, Houston TX 77023		
9	**TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10	**PURPOSE OF EXPENDITURE**	(a) Category: Consulting Expense	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T; [ ] Check if Austin, TX, officeholder living expense; Consultant	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date: 4/1/2015	**6** Payee name: Melissa Noriega		
7	Amount ($): 3,000.00	**8** Payee address; City; State; Zip Code: 4430 Pease St, Houston TX 77023		
9	**TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10	**PURPOSE OF EXPENDITURE**	(a) Category	(b) Description	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$
		Consulting Expense	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Consultant
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

5	Date: 9/1/2015	**6** Payee name: Melissa Noriega	
7	Amount ($): 1,000.00	**8** Payee address; City; State; Zip Code: 4430 Pease St Houston TX 77023	
9	**TYPE OF EXPENDITURE**	☒ Political	☐ Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category: Consulting Expense	(b) Description: ☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Consultant
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$	

5 Date 10/1/2015	**6** Payee name Melissa Noriega		
7 Amount ($) 5,000.00	**8** Payee address; City; State; Zip Code 4430 Pease St Houston TX 77023		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category Consulting Expense	(b) Description [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense Consultant	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date 7/15/2015	**6** Payee name Domestic Mgmt Svcs		
7 Amount ($) 500.00	**8** Payee address; City; State; Zip Code 3510 Ruth St Houston TX 77004		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category Consulting Expense	(b) Description [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense Compliance Audit	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date 9/24/2015	**6** Payee name Domestic Mgmt Svcs		
7 Amount ($) 500.00	**8** Payee address; City; State; Zip Code 3510 Ruth St		

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$

Houston TX 77004

9	**TYPE OF EXPENDITURE**		X Political	Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category	(b) Description	
		Consulting Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Compliance Audit	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date	**6** Payee name		
	10/24/2015	Domestic Mgmt Svcs		
7	Amount ($)	**8** Payee address; City; State; Zip Code		
	500.00	3510 Ruth St Houston TX 77004		
9	**TYPE OF EXPENDITURE**		X Political	Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category	(b) Description	
		Consulting Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Compliance Audit	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date	**6** Payee name		
	6/1/2015	Domestic Mgmt Svcs		
7	Amount ($)	**8** Payee address; City; State; Zip Code		
	3,500.00	3510 Ruth St Houston TX 77004		
9	**TYPE OF EXPENDITURE**		X Political	Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category	(b) Description	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$
		Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

5	Date: 7/1/2015	**6** Payee name: Domestic Mgmt Svcs	
7	Amount ($): 3,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St Houston TX 77004	
9	**TYPE OF EXPENDITURE**	☒ Political	☐ Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Staff
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$	

5 Date: 8/1/2015	**6** Payee name: Domestic Mgmt Svcs		
7 Amount ($): 3,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St Houston TX 77004		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense Staff	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date: 9/1/2015	**6** Payee name: Domestic Mgmt Svcs		
7 Amount ($): 3,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St Houston TX 77004		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense Staff	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date: 10/1/2015	**6** Payee name: Domestic Mgmt Svcs		
7 Amount ($): 3,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St		

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$

Houston TX 77004

9	**TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10	**PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T; [ ] Check if Austin, TX, officeholder living expense; Staff	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date: 4/1/2015	**6** Payee name: Domestic Mgmt Svcs		
7	Amount ($): 2,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St, Houston TX 77004		
9	**TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10	**PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor	(b) Description: [ ] Check if travel outside of Texas, complete Schedule T; [ ] Check if Austin, TX, officeholder living expense; Gtd Commission	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date: 5/1/2015	**6** Payee name: Domestic Mgmt Svcs		
7	Amount ($): 2,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St, Houston TX 77004		
9	**TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10	**PURPOSE OF EXPENDITURE**	(a) Category	(b) Description	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$
		Salaries/Wages/Contract Labor	☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Gtd Commission
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

5	Date: 6/1/2015	**6** Payee name: Domestic Mgmt Svcs	
7	Amount ($): 2,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St Houston TX 77004	
9	**TYPE OF EXPENDITURE**	☒ Political	☐ Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor	(b) Description ☐ Check if travel outside of Texas, complete Schedule T ☐ Check if Austin, TX, officeholder living expense Gtd Commission
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought / office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$	

5 Date 7/1/2015	**6** Payee name Domestic Mgmt Svcs		
7 Amount ($) 2,500.00	**8** Payee address; City; State; Zip Code 3510 Ruth St Houston TX 77004		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category Salaries/Wages/Contract Labor	(b) Description [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense Gtd Commission	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date 8/1/2015	**6** Payee name Domestic Mgmt Svcs		
7 Amount ($) 2,500.00	**8** Payee address; City; State; Zip Code 3510 Ruth St Houston TX 77004		
9 **TYPE OF EXPENDITURE**	[X] Political	[ ] Non-Political	
10 **PURPOSE OF EXPENDITURE**	(a) Category Salaries/Wages/Contract Labor	(b) Description [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense Gtd Commission	
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5 Date 9/1/2015	**6** Payee name Domestic Mgmt Svcs		
7 Amount ($) 2,500.00	**8** Payee address; City; State; Zip Code 3510 Ruth St		

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F2:	**2** FILER NAME Marty L. McVey	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		$

Houston TX 77004

9	**TYPE OF EXPENDITURE**	X	Political	Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor		(b) Description: ☐ Check if travel outside of Texas, complete Schedule T; ☐ Check if Austin, TX, officeholder living expense; Gtd Commission
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

5	Date: 10/1/2015	**6** Payee name: Domestic Mgmt Svcs		
7	Amount ($): 2,500.00	**8** Payee address; City; State; Zip Code: 3510 Ruth St Houston TX 77004		
9	**TYPE OF EXPENDITURE**	X	Political	Non-Political
10	**PURPOSE OF EXPENDITURE**	(a) Category: Salaries/Wages/Contract Labor		(b) Description: ☐ Check if travel outside of Texas, complete Schedule T; ☐ Check if Austin, TX, officeholder living expense; Gtd Commission
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	2 FILER NAME Marty L. McVey	3 FilerID (Ethics Commission filers)

4 Date	5 Payee name
10/1/2015	6363 Richmond LP

6 Amount ($)	7 Payee Address;	City;	State;	Zip Code
3,500.00	6060 Richmond Ave	Houston	TX	77057
[X] Reimbursement from political contributions intended	Ste 380			

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Office Overhead/Rental Expense	Rent [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

4 Date	5 Payee name
10/1/2015	Halo House Foundation

6 Amount ($)	7 Payee Address;	City;	State;	Zip Code
1,650.00	4010 Boue Bonnet Blve	Houston	TX	77025
[X] Reimbursement from political contributions intended	Ste 110			

8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
	Advertising Expense	Event Ad [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

4 Date	5 Payee name
10/3/2015	Ralph Garcia

6 Amount ($)	7 Payee Address;	City;	State;	Zip Code
1,450.00	118 Dresden St	Houston	TX	77012
[X] Reimbursement from political contributions intended				

8	(a) Category	(b) Description

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	2 FILER NAME Marty L. McVey	3 FilerID (Ethics Commission filers)

PURPOSE OF EXPENDITURE: Advertising Expense

Sign Placement

☐ Check if travel outside of Texas, complete Schedule T

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

4 Date	5 Payee name
10/3/2015	Tractor Supply Co

6 Amount ($)	7 Payee Address;	City;	State;	Zip Code
194.32	6232 Garth Rd	Baytown	TX	77521

☒ Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE: (a) Category: Advertising Expense; (b) Description: T-Posts

☐ Check if travel outside of Texas, complete Schedule T

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

4 Date	5 Payee name
10/8/2015	Z & ZZ Intl, Inc.

6 Amount ($)	7 Payee Address;	City;	State;	Zip Code
1,000.00	4503 Cresent Lakes Cir	Sugar Land	TX	77479

☒ Reimbursement from political contributions intended

8 PURPOSE OF EXPENDITURE: (a) Category: Advertising Expense; (b) Description: Online Ads

☐ Check if travel outside of Texas, complete Schedule T

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

4 Date	5 Payee name
10/23/2015	NTD Television

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule G:	**2** FILER NAME Marty L. McVey	**3** FilerID (Ethics Commission filers)

6 Amount ($)	**7** Payee Address;	City;	State;	Zip Code
500.00	7001 Corporate Dr	Houston	TX	77036
[X] Reimbursement from political contributions intended	Ste 132			

8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Advertising Expense	NewsPaper Ad [ ] Check if travel outside of Texas, complete Schedule T [ ] Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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