CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY OFFICEHOLDER Robert NAME NICKNAME SUFFIX LAST Gallegos CANDIDATE / ADDRESS / PO BOX; APT / SUITE #: CITY: ZIP CODE OFFICEHOLDER PO Box 230087 MAILING **ADDRESS** Change of Address Houston, TX 77223 James CAMPAIGN MS/MRS/MR MI TREASURER NAME NICKNAME SUFFIX DINKINS STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; CITY: ZIP CODE TREASURER PO BOX 230087 **ADDRESS** (Residence or Business) touston, TX 77223 PHONE NUMBER EXTENSION CAMPAIGN AREA CODE TREASURER 609-4496 PHONE 8 REPORT TYPE January 15 30th day before election 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) PERIOD Month Day Year Month Day Year COVERED 01/01/2015 **THROUGH** 06/30/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/03/2015 X General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (f known) Houston City Council Member District I Houston City Council Member District I **GO TO PAGE 2**

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

					2 of 71
13 C / OH NAME	Gallegos, Robert		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or officeh	holder's kn	owledae or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME			
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS	TOTAL POLITIC LOANS, OR GUA	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$	65,655.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	3 ITEMIZED	\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$	21,475.28
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	LAST DAY OF THE	\$	91,914.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
5 0 70 6	Alyce M Young My Commission Expires 11/08/2016	I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code. Signature of	all information required to	be report	g report is ed by me
	cribed before me, by the s	RI LOUIS	, this the	th	day
Signature of offi	ce M Up	Printed name of officer administering	OUIA Title of officer	administe	ring oath

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 71

13 C / OH NAME	Gallegos, Robert			14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	s accepted or political expenditus s may have been made without t equired to report this information	he candidate's or officeho	older's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	1E			
	GENERAL					
		COMMITTEE ADD	RESS			
	SPECIFIC					
		COMMITTEE CAM	IPAIGN TREASURER NAME			
		COMMITTEE CAM	PAIGN TREASURER ADDRES	SS	-	
16 CONTRIBUTION TOTALS	LOANS, OR GUA	AL CONTRIBUTION ARANTEES OF LOA	NS OF \$50 OR LESS (OTHER T ANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00
	(OTHER THAN F		OR GUARANTEES OF LOANS		\$	65,655.00
EXPENDITURE TOTALS			S OF \$100 OR LESS, UNLESS	ITEMIZED	\$	0.00
		AL EXPENDITURE			\$	21,475.28
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF THE L	AST DAY OF THE	\$	91,914.58
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFADAVIT						
			I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.	y of perjury, that the acco Il information required to	mpanying be reported	report is d by me
		9	Signature of	Candidate or Officeholde	er	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid		, this the		day
			my hand and seal of office.			i i i i i i i i i i i i i i i i i i i
Signature of office	er administering	Printed name	of officer administering	Title of officer a	administeri	ng oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVER	3 of 71
Ga	ER NAN Illegos,				
	HEDULI ME OF :	SU	BTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	62,655.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	3,000.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	21,475.28
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
9.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
10		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
11		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/20 Rpt: 4/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 ALSM Consulting LLC \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77013 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 Andrews & Kurth Texas PAC \$1,000.00 Contributor address: City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Angel, Nory \$250.00 Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Arnold, George \$100.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/12/2015 **BAC PAC** \$500.00 Contributor address; City; State; Zip Code Houston, TX 77057 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/20 Rpt: 5/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 Baldwin, Bill \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77009 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Boulevard Realty** Owner Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/18/2015 Black Navarro, Yolanda \$100.00 Contributor address: City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Black Navarro, Yolanda \$100.00 Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 CDM Smith Inc PAC \$500.00 Contributor address; City; State; Zip Code Houston, TX 77056 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Capps, Kristen \$50.00 Contributor address; City; State; Zip Code Houston, TX 77061 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/20 Rpt: 6/71 2 FILER NAME Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Carter, Darryl \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77019 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Attorney Linebarger, Goggan, Blair & Sampson, L.L.P. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Centerpoint Energy Inc PAC \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77210 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Christensen, June \$100.00 Contributor address; City; State; Zip Code Houston, TX 77058 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/20/2015 Coleman, Garnet (The Honorable) \$500.00 Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) State Representative State of Texas Full name of contributor Date x out-of-state PAC (ID#: C00248716 Amount of Contribution (\$) 03/30/2015 Comcast Corporation PAC \$500.00 Contributor address; City; State; Zip Code Philadelphia, PA 19103 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MON	NETARY POLITICAL CONTRIBUTION	NS	SCHEDUL	E A1
The In	nstruction Guide explains how to complete this for	m. 1	Total pages Schedule A1: Sch: 4/20 Rpt: 7/71	
2 FILER N	NAME os, Robert	3	Filer ID	
4 Date 03/04/2	the control of the co		Amount of Contribution (\$)	\$1,000.00
8 Principa	al occupation / Job title (See Instructions) 9	Employer (See Instructions)		
Date 02/18/2	Full name of contributor out-of-state PAC (ID#: Dannenbaum, James Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00
Dringing	Houston, TX 77056 al occupation / Job title (See Instructions)	Employer (See Instructions)		
Chairm		Dannenbaum Engineering] 	
Date 02/18/2	Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$250.00
Principa	Houston, TX 77002 al occupation / Job title (See Instructions)	Employer (See Instructions)		
Date 06/30/2	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$25.00
Principa	al occupation / Job title (See Instructions)	Employer (See Instructions)		
Date 02/18/	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$150.00
Princip	al occupation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/20 Rpt: 8/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 Escobar, Omar \$250.00 Contributor address; City; State; Zip Code Richmond, TX 77407 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/05/2015 Fulbright & Jaworski Texas Committee \$500.00 Contributor address: City: State; Zip Code Houston, TX 77010 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Fulbright & Jaworski Texas Committee \$500.00 Contributor address; City; State; Zip Code Houston, TX 77010 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Gallegos, Sammy \$50.00 Contributor address; City; State; Zip Code Houston, TX 77020 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 02/18/2015 Garcia, Carlos \$250.00 Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/20 Rpt: 9/71 3 Filer ID FILER NAME Gallegos, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 \$250.00 Garcia, Edmund 6 Contributor address; City; State; Zip Code Pearland, TX 77581 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/30/2015 \$100.00 Garcia, Herlinda Contributor address; City; State; Zip Code Houston, TX 77022 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 02/05/2015 Garver, C.M. \$1,500.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) **BRH Garver Construction** Partner Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/18/2015 \$100.00 Gladden, Dean Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) x out-of-state PAC (ID#: C00266585 Amount of Contribution (\$) Date 06/01/2015 Greenberg Traurig PA Political Action Committee \$1,000.00 Contributor address; City; State; Zip Code Albany, NY 12207 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/20 Rpt: 10/71 2 FILER NAME Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 Guthrie, Steven \$250.00 6 Contributor address; City; State; Zip Code Houston, TX 77004 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/26/2015 \$500.00 HAA Better Government Fund Contributor address; City; State; Zip Code Houston, TX 77041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/15/2015 HAA Better Government Fund \$2,000.00 Contributor address; City; State; Zip Code Houston, TX 77041 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 06/01/2015 \$1,000.00 HOME-PAC Contributor address; City; State; Zip Code Houston, TX 77064 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/29/2015 **HPCP Investment LLC** \$2,500.00 Contributor address; City; State; Zip Code Houston, TX 77241 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/20 Rpt: 11/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 Hall Attorneys PC \$500.00 6 Contributor address: City: State: Zin Code Austin, TX 78701 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/01/2015 Hammonds, Evangelina \$75.00 Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID# 02/18/2015 \$100.00 Hanson, Mark Contributor address; City; State; Zip Code Houston, TX 77581 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 03/04/2015 Haynes & Boone PAC \$1,000.00 Contributor address; City; State; Zip Code Dallas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/18/2015 \$250.00 Hlavinka, Bryan Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/20 Rpt: 12/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 04/21/2015 Houston Police Officers Union PAC \$5,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77007 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Houston Police Officers Union PAC \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 \$500.00 Jard, James Contributor address; City; State; Zip Code Houston, TX 77043 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney The Jard Group Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Johnson, Harry \$500.00 Contributor address; City; State; Zip Code Houston, TX 77042 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Self Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/03/2015 Judge Richard Vara Campaign \$100.00 Contributor address; City; State; Zip Code Houston, TX 77223 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/20 Rpt: 13/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/03/2015 \$250.00 Juliet Stipeche Campaign 6 Contributor address; City; State; Zip Code Houston, TX 77006 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 06/01/2015 Knudson Joiner, Patti \$250.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/26/2015 \$500.00 LAN PAC Contributor address; City; State; Zip Code Houston, TX 77042 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/26/2015 Lamas, Jose \$250.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Knowledge Mgmnt. Consultant ExxonMobil Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/21/2015 Lamas, Jose \$250.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Knowledge Mgmnt. Consultant ExxonMobil

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 11/20 Rpt: 14/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/30/2015 Laukien, Dirk \$1,000.00 6 Contributor address; City; State; Zip Code Spring, TX 77381 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) President & Founder **Black Forest Ventures** Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/01/2015 Laura G Mitzner Trust \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Leech, Guy \$100.00 Contributor address; City; State; Zip Code Houston, TX 77025 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Linebarger, Goggan, Blair & Sampson LLP, \$1,000.00 Contributor address; City; State; Zip Code Austin, TX 78760 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 Liu, Frank \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer Lovett Homes

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/20 Rpt: 15/71 2 FILER NAME Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/29/2015 Locke Lord LLP \$1,000.00 6 Contributor address; City; State; Zip Code Dallas, TX 75201 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/05/2015 Lodge III, John \$500.00 Contributor address; City; State; Zip Code Houston, TX 77013 Principal occupation / Job title (See Instructions) Employer (See Instructions) President Lodge Lumber Company, Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Mac, Lynda \$100.00 Contributor address; City; State; Zip Code Crosby, TX 77532 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: 02/16/2015 Martin, Paige \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Houston Properties Realtor Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Martinez, Joaquin \$30.00 Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/20 Rpt: 16/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Martinez Partners LLP \$500.00 6 Contributor address; City; State; Zip Code Houston, TX 77056 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Masterson, Harris \$250.00 Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 McNiel, Kathryn \$100.00 Contributor address; City; State; Zip Code Houston, TX 77219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/01/2015 Michael Mitzner Trust \$1,000.00 Contributor address: Citv: State: Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 02/21/2015 Miller, Eric \$200.00 Contributor address; City; State; Zip Code Houston, TX 77009 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/20 Rpt: 17/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 06/01/2015 Mitzner, Ira \$1,000.00 6 Contributor address: Citv: State: Zip Code Houston, TX 77098 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) President Rida Development Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/03/2015 Mitzner, Mindy \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77098 Principal occupation / Job title (See Instructions) Employer (See Instructions) Developer Rida Development Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 Murphy, Bernard \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77074 Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer Lippke, Cartwright & Roberts Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/22/2015 Navarro, Demetrius \$500.00 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Navarro Insurance Group President Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Nelson, James \$100.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/20 Rpt: 18/71 Filer ID 2 FILER NAME Gallegos, Robert 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$500.00 02/18/2015 Outreach Strategists LLC 6 Contributor address; City; State; Zip Code Houston, TX 77042 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 03/04/2015 \$500.00 Patel, Irfan Contributor address; City; State; Zip Code Houston, TX 77075 Principal occupation / Job title (See Instructions) Employer (See Instructions) SARBALI RECYCLING Owner out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 02/18/2015 \$500.00 Perdue, Brandon, Fielder, Collins & Mott Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$250.00 06/01/2015 Planned Parenthood Gulf Coast Action Fund PAC Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: \$1,000.00 02/18/2015 Plumbers Local Union No. 68 PAC Fund Contributor address; City; State; Zip Code Houston, TX 77249 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/20 Rpt: 19/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 06/03/2015 Pohlman, John \$100.00 Contributor address; City; State; Zip Code Houston, TX 77008 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: 02/18/2015 Port, Allan \$250.00 Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/30/2015 Rodriguez, Arnold & Gloria \$25.00 Contributor address; City; State; Zip Code Houston, TX 77049 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID# 02/18/2015 Rothenberg, Sarah \$100.00 Contributor address; City; State; Zip Code Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 06/01/2015 Sadeghpour, David \$250.00 Contributor address; City; State; Zip Code Houston, TX 77007 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/20 Rpt: 20/71 3 Filer ID 2 FILER NAME Gallegos, Robert 5 Full name of contributor 7 Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 06/29/2015 Schaff, John \$25.00 6 Contributor address; City; State; Zip Code Houston, TX 77023 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 05/05/2015 \$250.00 Spata, Michael Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 06/01/2015 Steven C Mitzner Trust Contributor address; City; State; Zip Code Houston, TX 77098 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$2,500.00 03/04/2015 TMC PAC Contributor address; City; State; Zip Code Waco, TX 76708 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$5,000.00 04/21/2015 **TREPAC** Contributor address; City; State; Zip Code Austin, TX 78701 Employer (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/20 Rpt: 21/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 Tamez, Adriana \$100.00 6 Contributor address; City; State; Zip Code Houston, TX 77008 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/29/2015 Teamsters #988 \$1,000.00 Contributor address; City; State; Zip Code Houston, TX 77032 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 02/18/2015 Texas Taxi PAC \$1,000.00 Contributor address: Citv: State: Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 06/29/2015 Thompson & Horton LLP \$500.00 Contributor address; City; State; Zip Code Houston, TX 77027 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/18/2015 Tillinghast, Scott \$50.00 Contributor address; City; State; Zip Code Houston, TX 77092 Principal occupation / Job title (See Instructions) Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/20 Rpt: 22/71 2 FILER NAME 3 Filer ID Gallegos, Robert 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/18/2015 Uribe, Alberto \$25.00 6 Contributor address; City; State; Zip Code Houston, TX 77098 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 06/30/2015 Velasquez, Frank \$100.00 Contributor address; City; State; Zip Code Houston, TX 77023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 06/29/2015 Villarreal, Massey \$500.00 Contributor address; City; State; Zip Code Houston, TX 77042 Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO/President Precision Task Group Inc. Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/18/2015 Watson, Max \$250.00 Contributor address; City; State; Zip Code Houston, TX 77019 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/20/2015 Womack, Gerald \$250.00 Contributor address; City; State; Zip Code Houston, TX 77004 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: 20/20 Rpt: 23/71
2	FILER NAME Gallegos, Robert	3 Filer ID
4	Date 06/30/2015 5 Full name of contributor out-of-state PAC (ID#:	7 Amount of Contribution (\$) \$100.00
8	Houston, TX 77023 Principal occupation / Job title (See Instructions) 9 Employer (See	e Instructions)
	Date 02/18/2015 Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$500.00
	Principal occupation / Job title (See Instructions) Employer (See President Zarinkelk En	e Instructions) agineering Services, Inc.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this f	orm. 1 Total pages Schedule A2: Sch: 1/1 Rpt: 24/71
2 FILER NAME Gallegos, Robert	3 Filer ID
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS \$
5 Date 06/23/2015 6 Full name of contributor out-of-state PAC (ID#:	8 Amount of contribution (\$) 9 In-kind contribution description \$3,000.00 Event expenses for meet your neighbors event.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON-JUDICIAL) (See instructions)
CEO	Extraordinary Media LLC
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)	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		mmittee	Gift/Awa Legal S	everage Expense ards/Memorials Expenservices nstruction Guide		Printin Salarie		e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAM	E						3	Filer ID	
	Sch: 1/47 Rpt: 25/71		Gallegos, F		e						accommon \$150	
4	Date	5	Payee name	9								
	02/21/2015		90.1 FM KI	PFT								
6	Amount (\$)	7	Payee addre	ess;	City;	State;	Zip	Code				
	\$200.00		419 Lovett	Blvd								
			Houston, T	X 770	06							
8	PURPOSE	(a)	Category (s	See Cate	gories listed at the top	of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Event Expe		ge-1100 110100 at 1110 top	01 11110 00110	oudio,			outs	side of Texas. Complete Schedule T.	
	EXPENDITURE								the same of the sa		, officeholder living expense	
									Sponsorship	of	gala benefitting 90.1 KPFT	
^	Complete ONII V if allow		0	C: ! !	d.,		\fc: .				Office hold	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	iicenolo	der name	. C	office s	sought			Office held	
	Date		Payee name	9								
	04/06/2015		90.1 FM K	PFT								
	Amount (\$)		Payee addre	ess;	City;	State;	Zip	Code	. 12411125 5			
	\$170.00		419 Lovett	Blvd								
			Houston, T	X 770	006							
	PURPOSE	(a	Category (See Cate	gories listed at the top	of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Event Exp								side of Texas, Complete Schedule T.	
											(, officeholder living expense	
									Sporisorsnip	יוט נ	gala benefiting 90.1FM KPFT	
_	Complete ONLY if direct		Candidate/Of	ficehol	der name	C	Office :	sought			Office held	
	expenditure to benefit C/O	Н						939A)				
	Date		Payee name	9								
	04/13/2015		90.1 FM K	PFT								
	Amount (\$)	Γ	Payee addr	ess;	City;	State;	Zip	Code				
	\$500.00		419 Lovett	Blvd								
			Houston, 7	ΓX 770	006							
	PURPOSE	(a	Category (See Cate	egories listed at the to	p of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Event Exp				11 ON 1860 A				side of Texas. Complete Schedule T.	
	ZAI ENDITONE										X, officeholder living expense	
									Sponsorsnip	ot to	Rev. Lawson Auction	
	Complete ONLY if direct	L	Candidate/O	fficehol	der name		Office	sought			Office held	
	expenditure to benefit C/O	Н					- 11100	coagni			Ollido Hold	
		-										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	Event Expense Loan Repayment/Reimbursemen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Demmittee Legal Services Salaries/Wages/Contract Labor	
		The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID
	Sch: 2/47 Rpt: 26/71	Gallegos, Robert	
4	Date	Payee name	
	04/07/2015	ACF Awards	
6	Amount (\$) \$33.40	Payee address; City; State; Zip Code 2631 N Freeway Houston, TX 77009	
8	PURPOSE OF EXPENDITURE	Check if Aus	ovel outside of Texas. Complete Schedule T. Istin, TX, officeholder living expense of coffee pot for Magnolia Senior Center
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/08/2015	Allens Crowns Inc	
	Amount (\$) \$47.17	Payee address; City; State; Zip Code 220 Mobile St Hattiesburg, MS 39401	
	PURPOSE OF EXPENDITURE	Check if Au	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense r District I senior prom.
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/08/2015	Americal Legion Post 472	
	Amount (\$) \$45.00	Payee address; City; State; Zip Code 7599 Avenue C Houston, TX 77012	
\vdash	DUDDOSE		
	PURPOSE OF EXPENDITURE	Check if Au	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense nip of District Spring Convention
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Advertising Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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: 2 FILER NAME 3 Filer ID Sch: 3/47 Rpt: 27/71 Gallegos, Robert 4 Date Payee name 04/18/2015 Arne's 6 Amount (\$) Payee address; City; State; Zip Code \$12.69 2830 Hicks St Houston, TX 77007 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for District I Senior Prom Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 04/08/2015 BannersPlus LLC Amount (\$) Payee address; State; Zip Code \$40.00 2233 South 81st St West Allis, WI 53219 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Sashes for District I Senior Prom Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/14/2015 Barbara Jordan Main Post Office Amount (\$) Payee address; City; State; Zip Code \$127.40 401 Franklin St Houston, TX 77201 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Postage for post cards for Community Leaders Breakfast Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of 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: 2	FILER NAME 3 Filer ID
Sch: 4/47 Rpt: 28/71	Gallegos, Robert
4 Date 5	Payee name
04/19/2015	Barrio Dogs
6 Amount (\$) 7	Payee address; City; State; Zip Code
\$150.00	PO Box 230667
	Houston, TX 77223
8 PURPOSE (a	(b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Sponsorship of Annual Fundraiser
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	
Date	Payee name
05/13/2015	Brady's Landing
Amount (\$)	Payee address; City; State; Zip Code
\$974.83	8505 Cypress St
	Houston, TX 77012
PURPOSE (a	a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas, Complete Schedule T.
	Check if Austin, TX, officeholder living expense Venue for District I Senior Prom
	Variable for District Foundative
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	
Date	Payee name
02/13/2015	CVS/pharmacy
Amount (\$)	Payee address; City; State; Zip Code
\$10.80	4702 Irvington Blvd
	ander 19
	Houston, TX 77009
PURPOSE (a	a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Food for Seniors Valentine's program
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OH	Candidate/Onicendide Haine Onice Sought Onice neid

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Committee Legal Services 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.	T
1	Total pages Schedule F1: Sch: 5/47 Rpt: 29/71	2 FILER NAME Gallegos, Robert	3 Filer ID
4	Date 05/04/2015	5 Payee name CVS/pharmacy	
6	Amount (\$) \$58.94	Payee address; City; State; Zip Code 806 S 75th St Houston, TX 77023	
8	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense Staff birthday celebration
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Γ	Date	Payee name	
	06/11/2015	Carnitas Mexican Grill	
	Amount (\$) \$48.56	Payee address; City; State; Zip Code 8111 N Sam Houston Pkwy W Houston, TX 77064	
	PURPOSE OF EXPENDITURE	1 dour Develage Expense	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense am Dinner
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 04/12/2015	Payee name Chris Diaz Campaign	
	Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 172 Galena Park, TX 77547	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if trave	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense o of Annual Golf Tournament
	Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District Office Overhead/Rental Expense Consulting Expense Polling Expense Contributions/ Donations Made By -Travel Out of District Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 6/47 Rpt: 30/71 Gallegos, Robert 4 Date Payee name 05/27/2015 Churrascos 6 Amount (\$) Payee address; City; State; Zip Code \$145.82 2205 Westheimer Houston, TX 77098 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and drinks for fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/31/2015 City of Houston Parking Amount (\$) Payee address; City; State; Zip Code \$1.90 900 Bagby St Houston, TX 77002 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Parking for staff training. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/31/2015 City of Houston Parking Amount (\$) Payee address; City; State; Zip Code \$4.00 900 Bagby St Houston, TX 77002 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Parking for staff training. Complete ONLY if direct Office sought Candidate/Officeholder name Office held expenditure to benefit C/OH

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/wards/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:	2 FILER NAME 3 Filer ID				
	Sch: 7/47 Rpt: 31/71	Gallegos, Robert				
4	Date	5 Payee name				
	01/31/2015	City of Houston Parking				
6	Amount (\$) \$2.90	7 Payee address; City; State; Zip Code 900 Bagby St Houston, TX 77002				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking for staff training.				
9	Complete ONLY if direct expenditure to benefit C/ON	Candidate/Officeholder name Office sought Office held H				
	Date 02/10/2015	Payee name City of Houston Parking				
	Amount (\$) \$7.00	Payee address; City; State; Zip Code 900 Bagby St Houston, TX 77002				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking for staff training.				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
ſ	Date	Payee name				
L	02/12/2015	City of Houston Parking				
	Amount (\$) \$7.00	Payee address; City; State; Zip Code 900 Bagby St				
L		Houston, TX 77002				
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking for staff training.				
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense 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: 2 FILER NAME 3 Filer ID Sch: 8/47 Rpt: 32/71 Gallegos, Robert Date Payee name 02/13/2015 City of Houston Parking 6 Amount (\$) Payee address; City: State; Zip Code \$7.00 900 Bagby St Houston, TX 77002 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Parking for staff training. Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/16/2015 City of Houston Parking Amount (\$) Payee address; City; State; Zip Code \$7.00 900 Bagby St Houston, TX 77002 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Parking for staff training Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/14/2015 City of Houston Parking Amount (\$) Payee address; City: State; Zip Code \$4.00 900 Bagby St Houston, TX 77002 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Parking for Crime Stoppers luncheon at Hotel Zaza Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee 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:	2 FILER NAME 3 Filer ID	
	Sch: 9/47 Rpt: 33/71	Gallegos, Robert	
4	Date	5 Payee name	
	06/11/2015	Clinton Park Reunion	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
Ĭ	\$150.00	PO Box 242	
	Ψ130.00	1 0 000 242	
		Galena Park, TX 77547	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Sponsorship of Clinton Park Reunion	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	onponditure to belieff G/Of		
	Date	Payee name	
	02/08/2015	Costco Wholesale	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$55.00	3836 Richmond Ave	
	φ30100	COOL MICHINION AND	
		11	
		Houston, TX 77027	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	is the first disease. In the computation of the first diseases of the	Check if Austin, TX, officeholder living expense	
		Membership fees.	
	0 1. 0		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	02/08/2015	Costco Wholesale	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$209.69	3836 Richmond Ave	
		Houston TV 77027	
		Houston, TX 77027	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Fruit packs, crackers and cookies for District I Seniors for Valentine's Day	
L			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
L	experience to belieff C/O		

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulling Expense Contributions/ Donations Made By Candidate/Officeholder/Political						
1	Total pages Cohest 1 - T						
	Total pages Schedule F1: Sch: 10/47 Rpt: 34/71	2 FILER NAME Gallegos, Robert 3 Filer ID					
4	Date	5 Payee name					
	03/27/2015	Costco Wholesale					
6	Amount (\$) \$75.81	7 Payee address; City; State; Zip Code 3836 Richmond Ave					
•	DUDDOCT	Houston, TX 77027					
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Songwood Easter Egg Hunt & Cesar Chavez Parade					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	03/30/2015	Cuchara Restaurant					
	Amount (\$) \$153.90	Payee address; City; State; Zip Code 214 Fairview St Houston, TX 77006					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch for Latino Elected Officials monthly meeting.					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
Date Payee name							
	04/20/2015	Digital Printing Solutions					
	Amount (\$) Payee address; City; State; Zip Code \$80.00 5618 Randon Rd						
	Houston, TX 77091						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banner for Senior program					
Γ	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Γ							

SCHEDULE F1

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense (- Gitt/Awards/Memorials Expense Il Committee Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense tee Legal Services 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)			
1000	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:				3 Filer ID			
	Sch: 11/47 Rpt: 35/71	Gallegos, Robert						
4	Date	5 Payee name						
	03/03/2015	Dinner Bell Cafeteria						
6	Amount (\$) \$142.89	7 Payee address; City; State; 6525 Lawndale Houston, TX 77023	Zip Code					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Food/Beverage Expense	dule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense City Council			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ffice sought		Office held			
	Date	Payee name						
	06/27/2015	Dollar Tree Stores Inc						
	Amount (\$) \$8.66	Payee address; City; State; Zip Code 4428 North Freeway Houston, TX 77022						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Event Expense	dule) (b)		utside of Texas. Complete Schedule T. TX, officeholder living expense Pride Parade			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ffice sought		Office held			
Γ	Date	Payee name						
	05/11/2015	Dona Chela Restaurant						
Amount (\$) Payee address; City; State; Zip Code \$37.86 1112 76th St Houston, TX 77012								
							PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Food/Beverage Expense
	Complete ONLY if direct expenditure to benefit C/O		office sought		Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica			Gift/Awards/Memorials I Legal Services		Printing E Salaries/	Expens			Travel in District Travel Out of District OTHER (enter a category not listed above)	
				The Instruction Gu	ide explains l	how to co	omple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	
	Sch: 12/47 Rpt: 36/71		Gallegos, R	obert							
4	Date	5	Payee name								
	06/19/2015		Double Barı	el Roadhouse							
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$45.40		3770 S Las	Vegas Blvd							
			Las Vegas,	NV 89108							
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			age Expense						de of Texas. Complete Schedule T.	
	New 1970 (Habit) - 000000 (Habit) - 54 900 (Habit) (Ha							Food at NAL		officeholder living expense	
								roou at NAL	LU	Conterence	
9	Complete ONLY if direct		Candidate/Offi	ceholder name		Office sou	laht			Office held	
	expenditure to benefit C/O			oonerder Harrie		Jilioc 301	agiit			Office field	
	Date		Payee name								
	04/07/2015		Dress for Si	uccess							
	Amount (\$)		Payee addres	ss; City;	State;	Zip C	ode				
	\$50.00		3310 Eastsi	de St							
			Houston, TX	K 77098							
Г	PURPOSE	(a)	Category (Se	ee Categories listed at th	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE		Contribution	ns/Donations Ma	de By		1	Check if travel		de of Texas. Complete Schedule T.	
			Candidate/0	Officeholder/Poli	tical Comm	ittee				officeholder living expense	
							1	program.		Stardig's Dress for Success	
┝	Complete ONLY if direct	L	Candidate/Offi	ceholder name		Office so	ught			Office held	
	expenditure to benefit C/O		Candidate/On	cerioidei fiame		Jilice Sui	ugnt			Office field	
F	Date	_	Davisa								
	01/30/2015		Payee name	Station Post Offic	20						
L	Victoria della contra doctata di Articola di Contra di C	-									
	Amount (\$) \$74.00		Payee addre	- All Artexistant	State	; Zip C	ode				
	\$14.00		5415 Lawn	uale St							
			Houston T	v 77000							
L			Houston, T								
	PURPOSE OF	(a		ee Categories listed at th		edule)	(b)	Description	ا مندا	ide of Toyon Complete Colonia	
	EXPENDITURE		Office Over	head/Rental Exp	pense			200000000000000000000000000000000000000		ide of Texas. Complete Schedule T. , officeholder living expense	
								Annual PO E			
Г	Complete ONLY if direct		Candidate/Off	iceholder name	(Office so	ught		10,000	Office held	
١	expenditure to benefit C/O	H									
Γ											
1											

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District
Travel Out of District Candidate/Officeholder/Political Committee 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: 2 FILER NAME 3 Filer ID Sch: 13/47 Rpt: 37/71 Gallegos, Robert 4 Date Payee name 05/28/2015 **Educational Fund** 6 Amount (\$) Payee address; State; Zip Code City; \$100.00 Best efforts Best efforts, TX **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign contribution Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/10/2015 El Bolillo Bakery Amount (\$) Payee address; State; Zip Code \$16.00 2421 S Wayside Dr Houston, TX 77023 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for Seniors Valentine's program. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/13/2015 El Bolillo Bakery Amount (\$) Payee address; City; State; Zip Code \$15.00 2421 S Wayside Dr Houston, TX 77023 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for Seniors event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhea Polling Expens Printing Expen		se Transportation Equipment & Related Expense Travel in District Travel Out of District		
			The Instruction Guide explains					
1	Total pages Schedule F1:	2 FILER NAM	E	7)		3 Filer ID		
	Sch: 14/47 Rpt: 38/71	Gallegos, F	Robert					
4	Date	5 Payee name)					
	03/14/2015	El Centro d	le Corazon					
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Code				
	\$150.00	PO Box 23	0209					
		Houston, T	X 77223					
8	PURPOSE	(a) Category (See Categories listed at the top of this sc	hedule) (b)	Description			
	OF EXPENDITURE	Advertising				outside of Texas. Complete Schedul	e T.	
					Advertising in	n, TX, officeholder living expense		
					, wrondoning in	- Frogramm		
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sought		Office held		
	expenditure to benefit C/OI		ration through the the attention of the attention of the			nacontares Transactions		
F	Date	Payee name	9					
	04/18/2015	El Jardin	<u>.</u>					
\vdash	Amount (\$)	Payee addr	ess; City; State	e; Zip Code				
	\$97.44	15.7	sburg Blvd					
1								
1		Houston, -	TX 77012					
H	PURPOSE	(a) Category	See Categories listed at the top of this so	chedule) (b) Description			
	OF EXPENDITURE		erage Expense	33		l outside of Texas. Complete Schedu	lle T.	
1	EVERIFICIE					n, TX, officeholder living expense		
					Community	Leaders breakfast.		
\vdash	Complete ONLY if direct	Candidate/O	fficeholder name	Office sough	t	Office held		
	expenditure to benefit C/O		mochoidel name	Cinco sough	•	Cinde field		
F	Date	Davida na	0					
1	02/09/2015	Payee nam El Tiempo						
\vdash	Amount (\$)	Payee add	- contract residence of the contract of the co	e; Zip Code	<u> </u>			
	\$94.57		igation Blvd	o, zip coue				
	φυυ	Lozmide	.g					
		Houston,	TX 77003					
\vdash	PURPOSE) Description			
	OF		(See Categories listed at the top of this s erage Expense	chedule)		el outside of Texas. Complete Sched	ule T.	
	EXPENDITURE	1 300/156	orago Expondo		Check if Aust	in, TX, officeholder living expense		
					Campaign s	staff meeting.		
L								
	Complete ONLY if direct expenditure to benefit C/C		officeholder name	Office sough	nt	Office held		
L	SAPORALE OF BOTTON OF	1.75.70						
1								

SCHEDULE F1

,	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
•	Sch: 15/47 Rpt: 39/71	Gallegos, Robert
4		5 Payee name
	02/26/2015	El Tiempo Cantina
6	Amount (\$) \$157.07	7 Payee address; City; State; Zip Code 2814 Navigation Blvd Houston, TX 77003
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff dinner following 2015 District I CIP Meeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/18/2015	El Tiempo Cantina
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.15	2814 Navigation Blvd Houston, TX 77003
-	PURPOSE	I a .
	OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Sunday Street & East End Market
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	02/08/2015	Empowering our Workforce Luncheon
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 201 Broadway St Houston, TX 77012
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship of luncheon for SER - Jobs in Progress
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH
H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		xpense Transportation Equipment & Related Expense Travel in District Travel Out of District
L		The Instruction Guide explains how to complete this f	orm.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 16/47 Rpt: 40/71	Gallegos, Robert	
4	Date	5 Payee name	•
	04/28/2015	Exxon Express	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
1	\$31.43	217 FM 359	
1			
		Brookshire, TX 77423	
8	PURPOSE		ntion
۱	OF	· · · · · · · · · · · · · · · · · · ·	ption ck if travel outside of Texas. Complete Schedule T.
1	EXPENDITURE	Transportation Equipment & Related	ck if Austin, TX, officeholder living expense
		70000 Performance	n trip to Austin to testify on Stray Dogs Bill
9		Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	1	
F	Date	Payee name	
	06/15/2015	Foodrama	
一	Amount (\$)	Payee address; City; State; Zip Code	
1	\$20.31	5665 Beechnut	
1			
1		Houston, TX 77096	
\vdash	PURPOSE		ntion
1	OF		puon eck if travel outside of Texas. Complete Schedule T.
1	EXPENDITURE	1 Tood/Develage Expense	eck if Austin, TX, officeholder living expense
		Lunci	n for Budget meeting
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
Г	Date	Payee name	
1	02/17/2015	Frost Bank	
\vdash	Amount (\$)	Payee address; City; State; Zip Code	
1	\$0.18	1001 Broadway St	
1			
1		Houston, TX 77012	
H	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri	iption eck if travel outside of Texas. Complete Schedule T.
1	EXPENDITURE	1 1003	eck if travel outside of Texas. Complete Schedule 1. eck if Austin, TX, officeholder living expense
		1 L	fees.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
\vdash			
1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		nmittee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor			e	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
				The Instruction Guide explains	s how to con	nple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	
	Sch: 17/47 Rpt: 41/71		Gallegos, R	obert						
4	Date	5	Payee name							
	03/16/2015		Frost Bank							
6	Amount (\$)	7	Payee addre	ss; City; State	e; Zip Co	de				
	\$0.43		1001 Broad	lway St						
			Houston, T	X 77012						
8	PURPOSE	(a)	Category (S	ee Categories listed at the top of this so	chedule)	(b)	Description			
	OF EXPENDITURE		Fees		,		Check if travel of		de of Texas. Complete Schedule T.	
1	LAFLINDITURE							, TX,	officeholder living expense	
1							Bank fee.			
<u>_</u>	Consoliste ONII V Welling		2	inchalder name	Office				Office hold	
9	Complete ONLY if direct expenditure to benefit C/Oh		Jandidate/Off	iceholder name	Office sou	gnt			Office held	
⊨	Date		Doves							
	04/30/2015		Payee name Frost Bank							
\vdash		-			o: 7in Ca	do				
1	Amount (\$) \$0.18		Payee addre		e; Zip Co	ue				
1	Φ0.10		TOOT DIOUC	ivvay St						
			Houston T	V 77012						
L	DUDDOCT	/	Houston, T		- 1	/1->				
1	PURPOSE OF	(a)		see Categories listed at the top of this s	chedule)	(a)	Description Check if travel	Oute	ide of Texas, Complete Schedule T.	
1	EXPENDITURE		Fees						, officeholder living expense	
1							Bank fee			
	Complete ONLY if direct		Candidate/Off	ficeholder name	Office sou	ght	9		Office held	
L	expenditure to benefit C/O	н								
Γ	Date		Payee name	<u> </u>						
	05/15/2015		Frost Bank							
T	Amount (\$)	T	Payee addre	ess; City; Sta	te; Zip Co	ode				
	\$57.00		1001 Broad	dway St						
			Houston, T	X 77012						
\vdash	PURPOSE	(a		See Categories listed at the top of this s	schedule)	(b)	Description			
1	OF EXPENDITURE	1	Fees	200 24togorios notod at the top of this s	oo.icaale)	ĺ <i>'</i>		louts	side of Texas. Complete Schedule T.	
	EXPENDITURE							n, T>	K, officeholder living expense	
							Bank fee			
L	0		C=	Eagle ald	Off.	<u>L</u>			O# L - L -	
	Complete ONLY if direct expenditure to benefit C/O		candidate/Of	ficeholder name	Office sou	ught	L .		Office held	
L										
1										

SCHEDULE F1

Solicitation/Fundraising Expense

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expe Printing Exp		Travel in District Travel Out of District			
			The Instruction Guide explai	ns how to com	plete this form.				
1	Total pages Schedule F1:					3 Filer ID			
	Sch: 18/47 Rpt: 42/71	Gallegos, F	Robert						
4	Date	5 Payee name							
	05/12/2015	Fuel Depot	t						
6	202200-07.000000-00000	7 Payee addre		ate; Zip Cod	le				
	\$22.77	2610 Broa	dway						
		Houston, T	™ 77012						
8	PURPOSE			I.	h) Dan-				
٥	OF	(a) Category (s Event Exp	See Categories listed at the top of this	s schedule)	(b) Description Check if travel	l outside of Texas. Complete Schedule T.			
	EXPENDITURE	=voiit Exb			Check if Austii	n, TX, officeholder living expense			
					Snacks for L	District I Senior Prom			
			E 0						
9	Complete ONLY if direct expenditure to benefit C/OF		fficeholder name	Office soug	ght	Office held			
Ĺ	Date	Payee name							
L	06/04/2015	Gathering	Eagles						
-	Amount (\$)	Payee addr	00 m 0 m 0 m 0 m 0 m 0 m 0 m 0 m 0 m 0	ate; Zip Cod	de				
1	\$100.00	Best effort	'S						
1		jenen "							
L		Houston, 7							
اً	PURPOSE OF	5800000 20 25000	(See Categories listed at the top of this	s schedule)	(b) Description	d outside of T			
	EXPENDITURE	Event Exp	ense	1	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
						BBQ plates for fundraiser			
	Complete ONLY if direct		fficeholder name	Office soug	ght	Office held			
L	expenditure to benefit C/O								
Ĺ	Date	Payee nam							
	05/17/2015	Gonzalez,	Rene						
Γ	Amount (\$)	Payee addr	TORRIGHT STREET STREET	tate; Zip Cod	de				
1	\$431.18	4407 Else	er St						
1									
		Houston,	TX 77009						
Γ	PURPOSE		(See Categories listed at the top of this	s schedule)	(b) Description		-		
1	OF EXPENDITURE	Event Exp				el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense			
1						tin, TX, officeholder living expense District I Senior Prom			
					Jaming Of L				
一	Complete ONLY if direct		Officeholder name	Office sou	ght	Office held			
	expenditure to benefit C/O			200	0.657				
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee			Fees Office Overhead/Rental Expense Food/Beverage Expense Office Expense Gitt/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					Travel in District Travel Out of District OTHER (enter a category not listed above)		
					de explains l	how to com	nple	te this form.			
1	Total pages Schedule F1:	2							3	Filer ID	
	Sch: 19/47 Rpt: 43/71		Gallegos, R								
4	Date 03/13/2015	5	Payee name HEB								
6	Amount (\$)	7	Payee addres	25.00	State;	; Zip Cod	le				
	\$21.12		3111 Wood	Iridge							
			Houston, TX	X 77087							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	e top of this sch	iedule) ((b)	Description			
	OF EXPENDITURE			rage Expense				느		de of Texas. Complete Sch officeholder living expense	
										ayor Parker's Ice C	
										es.	-
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Off	iceholder name	(Office soug	jht			Office held	
Γ	Date	Γ	Payee name	8							
	06/11/2015		Hilton & GR	RB CC							
Г	Amount (\$)		Payee addre	ess; City;	State;	; Zip Coo	de				
	\$15.14		1600 Lama	ır							
	į		No. a process	Suprova Management							
L			Houston, T	X 77010							
	PURPOSE OF	(a)		See Categories listed at the		nedule)	(b)	Description	01:4	ide of Tayon Committee a	nedule T
	EXPENDITURE		Office Over	rhead/Rental Exp	ense					ide of Texas. Complete Sch , officeholder living expense	
								Parking for ir			
L		L									
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ficeholder name	(Office souç	ght			Office held	
Γ	Date	Γ	Payee name	į.							
	05/01/2015		Hobby Lob								
Г	Amount (\$)	Γ	Payee addre	ess; City;	State	e; Zip Coo	de				
	\$133.39		8715 W Lo	op South							
			Houston, T	X 77096					_		
Γ	PURPOSE OF	(a		See Categories listed at th	ne top of this sch	hedule)	(b)	Description	M-000000000000000000000000000000000000	100000 - 000000 - 0000000	
	EXPENDITURE		Event Expe	ense						side of Texas. Complete Sc C, officeholder living expens	
								_		ct I Senior Prom	
									_		
Γ	Complete ONLY if direct		Candidate/Of	ficeholder name	8	Office sou	ght		_	Office held	
L	expenditure to benefit C/O	п.									
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SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overhead/Rental Food/Beverage Expense Overhead/Rental Food/Beverage Ex	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
		The Instruction Guide explains how to complete this	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 20/47 Rpt: 44/71	Gallegos, Robert	
4	Date	Payee name	
	03/29/2015	Houston 8 Team LLC	
6	Amount (\$) \$250.00	Payee address; City; State; Zip Code 1939 West Gray, Suite 201 Houston, TX 77019	
8	PURPOSE OF EXPENDITURE	, recounting, burning	ription neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense Irned campaign contribution.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
l	02/21/2015	Houston East End Chamber of Commerce	
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 550 Gulfgate Center Mall	
L		Houston, TX 77087	
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense nsorship of HEEC Golf Tournament
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Γ	Date	Payee name	
l	01/24/2015	Houston Livestock Show & Rodeo	
	Amount (\$) \$260.00	Payee address; City; State; Zip Code PO Box 20070	
١		Houston, TX 77225	
	PURPOSE OF EXPENDITURE		cription heck if travel outside of Texas. Complete Schedule T. heck if Austin, TX, officeholder living expense Tejano Day sponsorship.
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	ense Donations Made By Officeholder/Politica		Food/Beverage Exper Gift/Awards/Memorial Legal Services The Instruction G	s Expense		ense ges/Contract La		Travel in District Travel Out of District OTHER (enter a category not listed about	ove)
1 Total pages 6	Schodula E1:	2 EII ED NAS		uiue expiaiiis i	TOW TO COM	piete tilis 10		Filor ID	
16 1051	Rpt: 45/71	2 FILER NAM Gallegos,					3	Filer ID	
4 Date		5 Payee nam	e						
02/25/2015			exas Fire Fighte	er Credit Unio	n				
6 Amount (\$)		7 Payee addi	ress; City;	State;	Zip Cod	e			
a::-10	\$150.00	PO Box 7	0009		25				
		Houston,	TX 77270						
8 PURPOS	SE		(See Categories listed at		edule) (b) Descript			
OF EXPENDIT	URE		ons/Donations M					ide of Texas. Complete Schedule T.	
An Artestant Burde Action Villa	and wild Stand	Candidate	e/Officeholder/Po	olitical Commi	ittee			, officeholder living expense Dwight Brazile Fund.	
						2311110		giit Diaciio i diidi	
9 Complete Of expenditure	NLY if direct to benefit C/OI		fficeholder name	C	Office soug	ht		Office held	
Date		Payee nam	ne						
01/31/2015	j	Human R	ights Campaign						
Amount (\$)		Payee add	ress; City;	State;	Zip Cod	е			
	\$264.50	5060 Wes	st Alabama						
		Houston,	TX 77056						
PURPOS	SE	(a) Category	(See Categories listed a	t the top of this sch	edule)	b) Descrip	tion		
OF EXPENDIT	URF	Event Exp				Check	k if travel outs	side of Texas. Complete Schedule T.	
LAFENDII	ONL							(, officeholder living expense	
						Spons	orsnip of	18th Annual Gala Dinner	
	NLY if direct		Officeholder name	C	Office soug	ht		Office held	
expenditure	to benefit C/O	Н							
Date		Payee nan	ne						
06/09/2015	5	Icebox 44	67						
Amount (\$)		Payee add	ress; City;	State;	; Zip Cod	le			
10.000E/1700.	\$10.00	12968 W	estheimer						
		Houston,	TX 77077						
PURPO	SE		(See Categories listed a	at the ton of this sah	nedule)	(b) Descrip	otion		
OF		AND THE RESERVE TO TH	tation Equipment		iedule)			side of Texas. Complete Schedule T.	
EXPENDIT	UKE	Expense	1-1		- 1			X, officeholder living expense	
						Gas ca	ard for Se	enior visits	
		30 WARN S W						West, 150 Sept. 1500	
	NLY if direct to benefit C/O		Officeholder name	(Office sou	ght		Office held	
САРСПИКИЕ	to benefit 6/0								
I									

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Travel in District Travel Out of District

Transportation Equipment & Related Expense Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 22/47 Rpt: 46/71 Gallegos, Robert 4 Date Payee name 03/01/2015 J.Dinkins Consulting 6 Amount (\$) Payee address; City; State; Zip Code \$190.00 PO Box 992 Houston, TX 77001 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense General consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name J.Dinkins Consulting 04/12/2015 Amount (\$) Payee address; State; Zip Code \$150.00 PO Box 992 Houston, TX 77001 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense General consulting. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/11/2015 J.Dinkins Consulting Amount (\$) Payee address; City; State; Zip Code \$120.00 PO Box 992 Houston, TX 77001 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense General consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

	Candidate/Officeholder/Political	Committee 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:	2 FILER NAME 3 Filer ID
	Sch: 23/47 Rpt: 47/71	Gallegos, Robert
4	Date	5 Payee name
	06/01/2015	J.Dinkins Consulting
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code PO Box 992 Houston, TX 77001
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense General consulting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	04/20/2015	Judge Richard C Vara Campaign
Γ	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	PO Box 231502
		Houston, TX 77023
Γ	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Sponsorship of Annual Golf Tournament
r	Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	06/27/2015	Kim Son Restaurant
	Amount (\$) \$106.43	Payee address; City; State; Zip Code 2001 Jefferson
		Houston, TX 77003
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dinner for volunteers in Pride Parade
	Complete ONLY if direct expenditure to benefit C/0	Candidate/Officeholder name Office sought Office held OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District

	Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		nmittee	Gift/Awards/Memorials E Legal Services	Expense	Printing Exp Printing Ex Salaries/W	pense		Т	ravel in District Fravel Out of District DTHER (enter a category not listed above)	
				The Instruction Gui	ide explains l	how to co	mple	te this form.			
1	Total pages Schedule F1:	2	FILER NAME	Ξ				3	3 F	Filer ID	
	Sch: 24/47 Rpt: 48/71		Gallegos, F	Robert							
4	Date	5	Payee name								
	05/04/2015		LAMDA Le	gal							
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de				
	\$200.00		3500 Oakla	awn Ave							
l	8		Suite 500								
			Dallas, TX	75219							
L	BUBBOOF	(-)					(1-1				
8	PURPOSE OF	(a		See Categories listed at th	e top of this sch	edule)	(b)	Description	utoide	e of Texas. Complete Schedule T.	
	EXPENDITURE		Event Expe	ense						officeholder living expense	
										nnual fundraiser	
9	Complete ONLY if direct		Candidate/∩f	ficeholder name	(Office sou	aht			Office held	
Ľ	expenditure to benefit C/O		oundidate/on	nocholder Harrie		Jilioc 300	giic			Office field	
Γ	Date		Payee name	9						THE PARTY OF THE P	
l	01/24/2015		LULAC Co	uncil 402							
Г	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de				
l	\$150.00		PO Box 30	498							
l											
l			Houston, T	X 77249							
L	BUBBOOK	,_	1/8				//->				
ı	PURPOSE OF	(a		See Categories listed at th	ne top of this sch	nedule)	(a)	Description	outeid	le of Texas. Complete Schedule T.	
l	EXPENDITURE	1	Event Exp	ense				<u> </u>		officeholder living expense	
ı								Sponsorship of			
ı										-	
H	Complete ONLY if direct		Candidate/Of	ficeholder name		Office sou	ıaht			Office held	
ı	expenditure to benefit C/O						3				
F	Data	Т									
	Date		Payee name	е							
L	02/16/2015		La Griglia								
	Amount (\$)		Payee addr		State	e; Zip C	ode				
1	\$1,349.72		2002 W G	ray St							
ı		1									
ı			Houston,	ΓX 77019							
\vdash	PURPOSE	(;		See Categories listed at t	he ton of this	bodulc)	(b)	Description	, , , , ,		
	OF	1,		see Categories listed at t erage Expense	THE TOP OF THIS SC	nedule)	[`~'		outsi	de of Texas. Complete Schedule T.	
	EXPENDITURE		, courbeve	c.ago Enpoliso						officeholder living expense	
								Food and drin	nks	for fundraiser.	
	Complete ONLY if direct	_	Candidate/O	fficeholder name		Office so	ught			Office held	
	expenditure to benefit C/C	Н					9753				
\vdash											

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica			Printing Salaries		se Travel Out of District c/Contract Labor OTHER (enter a category not listed above)
_	- Audio Sancioscopo - Audio -		The Instruction Guide explains	now to (omple	ecks read two distributions
1	Total pages Schedule F1:	2				3 Filer ID
	Sch: 25/47 Rpt: 49/71	L	Gallegos, Robert			
4	Date	5	Payee name			
	01/13/2015		LaQuita Inns & Suites			
6	Amount (\$)	7	Payee address; City; State	e; Zip (Code	
	\$184.34		300 East 11th St			
	-550					
			Austin, TX 78701			
8	PURPOSE	10			/1-1	December
ō	OF	(a)	Category (See Categories listed at the top of this so	hedule)	(a)	Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE		Travel Out of District			Check if Austin, TX, officeholder living expense
						Hotel for 84th Legislative Session opening.
9	Complete ONLY if direct		Candidate/Officeholder name	Office s	ought	Office held
	expenditure to benefit C/O	Н				
-	Date	Г	Payee name			
	01/24/2015		Lillie Schechter Consulting			
\vdash		╀		e; Zip (Codo	
	Amount (\$) \$1,250.00		The state of the s	e, ∠ip (coue	
	Φ1,250.00		1 Greenway Plaza			
			Suite 740			
		L	Houston, TX 77046			
	PURPOSE	(a	Category (See Categories listed at the top of this so	chedule)	(b)	Description
	OF EXPENDITURE	1	Consulting Expense			Check if travel outside of Texas. Complete Schedule T.
						Check if Austin, TX, officeholder living expense Fundraising consulting.
						i analasing consulting.
\vdash	Complete ONLY if direct	_	Candidate/Officeholder name	Office s	Oliupt	Office held
	expenditure to benefit C/O		Candidate/Officerolder Hame	Jilice S	Jugnit	Office Held
⊨		_				
l	Date		Payee name			
L	03/06/2015	\perp	Lillie Schechter Consulting			
	Amount (\$)			e; Zip	Code	
	\$1,250.00		1 Greenway Plaza			
1			Suite 740			
			Houston, TX 77046			
H	PURPOSE	(a	Category (See Categories listed at the top of this se	chedule)	(b)) Description
1	OF		Consulting Expense		'	Check if travel outside of Texas. Complete Schedule T.
1	EXPENDITURE					Check if Austin, TX, officeholder living expense
1						Fundraising consulting
L						
	Complete ONLY if direct		Candidate/Officeholder name	Office s	sought	t Office held
	expenditure to benefit C/O	Ή				
Γ						
ı						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District

Travel Out of District
OTHER (enter a category not listed above) Printing Expense Salaries/Wages/Contract Labor Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 26/47 Rpt: 50/71 Gallegos, Robert 4 Date Payee name 04/01/2015 Lillie Schechter Consulting 6 Amount (\$) Payee address; City: State; Zip Code \$1,250.00 1 Greenway Plaza Suite 740 Houston, TX 77046 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraising consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/06/2015 Lillie Schechter Consulting Amount (\$) Payee address; City; State; Zip Code \$1,250.00 1 Greenway Plaza Suite 740 Houston, TX 77046 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraising consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2015 Lillie Schechter Consulting Amount (\$) Payee address; State; Zip Code \$1,250.00 1 Greenway Plaza Suite 740 Houston, TX 77046 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraising consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
4 7-1-1		plains how to complete this form.	
1 Total pages Schedule F1: Sch: 27/47 Rpt: 51/71	Gallegos, Robert		3 Filer ID
4 Date	5 Payee name		
01/24/2015	Lulac District VIII		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
\$175.00	PO Box 8620		
	Houston, TX 77249		
8 PURPOSE OF	(a) Category (See Categories listed at the top of		
EXPENDITURE	Fees		el outside of Texas. Complete Schedule T.
			in, TX, officeholder living expense fee for Cinco de Mayo parade.
		registration	rice for Cirico de Mayo parade.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held
•			
Date	Payee name		
06/29/2015	METRO		
Amount (\$)	5/4 Jun	State; Zip Code	
\$6.25	1900 Main		
	Houston, TX 77002		
PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Description	
OF EXPENDITURE	Transportation Equipment & Rela		el outside of Texas. Complete Schedule T.
	Expense		tin, TX, officeholder living expense
		Travel to Pr	ide Parade
Complete ONE V if discret			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
02/12/2015	Merida Restaurant		
Amount (\$)	Payee address; City;	State; Zip Code	
\$85.59	2509 Navigation Blvd	accentations (* - Cence • 27 - Coloradation)	
	Houston, TX 77003		
PURPOSE	(a) Category (See Categories listed at the top of	this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	The state of the s	el outside of Texas. Complete Schedule T.
EXPENDITURE			tin, TX, officeholder living expense
		District I sta	off meeting.
0 11 6			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Git mmittee Le	od/Beverage Expense t/Awards/Memorials Expense gal Services ne Instruction Guide expla		pens ages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID
	Sch: 28/47 Rpt: 52/71		Gallegos, Rob	pert					
4	Date	5	Payee name				-		
	03/07/2015			Alumni Association					
6	Amount (\$)	7	Payee address;	City; S	tate; Zip Co	de			
	\$100.00		PO Box 5383			-			
			Houston, TX 7		_				
8	PURPOSE OF	(a)		Categories listed at the top of thi	is schedule)	(b)	Description		
	EXPENDITURE		Advertising Ex	rpense					ide of Texas. Complete Schedule T. , officeholder living expense
							Advertising in		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	holder name	Office sou	ght			Office held
	Date		Payee name						
	02/21/2015		Mount Carme	l Academy					
Т	Amount (\$)		Payee address;	City; S	tate; Zip Co	de			
	\$150.00		7155 Ashburn	St					
			Houston, TX 7	77061					
	PURPOSE	(a)	Category (See (Categories listed at the top of thi	is schedule)	(b)	Description		
	OF EXPENDITURE		Advertising Ex		io delloudio)	3 3	Check if travel of		ide of Texas. Complete Schedule T.
	EXI ENDITORE								, officeholder living expense
							Ad in progran	n.	
H	Complete ONLY if direct	Ļ	Candidate/Office	holder name	Office				000
	expenditure to benefit C/OI		candidate/Office	noider name	Office sou	gnt			Office held
L	2								
	Date 03/14/2015		Payee name	oiotion of Latina Flac					
_	The Committee of the Co			ciation of Latino Elec	100.00		ted Officials		
	Amount (\$)		Payee address;	e service en	tate; Zip Co	de			
	\$100.00		1122 W Wash	lington Biva					
			Third dFloor						
		L	Los Angeles,	CA 90015					
	PURPOSE OF	(a)		Categories listed at the top of th	is schedule)	(b)	Description		
l	EXPENDITURE		Fees						ide of Texas. Complete Schedule T. ., officeholder living expense
							Membership		
							via (10 again) round Filo Filo Filo (Filo)		1000
\vdash	Complete ONLY if direct		Candidate/Office	holder name	Office sou	ght			Office held
	expenditure to benefit C/O	Н			1000 FOR	-			ASSESSMENT STORAGES
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SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		mmittee		erage Expense ds/Memorials Expe vices	nse	Polling Exp Printing Ex	pense			Travel in Distri Travel Out of D		
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	Sch: 29/47 Rpt: 53/71		Gallegos,	Robert									
4	Date	5	Payee nam	<u> </u>									
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6	Amount (\$)	7	Payee addr	ess;	City;	State;	Zip Co	de					
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			Third Floo	r									
			Los Angel	es, CA 9	0015								
8	PURPOSE	(a	279		ries listed at the top	- 4 41-1 1-		(b)	Description				
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									Registration	fee	s for Annua	al Convention	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/O	fficeholde	r name	0	ffice sou	ght			Office I	held	
	Date		Payee nam	e									
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	\$50.00		PO Box 45	527									
			New York	City, NY	10163								
	PURPOSE	(a	Category (See Categor	ries listed at the top	of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Contribution	ons/Dona	ations Made	Ву	1					mplete Schedule T.	
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	expenditure to benefit C/O		Carialdate/O	iliceriolae	Tiame	O	mice sou	grit			Office	neiu	
	Date	Γ	Payee nam	е.									
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			Seattle, W	/A 98107	,								
	PURPOSE	(a) Category	(Soo Catago	ries listed at the top	o of this sabe	adula)	(b)	Description				
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	EXPENDITURE		82	5 1					Check if Austin	n, TX	t, officeholder livi	ing expense	
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	Complete ONLY if direct expenditure to benefit C/O		Candidate/O	fficeholde	er name	0	Office sou	ght			Office	held	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overh- Food/Beverage Expense Polling Expe Gift/Awards/Memorials Expense Printing Expe	
		The Instruction Guide explains how to comp	plete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID
	Sch: 30/47 Rpt: 54/71	Gallegos, Robert	
4	Date	5 Payee name	•
	04/01/2015	Net Victories	
6	Amount (\$) \$190.00	7 Payee address; City; State; Zip Code 1545 NW Market St Seattle, WA 98107	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website renewal.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ot Office held
ſ	Date	Payee name	
	04/29/2015	Net Victories	
	Amount (\$) \$18.34	Payee address; City; State; Zip Code 1545 NW Market St	
L		Seattle, WA 98107	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Website
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held
Γ	Date	Payee name	
	06/09/2015	Net Victories	
	Amount (\$) \$18.28	Payee address; City; State; Zip Code 1545 NW Market St	9
L		Seattle, WA 98107	
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Website
Γ	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political C	Food/Beverage Expense Gift/Awards/Memorials Expense Committee Legal Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)			
	The Instruction Guide explains h	low to complete this form.				
1 Total pages Schedule F1: 2	P FILER NAME		3 Filer ID			
Sch: 31/47 Rpt: 55/71	Gallegos, Robert					
4 Date 5	Payee name					
06/09/2015	Net Victories					
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\$0.18	1545 NW Market St					
	Seattle, WA 98107					
8 PURPOSE (a	a) Category (See Categories listed at the top of this sche	dule) (b) Description				
OF EXPENDITURE	Fees		outside of Texas. Complete Schedule T.			
ZX ZXZXXX			n, TX, officeholder living expense			
 		Website fee.				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	ffice sought	Office held			
experiulture to beriefft C/OH						
Date	Payee name					
03/14/2015	Office Depot					
Amount (\$)	Payee address; City; State;	Zip Code				
\$9.74	1576 West Gray	p				
8.222.0						
	Houston, TX 77019					
BURDOOF /	STREET ST	Tax .				
PURPOSE (a	a) Category (See Categories listed at the top of this sche	The state of the s	Landle dame of the a			
EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Office suppli				
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held			
expenditure to benefit C/OH	Sandidate/Sindsholds have	mice sought	Office field			
Date	Payee name					
05/26/2015	Office Depot					
Amount (\$)	Payee address; City; State;	Zip Code				
\$76.85	1576 West Gray					
	Houston, TX 77019					
PURPOSE (edule) (b) Description				
OF	 (a) Category (See Categories listed at the top of this school Office Overhead/Rental Expense 		el outside of Texas. Complete Schedule T.			
EXPENDITURE	Office Overhead/Nerital Expense		in, TX, officeholder living expense			
		Office suppl	ies			
Complete ONLY if direct	Candidate/Officeholder name C	Office sought	Office held			
expenditure to benefit C/OH						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 32/47 Rpt: 56/71 Gallegos, Robert 4 Date Payee name 05/04/2015 Office MAX 6 Amount (\$) Payee address; City; State; Zip Code \$6.48 24212 Commercial Dr Richmond, TX 77471 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Prom Sashes for District I Senior Prom Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/20/2015 Office MAX Amount (\$) Payee address; City; State; Zip Code \$24.23 1576 West Gray Houston, TX 77019 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Office Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2015 Original Ninfa's Amount (\$) Payee address; State; Zip Code \$225.71 2704 Navigation Blvd Houston, TX 77003 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Donor appreciation dinner Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Travel Out of District

Transportation Equipment & Related Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 33/47 Rpt: 57/71 Gallegos, Robert 4 Date Payee name 04/12/2015 Our Lady of Guadalupe School 6 Amount (\$) Payee address; State; Zip Code City: \$25.00 2405 Navigation Blvd Houston, TX 77003 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF **Event Expense** Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship of Annual Party on the Plaza Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/21/2015 Pappas BBQ Amount (\$) Payee address; City; State; Zip Code \$107.21 1100 Smith St Houston, TX 77002 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense District I staff meeting. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/29/2015 Party City Amount (\$) Payee address; City; State; Zip Code \$163.85 516 Gulfgate Center Houston, TX 77087 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF **Event Expense** Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Pride Parade Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Inmittee Legal Services	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
			The Instruction Guide explains h	ow to com	ple	te this form.					
1	Total pages Schedule F1: Sch: 34/47 Rpt: 58/71	2	FILER NAME Gallegos, Robert				3	Filer ID			
4	Date	5	Payee name				_		_		
	04/29/2015	1	Pig Roast Fundraiser								
6	Amount (\$)	7	Payee address; City; State;	Zip Cod	е		_				
	\$63.48		257 N Greenwood St								
			Houston, TX 77011								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	dule) (b)	Description					
	OF EXPENDITURE		Event Expense					ide of Texas. Complete Schedule T.			
						Sponsorship		, officeholder living expense			
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9	Complete ONLY if direct		Candidate/Officeholder name Of	ffice soug	ht			Office held	_		
	expenditure to benefit C/O		Salididato, Sinosifoldo, Mario	mee soug				Office field			
	Date		Payee name								
	02/07/2015		Piryx, Inc.								
Г	Amount (\$)		Payee address; City; State;	Zip Cod	le						
	\$28.75		144 2nd St. 1st Floor	07							
ı											
			San Francisco, CA 94105								
Г	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule) ((b)	Description					
	OF EXPENDITURE		Fees			Accessor to the control of the contr		side of Texas. Complete Schedule T.			
								s, officeholder living expense tion procession fee			
						Online contri	Jul	lion procession lee			
H	Complete ONLY if direct		Candidate/Officeholder name O	ffice soug	ht			Office held	_		
L	expenditure to benefit C/OI	Н									
	Date		Payee name								
l	02/12/2015		Piryx, Inc.								
Г	Amount (\$)	Г	Payee address; City; State;	Zip Coo	le				_		
l	\$57.50		144 2nd St. 1st Floor								
l											
L			San Francisco, CA 94105								
	PURPOSE OF	(a	Category (See Categories listed at the top of this sche	edule)	(b)	Description					
	EXPENDITURE		Fees					side of Texas. Complete Schedule T.			
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\vdash	Complete ONLY if direct	1	Candidate/Officeholder name O	Office sough	tht			Office held	_		
	expenditure to benefit C/O		- Indian Constitution of the Constitution of t	oc sout	ji 11			Office field			
\vdash					_						

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Exper Printing Expe		Transportation Equipment & Related Expe Travel in District Travel Out of District OTHER (enter a category not listed above	
			The Instruction Guide expla	ains how to comp	lete this form.		
1	Total pages Schedule F1:	2 FILER NAM	1E			3 Filer ID	
	Sch: 35/47 Rpt: 59/71	Gallegos,	Robert				
4	Date	5 Payee nam	е				
	02/17/2015	Piryx, Inc.					
6	Amount (\$)	7 Payee addr	ess; City; S	tate; Zip Code			
	\$2.88	144 2nd S	t. 1st Floor	500 BOOK STATE \$100 STATE STAT			
		San Franc	isco, CA 94105				
8	PURPOSE		58	/h	Description		
Ĭ	OF	Fees	See Categories listed at the top of the	is schedule)	Description Check if travel o	utside of Texas, Complete Schedule T.	
	EXPENDITURE	1 003				TX, officeholder living expense	
					Online contrib	ution procession fee	
9	Complete ONLY if direct		fficeholder name	Office sough	t	Office held	
	expenditure to benefit C/O	Н					
	Date	Payee nam	e				
	02/19/2015	Piryx, Inc.					
T	Amount (\$)	Payee addr	ess; City; S	tate; Zip Code			
	\$102.07		t. 1st Floor				
		San Franc	isco, CA 94105				
	PURPOSE	(a) Category	See Categories listed at the top of th	is schedule) (b) Description		
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						TX, officeholder living expense	
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ı	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sough	t	Office held	
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l	Date	Payee nam	e				
	02/24/2015	Piryx, Inc.					
	Amount (\$)	Payee addr	ess; City; S	tate; Zip Code			
	\$28.75	144 2nd S	t. 1st Floor				
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		San Franc	isco, CA 94105				
H	PURPOSE	(a) Category	See Categories listed at the top of th	is schedule) (b) Description		
l	OF	Fees	See Categories listed at the top of th	is scriedule)	The second secon	utside of Texas. Complete Schedule T.	
l	EXPENDITURE					TX, officeholder living expense	
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Γ	Complete ONLY if direct		fficeholder name	Office sough	t	Office held	
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SCHEDULE F1

Advertising Expense Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Candidate/Officeholder/Political Committee			Legal Services The Instruction Guide ex	Salaries/	Wages	s/Contract Labor		OTHER (enter a category not list	ed above)
1	Total pages Schedule F1:	2	EII ED NAM					2	Files ID	
	Sch: 36/47 Rpt: 60/71	_	Gallegos, I					J	Filer ID	
4	Date	5	Payee name	9						
	02/25/2015		Piryx, Inc.							
6	Amount (\$)	7	Payee addre	ess; City;	State; Zip Co	ode				
	\$25.88		144 2nd St	. 1st Floor						
l										
L			San Franc	isco, CA 94105						
8	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description			
l	OF EXPENDITURE		Fees						de of Texas. Complete Schedule T	•3
l									officeholder living expense	
l							Online contrib	outi	on processing fee	
L										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	Office sou	ught			Office held	
Г	Date		Payee name	9						
l	02/23/2015		Piryx, Inc.							
H	Amount (\$)		Payee addre	ess; City;	State; Zip Co	oho		_		
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			San Franci	sco, CA 94105						
Г	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description			
l	OF EXPENDITURE		Fees				Check if travel of	outsi	de of Texas. Complete Schedule 1	
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							Online contrib	outi	on processing fee	
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	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Of	ficeholder name	Office sou	ught			Office held	
	expenditure to benefit C/Or	7								
Г	Date		Payee name	9						
l	02/20/2015		Piryx, Inc.							
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			San Franc	isco, CA 94105						
Г	PURPOSE	(a)	Category (See Categories listed at the top of	this schedule)	(b)	Description			
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l	EXPENDITURE						Check if Austin,	TX,	officeholder living expense	
l							Online contrib	outi	ion processing fee	
Γ	Complete ONLY if direct		Candidate/Of	ficeholder name	Office so	ught			Office held	
1	expenditure to benefit C/OI	4								
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica		nmittee	Gift/Awards/Memorials I Legal Services	Expense	Printing Ex Salaries/W	pense ages/	e /Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
				The Instruction Gu	ide explains	how to cor	nple	te this form.			
1	. •	2	FILER NAME						3	Filer ID	
	Sch: 37/47 Rpt: 61/71		Gallegos, R	obert							
4	Date	5	Payee name								
	06/22/2015		Piryx, Inc.								
6	Amount (\$)	7	Payee addre	ss; City;	State;	; Zip Coo	de				
	\$1.44		144 2nd St.	1st Floor							
			San Francis	sco, CA 94105							
8	PURPOSE	(a)	Category (Se	ee Categories listed at th	e top of this sch	nedule)	(b)	Description			
l	OF EXPENDITURE		Fees			100				de of Texas. Complete Schedule T,	
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ı	Date 06/25/2015		Payee name Piryx, Inc.								
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	Amount (\$) \$28.75		Payee addre	10 (5.1)	State	; Zip Co	ae				
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L				sco, CA 94105							
l	PURPOSE OF	(a)		ee Categories listed at th	e top of this sch	nedule)	(b)	Description			
l	EXPENDITURE		Fees							ide of Texas. Complete Schedule T. , officeholder living expense	
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l											
Г	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office held	
	expenditure to benefit C/O	H									
Г	Date		Payee name								
	06/29/2015		Piryx, Inc.								
Г	Amount (\$)		Payee addre	ss; City;	State	e; Zip Co	de				
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l											
ı			San Francis	sco, CA 94105							
Г	PURPOSE	(a	Category (s	ee Categories listed at th	ne top of this sch	hedule)	(b)	Description			
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 38/47 Rpt: 62/71 Gallegos, Robert 4 Date Payee name 05/08/2015 Piryx, Inc. 6 Amount (\$) Payee address; City; State; Zip Code 144 2nd St. 1st Floor \$14.38 San Francisco, CA 94105 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online contribution processing fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/09/2015 Piryx, Inc. Amount (\$) Payee address; City: State; Zip Code \$28.75 144 2nd St. 1st Floor San Francisco, CA 94105 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Fees Check if travel outside of Texas, Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Online contribution processing fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/04/2015 Piryx, Inc. Amount (\$) Payee address; City; State; Zip Code \$14.38 144 2nd St. 1st Floor San Francisco, CA 94105 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Online contribution processing fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica	al Committee 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:	
L	Sch: 39/47 Rpt: 63/71	Gallegos, Robert
4	Date	5 Payee name
	04/30/2015	Ripley House
	Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 8223 Bo Jack Dr Houston, TX 77040
8	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship of Senior Dance
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/11/2015	Sellers Bros
	Amount (\$) \$33.90	Payee address; City; State; Zip Code 8011 Elvera St
	BUBBOOK	Houston, TX 77012
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for District I Senior Prom
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/11/2015	Sellers Bros
	Amount (\$) \$6.78	Payee address; City; State; Zip Code 8011 Elvera St
		Houston, TX 77012
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for District I Senior Prom
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense
Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 40/47 Rpt: 64/71 Gallegos, Robert 4 Date 5 Payee name 04/14/2015 Shipley's 6 Amount (\$) Payee address; City; State; Zip Code \$11.80 3932 N Main St Houston, TX 77009 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check if travel outside of Texas, Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for St. Alphonsus April Birthday Celebration Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/29/2015 Shipley's Donuts Amount (\$) Payee address; City; State; Zip Code \$16.01 5923 Gulf Freeway Houston, TX 77023 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Breakfast for seniors Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/09/2015 Spanky's Pizza Amount (\$) Payee address; City; State; Zip Code \$71.77 4659 Telephone Rd Houston, TX 77087 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense District I staff dinner following Hobby Area Management District Meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage I

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	The Instruction Guide explains how to complete this form.
1		
	Sch: 41/47 Rpt: 65/71	Gallegos, Robert
4	Date	5 Payee name
	05/08/2015	Spanky's Pizza
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$52.18	4659 Telephone Rd
		· ·
		Houston, TX 77087
8	PUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		District I staff meeting
		2 iouniot i stati mostang
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
·	expenditure to benefit C/O	
	Date	Payee name
	03/07/2015	Sprint 2 Print
	Amount (\$)	Payee address; City; State; Zip Code
	\$243.56	8748 Clay Rd, Suite 300
		The city it all called coo
		Houston TV 77000
L		Houston, TX 77080
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Labels
		Labots
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨		
	Date	Payee name
	02/22/2015	Staples
Г	Amount (\$)	Payee address; City; State; Zip Code
ı	\$16.00	1919 Taylor St
		Houston, TX 77007
H	PURPOSE	
	OF	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Office supplies
1		• • • • • • • • • • • • • • • • • • • •
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
\vdash		
1		
ı		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 42/47 Rpt: 66/71	Gallegos, Robert
4	Date	5 Payee name
	02/21/2015	Stephen F Austin High School
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1700 Dumble St
	Ψ100.00	1700 Duffible St
		A 2
		Houston, TX 77023
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising in SFA White Rose Dinner program
		Advertising in STA write Rose Diffile program
9	Complete ONLY if direct	Candidate/Officeholder name Office county
J	expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
-11122		
	Date	Payee name
	02/25/2015	TDWHarris
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	766 Thornbranch Dr
		Houston, TX 77079
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Sponsorship of 2015 Women History Awards
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2015	Taqueria Del Sol
	Amount (\$)	Payee address; City; State; Zip Code
	\$56.70	8114 Park Place Blvd
		Houston, TX 77017
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		District I staff meeting
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - al Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhea Polling Expens Printing Expen		Transportation Equipment & Rela Travel in District Travel Out of District OTHER (enter a category not list	
L			The Instruction Guide explains	how to compl	ete this form.		,
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	
L	Sch: 43/47 Rpt: 67/71	Gallegos, R	obert				
4	Date	5 Payee name					
L	02/08/2015	Tejano Asso	ociation for Historical Prese	ervation			
6	Amount (\$) \$150.00	7 Payee address PO Box 231		Zip Code			
		Houston, T	< 77223				
8	PURPOSE OF	(a) Category (Se	ee Categories listed at the top of this sch	edule) (b)	Description		
	EXPENDITURE	Fees				outside of Texas. Complete Schedule T	<u>.</u>
l						TX, officeholder living expense	1
ı					Registration	ee for Cesar Chavez Para	ae.
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Offid	ceholder name C	Office sought		Office held	
Г	Date	Payee name					
	05/27/2015	Theatre Dist	trict				
	Amount (\$)	Payee addres	ss; City; State:	Zip Code			
	\$15.00	511 Rusk					
		Houston, TX	77012				
	PURPOSE	(a) Category (Se	e Categories listed at the top of this sch	edule) (b)	Description		
	OF EXPENDITURE	Fees	3		Check if travel o	outside of Texas. Complete Schedule T.	
	5-20-20-00-0					TX, officeholder living expense	
					Parking fee at	fter City Hall Annex parkin	g garage
-	Complete ONLY if direct	Candidate/Offic	coholder name	\(\text{\text{ff}} = \text{\$\cdot\t			
	expenditure to benefit C/O	d Canadate/Onit	centituder flame C	Office sought		Office held	
	Date	Payee name					
	03/06/2015	Treebeards					
	Amount (\$)	Payee addres	s; City; State;	Zip Code			
	\$78.48	315 Travis	W 5500 Str 1000 Str 1				
		Houston, TX	77002				
	PURPOSE	(a) Category (Se	e Categories listed at the top of this sche	edule) (b)	Description		
	OF EXPENDITURE		age Expense		Check if travel o	utside of Texas. Complete Schedule T.	
						TX, officeholder living expense	
					District I staff	meeting	
	Complete ONLY if direct	Candidate/Offic	eholder name	office course		O# 1.1.	
	expenditure to benefit C/OF		Chorder Harrie	office sought		Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic	y - al Co		Of Po nse Pr Sa	ffice Overh olling Expe rinting Expe alaries/Wag	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
L			The Instruction Guide 6	explains how	w to com	plete this form.	
1	Total pages Schedule F1:	2				3	Filer ID
L	Sch: 44/47 Rpt: 68/71		Gallegos, Robert				
4	Date	5	Payee name				
l	04/20/2015		Treebeards				
6	Amount (\$) \$33.56	7	Payee address; City; 315 Travis Houston, TX 77002	State; Z	čip Cod€	3	
8	PURPOSE OF EXPENDITURE	(a)	Category (see Categories listed at the top Food/Beverage Expense	of this schedule	e) (£		tside of Texas. Complete Schedule T. X, officeholder living expense neeting
9	Complete ONLY if direct expenditure to benefit C/O	Н	Candidate/Officeholder name	Offic	e sough	t	Office held
	Date		Payee name				
L	01/26/2015		Victory Fund				
	Amount (\$) \$1,750.00		Payee address; City; 1133 15th St, Suite 350	State; Zi	ip Code		
			Washington, DC 20005				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Event Expense	of this schedule	_{e)} (b	Check if Austin, T	side of Texas. Complete Schedule T. X, officeholder living expense local Annual Champagne Brunch.
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	1	Candidate/Officeholder name	Office	e sough	t	Office held
	Date		Payee name				
	02/26/2015		Vista Print				
	Amount (\$) \$104.31		Payee address; City; 95 Hayden Ave	State; Zi	ip Code		
			Lexington, MD 02421				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Printing Expense	of this schedule	e) (b	Check if Austin, T	side of Texas. Complete Schedule T. K, officeholder living expense Community Leaders Breakfast
	Complete ONLY if direct expenditure to benefit C/OF	1	Candidate/Officeholder name	Office	e sough		Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Reverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Gift/Awards/Memorials Expense Legal Services Frining Expense Prining Expense Salaries/Wages/Contract Lai The Instruction Guide explains how to complete this for				se s/Contract Labor				
1	Total pages Schedule F1:	2	EII ED NIANA		Juide Expidin	S HOW LO CC	mpit	ote una ioiin.	_	Eller ID
	In the same that the second control of the second of the s	2							3	Filer ID
L	Sch: 45/47 Rpt: 69/71		Gallegos, F							
4	V20000000	5	Payee name	•						
	03/03/2015	l	Walmart							
6	Amount (\$)	7	Payee addre	ess; City;	State	e; Zip Co	ode			
	\$21.27	l	111 Yale S	t						
		l								
		l	Houston, T.	X 77007						
8	PURPOSE	(2)			755 TDX TO 200000	E 0. 22	/63	D		
ľ	OF	(a)			d at the top of this so	chedule)	(a)	Description Check if travel	outc:	ide of Tayas, Complete Schedule T
	EXPENDITURE		Loog/Reve	rage Expense	е			II and the second second		ide of Texas. Complete Schedule T. , officeholder living expense
		l						Food for City		
							1	The second second in the second		
9	Complete ONLY if direct	_	Candidate/Off	ficeholder nam	e	Office sou	laht			Office held
آ	expenditure to benefit C/OF		2 3.1 10100007 011		~	JIIICE 300	agrit			Office field
\vdash	Data	_								
	Date		Payee name)						
L	03/22/2015	L	Walmart							
	Amount (\$)	Payee address; City; State; Zip Code								
	\$92.29	•	111 Yale S	t						
		1								
		•	Houston, T	X 77007						
I OF Gift/Ava			Category /	(See Categories listed at the top of this schedule)						
				(See Categories listed at the top of this schedules/Memorials Expense		criedule)	oule) (b)	Description Check if travel outside of Texas, Complete Schedule T.		
1	EXPENDITURE		2.137 Wai at	memoriais Experise						, officeholder living expense
								100 cup coffe	ee i	maker for District I Seniors
							-			
	Complete ONLY if direct		Candidate/Off	ficeholder nam	е	Office sou	ught			Office held
	expenditure to benefit C/OF	Н								
F	Date		Payee name	Ý.						
	05/11/2015		Walmart							
\vdash	Amount (\$)	_	Payee addre	ice. City	Ctot	o: Zin C	ode			
	\$36.98				Stat	te; Zip C	oue			
	გა ნ.98		2391 Ways	olue DI						
1										
L			Houston, T	X 77023						
	PURPOSE	(a)	Category (S	See Categories liste	ed at the top of this so	chedule)	(b)	Description		
1	OF EXPENDITURE		Event Expe							side of Texas. Complete Schedule T.
1										c, officeholder living expense
								Supplies for	UIS	strict I Senior Prom
L	Complete ONLY 2	L	5		603					
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	ficeholder nam	ne	Office so	ught			Office held
L										
										-
느	., ., -									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	Office C Polling I pense Printing Salaries	verhead/ xpense Expense Wages/0	Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	Total pages Cabadula F1:	a =1 =5	The Instruction Guid	e explains how to o	omplet		Thomas .	
	Total pages Schedule F1: Sch: 46/47 Rpt: 70/71		NAME gos, Robert				3	Filer ID
4	Date	5 Payee	name					
	06/08/2015	, ayoo	name					
6	Amount (\$) \$14.48	7 Payee	address; City;	State; Zip C	ode			
8	PURPOSE OF EXPENDITURE		Ory (see Categories listed at the t Beverage Expense	top of this schedule)		Check if Austin,	TX,	de of Texas. Complete Schedule T. officeholder living expense O conference.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		te/Officeholder name	Office so	ught			Office held
Г	Date	Payee	name					
	06/16/2015							
	Amount (\$) \$196.00		address; City;	State; Zip C	ode			
	PURPOSE OF EXPENDITURE		ory (see Categories listed at the t Out of District	top of this schedule)			TX,	de of Texas. Complete Schedule T. officeholder living expense O CONference
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		te/Officeholder name	Office so	ught			Office held
	Date 06/22/2015	Payee	name					
	Amount (\$) \$27.01	Payee	address; City;	State; Zip C	ode			
	PURPOSE OF EXPENDITURE		ory (See Categories listed at the t Out of District	top of this schedule)	[TX,	de of Texas. Complete Schedule T. officeholder living expense CONference
	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	Office so	ught			Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Il Co	mmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services	pense	Polling Expens	e se s/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
				The Instruction Guid	e explains l	now to compl	ete this form.		
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID
	Sch: 47/47 Rpt: 71/71		Gallegos, I	Robert					
4	Date	5	Payee name	9				_	
	06/22/2015								
6	Amount (\$)	7	Payee addre	ess; City;	State:	Zip Code			
	\$30.26			entrante en la constante en la					
8	PURPOSE	(a)	Category		3 2179 0	(h)	Description		
	OF	()	Travel Out	See Categories listed at the t	op of this sche	edule) (D)	Description Check if travel	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE			or Biotriot					officeholder living expense
							Food at NALI	ΕO	conference
9	Complete ONLY if direct expenditure to benefit C/OH	١ (Candidate/Of	ficeholder name	0	ffice sought			Office held