

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Adriana	MI
	NICKNAME	LAST Tamez	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 4436 Jefferson  Houston, TX 77023		ZIP CODE
	Date Hand-delivered or Date Postmarked		2015 JUL 15 PM 4:07
	Receipt #	Amount	
	Date Processed	Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Rebecca	MI
	NICKNAME	LAST Reyna	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  7211 La Granada Houston, Texas 77083		
7 CAMPAIGN TREASURER PHONE	AREA CODE 281	PHONE NUMBER 512-0882	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year      THROUGH      Month Day Year 01/01/2015      06/30/2015		
10 ELECTION	ELECTION DATE Month Day Year 11/03/2015		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE OFFICE HELD (if any) Houston Community College, Trustee District 3		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

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

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

2 of 14

<b>13 C / OH NAME</b> Tamez, Adriana	<b>14 Filer ID</b>
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**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

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

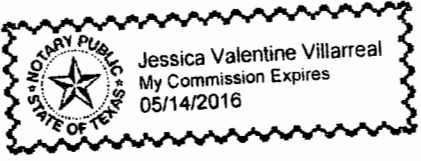
<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE TYPE</b> <b>COMMITTEE NAME</b>  <b>COMMITTEE ADDRESS</b>  <b>COMMITTEE CAMPAIGN TREASURER NAME</b>  <b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>
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2015 JUL 15 PM 4:37  
 CLERK OF TRUSTEES

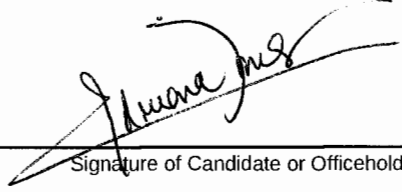
<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,750.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	248.09
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	15,820.62
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**

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




Jessica Valentine Villarreal  
My Commission Expires  
05/14/2016



\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ADRIANA TAMEZ, this the 15<sup>th</sup> day of July, 2015, to certify which, witness my hand and seal of office.



\_\_\_\_\_  
Signature of officer administering

JESSICA VILLARREAL

\_\_\_\_\_  
Printed name of officer administering

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Tamez, Adriana		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 16,750.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 248.09
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

2015 JUL 15 PM 4:37  
 OFFICE OF THE CLERK OF THE SUPREME COURT

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/14
2 FILER NAME Tamez, Adriana		3 Filer ID
4 Date 04/13/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews & Kurth Texas PAC	7 Amount of Contribution \$1,000.00
6 Contributor address; City; State; Zip Code 600 Travis Suite 4200 Houston, TX 77002		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell & Giuliani Committee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 711 Louisiana St. Suite 2300 Houston, TX 77002-2770		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campaign Account of Mary Ann G Perez	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 7007 Gulf Fwy. Ste. 125 Houston, TX 77087-2501		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colon, Edgardo	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4601 Washington Ave. Suite 200 Houston, TX 77007-5473		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colorado, Nancy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4123 Casa Del Lago  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

2015 JUN 15 PM 4: 37  
STATE OF TEXAS  
ETHICS COMMISSION

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/6 Rpt: 5/14
<b>2</b> FILER NAME Tamez, Adriana		<b>3</b> Filer ID
<b>4</b> Date 04/07/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fonseca, Ramiro	<b>7</b> Amount of Contribution \$500.00
	<b>6</b> Contributor address; City; State; Zip Code 8156 Lynn St  Houston, TX 77017	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/11/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Carlos	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 5731 Gulf Fwy.  Houston, TX 77023	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Carlos Garcia Realty
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Rolando	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 5214 Jackson St.  Houston, TX 77004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Thelma	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 263 Old Spring Ln.  Houston, TX 77015	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guess, John	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 10627 Albury  Houston, TX 77096	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) The Guess Group, Inc.

2015 JUL 15 PM 4:37  
 POSTED AND RECORDED

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/6 Rpt: 6/14
<b>2</b> FILER NAME Tamez, Adriana		<b>3</b> Filer ID
<b>4</b> Date 04/13/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Business-EDU Coalition PAC  <b>6</b> Contributor address; City; State; Zip Code P.O. Box 3581  Houston, TX 77253	<b>7</b> Amount of Contribution (\$) \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Federation of Teachers COPE  Contributor address; City; State; Zip Code 3100 Wesleyan St. Suite 255 Houston, TX 77027-5752	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jamail, James  Contributor address; City; State; Zip Code 16875 Diana Ln.  Houston, TX 77058-2526	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Jamail Construction
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kashani, AI  Contributor address; City; State; Zip Code 4204 Bellaire Blvd Ste 210 Houston, TX 77025-1055	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Horizon Group International
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Ricardo  Contributor address; City; State; Zip Code 3231 Old Chapel Dr.  Spring, TX 77373-6051	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Rm Architects, L.L.C.

2015 JUL 15 PM 4:37  
 COMMISSIONER OF ETHICS

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/6 Rpt: 7/14
<b>2</b> FILER NAME Tamez, Adriana		<b>3</b> Filer ID
<b>4</b> Date 04/07/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez Partners LLP <hr/> <b>6</b> Contributor address; City; State; Zip Code One Riverway Suite 1700 Houston, TX 77056	<b>7</b> Amount of Contribution \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medrano, Jose <hr/> Contributor address; City; State; Zip Code 203 N. Houston Ave. Humble, TX 77338	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modglin, Jason <hr/> Contributor address; City; State; Zip Code PO Box 17428 Austin, TX 78760-7428	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Monty, Jacob <hr/> Contributor address; City; State; Zip Code 2804 Jordens Rd. Houston, TX 77084	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Monty & Ramirez LLP
Date 04/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumbers Local Union No. 68 <hr/> Contributor address; City; State; Zip Code P.O. Box 8746 Houston, TX 77249-8746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

2015 JUL 05 PM 4:37  
 COMMISSIONERS

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

2015 JUL 15 PM 4:37  
 400 PARKWAY  
 HOUSTON, TX 77002  
 TEL: 713-251-1000  
 FAX: 713-251-1001  
 WWW.TEXASETHICS.COM

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule Sch: 5/6 Rpt: 8/14
2 FILER NAME Tamez, Adriana		3 Filer ID
4 Date 03/13/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollan, Patrick	7 Amount of Contribution \$1,000.00
6 Contributor address; City; State; Zip Code 9212 Cardwell Dr.  Houston, TX 77055		
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Pollan Hausman Real Estate Services, LLC
Date 03/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rainey, Ron	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 446 Heights Blvd.  Houston, TX 77007		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Rebecca	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 7211 La Granada Dr.  Houston, TX 77083		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabouni, Lina	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 23 Palm Blvd.  Missouri City, TX 77459-4499		
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) AUTOARCH Architects LLC
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sadeghpour, Alan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 13 Inwood Oaks Dr.  Houston, TX 77024-6803		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/14
2 FILER NAME Tamez, Adriana		3 Filer ID
4 Date 04/08/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Graciela	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 5341 Nolda St. Unit E Houston, TX 77007-2243		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 04/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sahni, Randhir	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 10 Pine Tree Ln. Houston, TX 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorola - Pohlman, Lenora	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2314 Tannehill Houston, TX 77008		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamez, Oscar	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 600 Goodnight Dr. Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Tejas Ears, Nose and Throat, P.A.
Date 03/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson & Horton LLP	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3200 Southwest Fwy. Ste. 2000 Houston, TX 77027		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

2015 JUL 15 PM 4:37

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

2015 JUL 15 PM 4:37

<b>1</b> Total pages Schedule F1: Sch: 1/5 Rpt: 10/14	<b>2</b> FILER NAME Tamez, Adriana	<b>3</b> Filer ID
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<b>4</b> Date 01/30/2015	<b>5</b> Payee name Chase Bank
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<b>6</b> Amount (\$) \$12.00	<b>7</b> Payee address; City; State; Zip Code 2900 Woodridge  Houston, TX 77087
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/27/2015	Payee name Chase Bank
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Amount (\$) \$12.00	Payee address; City; State; Zip Code 2900 Woodridge  Houston, TX 77087
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/31/2015	Payee name Chase Bank
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Amount (\$) \$12.00	Payee address; City; State; Zip Code 2900 Woodridge  Houston, TX 77087
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

2015 JUL 5 PM 4:38

<b>1</b> Total pages Schedule F1: Sch: 2/5 Rpt: 11/14	<b>2</b> FILER NAME Tamez, Adriana	<b>3</b> Filer ID
<b>4</b> Date 04/30/2015	<b>5</b> Payee name Chase Bank	
<b>6</b> Amount (\$) \$12.00	<b>7</b> Payee address; City; State; Zip Code 2900 Woodridge  Houston, TX 77087	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/29/2015	Payee name Chase Bank	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 2900 Woodridge  Houston, TX 77087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/30/2015	Payee name Chase Bank	
Amount (\$) \$12.00	Payee address; City; State; Zip Code 2900 Woodridge  Houston, TX 77087	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

2015 JUL 15 PM 4:38

<b>1</b> Total pages Schedule F1: Sch: 3/5 Rpt: 12/14	<b>2</b> FILER NAME Tamez, Adriana	<b>3</b> Filer ID
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<b>4</b> Date 01/27/2015	<b>5</b> Payee name Constant Contact
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<b>6</b> Amount (\$) \$5.33	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 02/27/2015	Payee name Constant Contact
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Amount (\$) \$5.33	Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/27/2015	Payee name Constant Contact
--------------------	--------------------------------

Amount (\$) \$5.33	Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451
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PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

2015 JUL 15 PM 4:38

<b>1</b> Total pages Schedule F1: Sch: 4/5 Rpt: 13/14	<b>2</b> FILER NAME Tamez, Adriana	<b>3</b> Filer ID
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<b>4</b> Date 04/27/2015	<b>5</b> Payee name Constant Contact
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<b>6</b> Amount (\$) \$21.32	<b>7</b> Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/27/2015	Payee name Constant Contact
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Amount (\$) \$21.32	Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/27/2015	Payee name Constant Contact
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Amount (\$) \$21.32	Payee address; City; State; Zip Code 1601 Trapelo Rd  Waltham, MA 02451
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PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

2015 JUL 5 PM 4:38

<b>1</b> Total pages Schedule F1: Sch: 5/5 Rpt: 14/14	<b>2</b> FILER NAME Tamez, Adriana	<b>3</b> Filer ID
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<b>4</b> Date 03/29/2015	<b>5</b> Payee name Ice Express
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<b>6</b> Amount (\$) \$10.28	<b>7</b> Payee address; City; State; Zip Code 8257 Gulf Freeway  Houston, TX 77017
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Refreshments for volunteers.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/29/2015	Payee name Sam's Club
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Amount (\$) \$85.86	Payee address; City; State; Zip Code 1615 S. Loop  Houston, TX 77054
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Volunteers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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