CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

					<u> </u>						
The C/OH INSTRU	OCTION GUIL	DE explains how to	complete the	his form.	(E	ACCOU Ethics C	Commission	ı filers)	2 PAGE # 1 of 53		
3 CANDIDATE OFFICEHOL NAME		MS/MRS/MR Mr. NICKNAME Pete	Llo	Pyd AST illips				MI SUFFIX Jr.	OFFIC Date Received	CE USE	ONLY
4 CANDIDATE OFFICEHOL MAILING ADDRESS Change of		ADDRESS / PO BOX; 6001 W. Parme Ste. 370, #123 Austin, TX 7872		TE #;	CITY;		STATE;	ZIP CODE	Date Hand-delin	15	RECEIVE
5 CAMPAIGN TREASUREI NAME		MS/MRS/MR Mr. NICKNAME	Cha نن	arles AST anger				MI SUFFIX	Date Imaged		C ER
6 CAMPAIGN TREASUREI ADDRESS (Residence or I	R	STREET ADDRESS (N 6001 W. Parm Ste. 370, #128 Austin, TX 78	er Lane	ASE); APT /	/ SUITE #;	,	CITY;	STATE;	ŽIP CODE		,
7 CAMPAIGN TREASURER PHONE	R	AREA CODE (512) 563-72	PHONE NU 226	JMBER	-		EXTENSION	I			
8 REPORT TY	PΕ	January 15 X July 15	_	ith day before e			Runoff	1 \$500 limit	15th day at appointmen	nt (officeho	• •
9 PERIOD COVERED		Month Day 04/25/20	Year	тн	HROUGH		Month	Day 06/30/20	Year		
10 ELECTION		ELECTION D Month Day 11/04/20	Year	ELECTION Prin	N TYPE mary		Runoff	X	General		Special
11 OFFICE		OFFICE HELD (if any)				1		OUGHT (if known)			
				GO TO	O PAG	E 2					

CANDIDATE / OFFICEHOLDE	R REPORT:
SUPPORT & TOTALS	

FORM C/OH

SUPPORT &	TOTALS		COVER	SHEET PG 2
13 C/OH NAME Philli	ps, Lloyd Jr. (Mr.)		14 ACCOUNT # 12345678	(Ethics Commission filers)
15 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the calculate of political expenditures by political committees to support the calculate of such expenditures	andidate / officeholder. tes and officeholders a	These expenditures may are required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	-	
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
		·		
16 CONTRIBUTION TOTALS	1. TOTAL F	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$.	0.00
	2. T OTAL I (OTHER	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	20,466.00
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS			\$	0.00
	4. TOTAL F	POLITICAL EXPENDITURES	\$	8,475.32
CONTRIBUTION BALANCE	5. TOTAL P LAST DA	OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE Y OF THE REPORTING PERIOD	\$	7,325.64
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$	1,601.37
17 AFFIDAVIT		I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Code	all information requi	accompanying report red to be reported by
	SUE MELENDEZ ORNELA MY COMMISSION EXPIRES December 18, 2015		andidate or Officeho	older
AFFIX NOTARY S	TAMP / SEAL ABOV		·	1.46
Sworn to and subscrib	الأرا	tify which, witness my hand and seal of office.	, this the	/4 ^{TT} day
Signature of officer admin	1. Ornal as	Lestie Mornelas Print name of officer administering oath	Notary P	inistering oath

	<u> </u>			
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#	20. Daniel 0/50
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	26 Report: 3/53 (Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Adams, Starynee	#)	7 Amount of contribution (\$)	8
06/19/2014	6 Contributor address; City; State; Zip Code 1391 Pennsylvania Avenue SE Unit 458 Washington, DC 20003		\$350.00	
<u> </u>		•	(If travel outside of	Texas, complete Schedule T)
9 Principal occup Foreign Servi	pation / Job title (See Instructions) ice Officer	10 Employer (See In US Department	istructions) t of State	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/02/2014	Contributor address; City; State; Zip Code 6706 Northlake Drive Jacksonville, AR 72076	· · · · · · · · · · · · · · · · · · ·	\$35.00	
			(If travel outcide of	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In	1	Texas, complete Schedule 1)
Retired		Retired	00 0010113)	
Date	Full name of contributor ut-of-state PAC (ID# Baker, Dina	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/24/2014	Contributor address; City; State; Zip Code 819 Sunnyside Blve Lake Stevens, WA 98258		\$60.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Logistics	ation / Job title (See Instructions)	Employer (See In Amazon	structions)	
Date	Full name of contributor Up out-of-state PAC (ID# Beckley, Kevin)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/26/2014	Contributor address; City; State; Zip Code 6764 SW Fernbrook CT Wilsonville, OR 97070		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In:		rexas, complete scriedule 1)
Consultant		Aviana Global T		
Date	Full name of contributor ut-of-state PAC (ID# Benavides, Michelle)	Amount of contribution (\$)	In-kind contribution description (if applicable) Block walking
06/13/2014	Contributor address; City; State; Zip Code 15113 North Flamingo Drive Austin, TX 78734		\$350.00	management
			(If travel outside of	Texas, complete Schedule T)
Principal occupa Assistant Dire	ation / Job title (See Instructions) ctor of Administration	Employer (See Ins Huntington Lear	structions)	
				

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/	26 Report: 4/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Beto, Mark	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/27/2014	6 Contributor address; City; State; Zip Code 10913 Palgrave Ct Austiin, TX 78739		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014	Contributor address; City; State; Zip Code 10100 Valderrama Dr Austin, TX 78717		\$100.00	
	TAGAIN, TAYOTT			•
	Detion / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
CFO 		Independence E	Brewing	
Date	Full name of contributor	<u>')</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 3616 far west blvd suite 117-307 Austin, TX 78731		\$25.00	!
			(If travel outside of	Texas, complete Schedule T)
Principal occup Consultant	pation / Job title (See Instructions)	Employer (See Ins The stuns! group	structions)	
Date	Full name of contributor ut-of-state PAC (ID#		Amount of	In-kind contribution
	Brown, Gerald		contribution (\$)	description (if applicable)
06/11/2014	Contributor address; City; State; Zip Code 1003 Vernon Drive Jacksonville, NC 28540		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See Ins Imagine One Te	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 10050 Great Hills Trail Apt 1518		\$35.00	
	Austin, TX 78759		(If traval autoria - Ar	r
	ation / Job title (See Instructions)	Employer (See Ins	tructions)	Texas, complete Schedule T)
Engineer 		Renovis Surgica	·	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/2	26 Report: 5/53
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Bryant, Julie	<i>‡</i>)	7 Amount of contribution (\$)	8
	06/06/2014	6 Contributor address; City; State; Zip Code 120 Casa Loma Circle Georgetown, TX 78633		\$50.00	
		<u> </u>			f Texas, complete Schedule T)
9	Principal occup Military	pation / Job title (See Instructions)	10 Employer (See Ins US Army	structions)	
_	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 11516 Brandon Parke Trail Austin, TX 78750		\$100.00	†
	Colorina de contra			<u> </u>	Texas, complete Schedule T)
_	Principal occupation of Ma	pation / Job title (See Instructions) arketing	Employer (See Ins N/a	structions)	
	Date	Full name of contributor	:	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/14/2014	Contributor address; City; State; Zip Code 1600 S EADS ST APT 405S Arlington, VA 22202	,	\$100.00	
				<u> </u>	Texas, complete Schedule T)
_	Principal occupa Military Office	pation / Job title (See Instructions)	Employer (See Ins US Army	structions)	
•	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Photography services
	06/29/2014	Contributor address; City; State; Zip Code 5740 Mcnaughton Kyle, TX 78640		\$200.00 	i I
	J			(If travel outside of	Texas, complete Schedule T)
_	Principal occupa Team Member	ation / Job title (See Instructions) er	Employer (See Ins Toyota Motor Ma	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City; State; Zip Code 5740 Mcnaughton Kyle, TX 78640		\$75.00 	
	1		ļ		
_	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule T)
	Team Member		Toyota Motor Ma		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/	26 Report: 6/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)	· .	3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Cameron, Paul	<u> </u>	7 Amount of contribution (\$)	8
06/10/2014	6 Contributor address; City; State; Zip Code 2301 Sunny Slope Drive Austin, TX 78703		\$250.00	
	·		(If travel outside of	Texas, complete Schedule T)
9 Principal occup Self-employe	ation / Job title (See Instructions) d	10 Employer (See In The Laundry Ro	structions) oom	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/11/2014	Contributor address; City; State; Zip Code 2301 Sunny Slope Drive Austin, TX 78703		\$300.00	
			(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See In:		
Business owr	er	self		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/12/2014	Contributor address; City; State; Zip Code 1105 Havre Lafitte Dr. Austin, TX 78746-6857		\$700.00	
·			(If travel outside of	Texas, complete Schedule T)
Principal occup Owner / Stay-	ation / Job title (See Instructions) at-home-mom	Employer (See Ins Caleb Consultin	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/31/2014	Contributor address; City; State; Zip Code 2704 Macken St. Austin, TX 78703		\$150.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (Sée Ins Retired	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014	Contributor address, City; State; Zip Code 3001 Blue Ridge Drive Cedar Park, TX 78613		\$40.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa Sales	ation / Job title (See Instructions)	Employer (See Ins Roger Beasley F		

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The Instructi	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/2	26 Report: 7/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Chabot, Thomas	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/12/2014	6 Contributor address; City; State; Zip Code 57 Florissant Ave Framingham, MA 01701	•••••	\$50.00	1 1 1
	<u> </u>		(If travel outside of	Texas, complete Schedule T)
9 Principal occup Sales	pation / Job title (See Instructions)	10 Employer (See In Next Step Living		
Date	Full name of contributor ut-of-state PAC (ID:	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/2014	Contributor address; City; State; Zip Code 1391 Pennsylvania SE, 458 Washington, DC 20003	••••••	\$350.00	
5 200		<u> </u>		Texas, complete Schedule T)
Principal occur Military	pation / Job title (See Instructions)	Employer (See In U.S. Governme		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/2014	Contributor address; City; State; Zip Code 19410 n 77th Dr Glendale, AZ 85308	• • • • • • • • • • • • • • • • • • • •	\$35.00	
				Texas, complete Schedule T)
Principal occup Mgr	pation / Job title (See Instructions)	Employer (See Ins American Expre		·
Date	Full name of contributor ut-of-state PAC (ID# Collette, Daryl	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/13/2014	Contributor address; City; State; Zip Code 22415 Dolomite Hills Dr Ashburn, VA 20148		\$100.00 \$100.00	· ·
			(If travel outside of	Texas, complete Schedule T)
Principal occup Self	pation / Job title (See Instructions)	Employer (See Ins Collette Manage	structions)	,
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/21/2014	Contributor address; City; State; Zip Code 9 Scott Crescent Austin, TX 78703		\$375.00 	I
			(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions) CEO / Stay-at-home-mom	Employer (See Ins Sabrex / N/A	<u> </u>	
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The Instruction Guide explains how to complete this form.		1 PAGE#	
		Schedule: 6/	26 Report: 8/53
2 FILER NAME Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date 5 Full name of contributor ☐ out-of-state PAC (ID Cowin, Diane	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/27/2014 6 Contributor address; City; State; Zip Code 2206 IVA LN Austin, TX 78704		\$100.00	
		(If travel outside of	Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) consultant	10 Employer (See In urs	structions)	
Date Full name of contributor ut-of-state PAC (ID: Crenshaw, Ben & Julie	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/12/2014 Contributor address; City; State; Zip Code 2610 Kenmore Court Austin, TX 78703	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$600.00	
		(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See In:	structions)	Texas, complete schedule 1)
Professional golfer / Stay-at-home-mom	Self-employed /	N/A	
Date Full name of contributor Out-of-state PAC (ID: Cupps, Natasha	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014 Contributor address; City; State; Zip Code 2312 Elliston PI #621 Nashville, TN 37203		\$50.00	
		(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) N/A	Employer (See In: N/A		
Date Full name of contributor out-of-state PAC (ID) Davis, Jacqueline	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/29/2014 Contributor address; City; State; Zip Code 9017 Camelback Drive Austin, TX 78733		\$200.00	
		(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) PR	Employer (See Ins Sterling Acura o		
Date Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Website services
O5/12/2014 Contributor address; City; State; Zip Code 1634 Plume Grass Pl Round Rock, TX 78665	•••••	\$340.00	
	İ	(if travel outside of	Texas, complete Schedule T}
Principal occupation / Job title (See Instructions) Developer	Employer (See Ins Merkie, Inc.		

				
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/	26 Report: 9/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID Davis, Tracy	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/15/2014	6 Contributor address; City; State; Zip Code 1634 Plume Grass Pl Round Rock, TX 78665	•••••••	\$10.00	
			(if travel outside of	Texas, complete Schedule T)
9 Principal occup Developer	pation / Job title (See Instructions)	10 Employer (See In Merkle, Inc.	structions)	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 18104 Gantry Drive Pflugerville, TX 78660	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
	eation / Job title (See Instructions)	Employer (See In		Toxas, complete contended ()
Military		Texas Army Na	tional Guardo	
Date	Full name of contributor ut-of-state PAC (ID#	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/2014	Contributor address; City; State; Zip Code 1203 Claire Ave Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$60.00	
i			(If travel outside of	Texas, complete Schedule T)
Principal occup Interior Desig	ation / Job title (See Instructions) ner	Employer (See In Denison & Deni	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Donaldson, Bart	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/28/2014	Contributor address; City; State; Zip Code 4120 Remington Cedar Park, TX 78613		\$100.00	
	<u> </u>		(If travel outside of	Texas, complete Schedule T)
Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In: N/A	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Douda, Robin)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/26/2014	Contributor address; City; State; Zip Code 10802 Burnwood Austin, TX 78758		\$350.00	Signs & event management / social events
			(If travel outside of	Texas, complete Schedule T)
Principal occupa Marketing & A	ation / Job title (See Instructions) dvertising	Employer (See Ins Dell, Inc.		

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	The INSTRUCTION	on Guide explains how to complete this form.		1 PAGE# Schedule: 8/2	26 Report: 10/53
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Dsouza, Naveen	<i>t</i>)	7 Amount of contribution (\$)	8
	06/13/2014	6 Contributor address; City; State; Zip Code 7609 Clara Marie Cv Austin, TX 78749		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup President	pation / Job title (See Instructions)	10 Employer (See Industrial	structions)	
<u> </u>	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/10/2014	Contributor address; City; State; Zip Code 90 R St NW, Unit A Washington, DC 20001		\$350.00	
					Texas, complete Schedule T)
_	Principal occupa IT Manager	pation / Job title (See Instructions)	Employer (See Ins SAIC	structions)	
_	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/03/2014	Contributor address; City; State; Zip Code 140 Thomas St. NW Washington, DC 20001		\$350.00	
	Dringing occur	List side (One bederational)		<u> </u>	Texas, complete Schedule T)
_	Consultant	pation / Job title (See Instructions)	Employer (See Ins Dougherty and A	structions) Associates	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/15/2014	Contributor address; City; State; Zip Code 2921 Canyon Valley Run Pflugerville, TX 78660		\$100.00]
_		<u> </u>		(If travel outside of	Texas, complete Schedule T)
	Principal occupa Manager	ation / Job title (See Instructions)	Employer (See Ins Texas Army Nat	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/04/2014	Contributor address; City; State; Zip Code 2112 Horseshoe Bend Trentwoods, NC 28562		\$60.00 	
					Texas, complete Schedule T)
	Principal occupa Simulator Instr	ation / Job title (See Instructions) tructor	Employer (See Ins Cubic Worldwide	structions) e Technical Servic	ces

	1 PAGE# Schedule: 9/	26 Report: 11/53			
	3 ACCOUNT # 12345678	(Ethics Commission filers)			
)#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)			
,	\$350.00	 			
	(If travel outside of	Texas, complete Schedule T)			
10 Employer (See Ins					
)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
•••••	\$350.00	 			
	(If travel outside of	Texas, complete Schedule T)			
		1 acres, annihitate annihitati 1, —			
HP					
)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	\$35.00	 			
	(If travel outside of	Texas, complete Schedule T)			
	structions)	<u> </u>			
#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	\$350.00	 			
	(If travel outside of	Texas, complete Schedule T)			
Employer (See Ins N/A	structions)				
#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	\$60.00 				
	(If travel outside of	Texas, complete Schedule T)			
Employer (See Ins Self	structions)				
	Employer (See Ins. Moreland Prope Employer (See Ins. N/A Employer (See Ins. N/A	Schedule: 9// 3 ACCOUNT # 12345678 7 Amount of contribution (\$) \$350.00 [If travel outside of contribution (\$) \$350.00 [If travel outside of contribution (\$) \$350.00 [If travel outside of contribution (\$) \$35.00 [If travel outside of contribution (\$) \$35.00 [If travel outside of contribution (\$) \$35.00 [If travel outside of contribution (\$) \$350.00 [If travel outside of contribution (\$)			

	The Instruction	юм Guide explains how to complete this form.	·	1 PAGE# Schedule: 10	0/26 Report: 12/53
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (fD# Greene, Mark	ŧ)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/10/2014	6 Contributor address; City; State; Zip Code 301 East 4th Street #347 Austin, TX 78701		\$350.00	
				<u></u>	f Texas, complete Schedule T)
9	Principal occup Military	pation / Job title (See Instructions)	10 Employer (See Ins US Army	structions)	
_	Date	Full name of contributor ut-of-state PAC (ID# Gross, Chris	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) Design services
	06/26/2014	Contributor address; City; State; Zip Code 4200 Ave. A #202 Austin TX 78751		\$350.00	
	<u> </u>	Austin, TX 78751			Texas, complete Schedule T)
	Principal occup Owner	pation / Job title (See Instructions)	Employer (See Ins GrossExposure	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; City; State; Zip Code 5111 Spring Ash San Antonio, TX 78247		\$100.00 	
		l		(If travel outside of	Texas, complete Schedule T)
	Principal occupa VP Operation	pation / Job title (See Instructions) s & Client Services	Employer (See Ins eSkillz Corp		
_	Date	Full name of contributor		Amount of contribution (\$)	fn-kind contribution description (if applicable)
	05/21/2014	Contributor address; City; State; Zip Code 2107 Wheaton Trl Cedar Park, TX 78613		\$200.00 	
_			· J	(If travel outside of	Texas, complete Schedule T)
	Principal occupa Military	ation / Job title (See Instructions)	Employer (See Ins US Army		,
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	06/20/2014	Contributor address; City; State; Zip Code 11805 Buzz Schneider Ln. Austin, TX 78748	3	\$60.00 	
	Principal occupa Advertising/Ma	ation / Job title (See Instructions) arketing	Employer (See Ins		Texas, complete Schedule T)

The Instructi	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 11	1/26 Report: 13/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Henderson, Clint	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014	6 Contributor address; City; State; Zip Code PO Box 12285 Lahaina, HI 96761		\$60.00	
	·		(If travel outside of	Texas, complete Schedule T)
9 Principal occup President	pation / Job title (See Instructions)	10 Employer (See In Every Brand Ap		
Date	Full name of contributor ut-of-state PAC (ID# Hernandez, Samuel	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/22/2014	Contributor address; City; State; Zip Code 353 Emma Loop Austin, TX 78737		\$350.00]
Principal occur		- ·- ·-	<u> </u>	Texas, complete Schedule T)
Retired feder	pation / Job title (See Instructions) al government	Employer (See In: Retired	structions)	-
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/05/2014	Contributor address; City; State; Zip Code 804 S. Arlington Mill Dr. #301 Arlington, VA 22204		\$100.00	
Bringing occurs				Texas, complete Schedule T)
Vice Presider	pation / Job title (See Instructions) nt	Employer (See In: American Land	structions) Title Association	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/15/2014	Contributor address; City; State; Zip Code 80 Red River St. #219 Austin, TX 78701		\$350.00	
			/if travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete scriedule 1)
Systems Anal	lyst	State of Texas F	Health and Human	n Services Commission
Date 	Full name of contributor)	Amount of (contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 1781 Spyglass Drive #120 Austin, TX 78746		\$50.00 	
	<u>L</u>		(If travel outside of	Texas, complete Schedule T)
Principal occup Sales Manage	ation / Job title (See Instructions) ement	Employer (See Ins Quinnessential S		

The Instruction	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 12	2/26 Report: 14/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ingram, Philip & Karen	#)	7 Amount of contribution (\$)	8
05/14/2014	6 Contributor address; City; State; Zip Code 2705 Scenic Dr. Austin, TX 78703-1038		\$700.00	! ! . !
				f Texas, complete Schedule T)
9 Principal occup Retired / Stay	pation / Job title (See Instructions) y-at-home-mom	10 Employer (See In: Retired / N/A	structions)	
Date	Full name of contributor	*	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/22/2014	Contributor address; City; State; Zip Code 4011 Walnut Clay Drive Austin, TX 78731		\$250.00	[[
Dringing ageur		F	1 '	Texas, complete Schedule T)
Commercial F	pation / Job title (See Instructions) Real Estate	Employer (See Ins Austin Office Sp	structions) pace, Inc.	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/26/2014	Contributor address; City; State; Zip Code 210 lavaca street suite3101 Austin, TX 78701		\$60.00	.
D-inging occup			<u> </u>	Texas, complete Schedule T)
CEO	pation / Job title (See Instructions)	Employer (See Ins Internash Globa	structions) Il Services	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014	Contributor address; City; State; Zip Code 835 south Irving street Arlington, VA 22204	· · · · · · · · · · · · · · · · · · ·	\$100.00]
	1		(If travel outside of	Texas, complete Schedule T)
Principal occup Consultant	ation / Job title (See Instructions)	Employer (See Ins PotomacWave		Texas, complete contours .,
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/12/2014	Contributor address; City; State; Zip Code 8624 FM 1293 Kountze, TX 77625		\$20.00	[
			- 	·
Principal occupa Freelance Virt	ation / Job title (See Instructions) tual Assistant	Employer (See Ins Self		Texas, complete Schedule T)

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	3/26 Report: 15/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID) Kennedy, Timothy	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/12/2014	6 Contributor address; City; State; Zip Code 363 St Ronan St New Haven, CT 06511		\$100.00	
				Texas, complete Schedule T)
9 Principal occup Chaplain	pation / Job title (See Instructions)	10 Employer (See In: Transitioning or		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 254 Serenity View Ln Middletown, VA 22645		\$100.00	
Dringing Lagour				Texas, complete Schedule T)
Photographe	pation / Job title (See Instructions) r	Employer (See In: Swim Bike Run		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/29/2014	Contributor address; City; State; Zip Code 2 Oyster Shell Lane Hilton Head, SC 29926		\$100.00	
				Texas, complete Schedule T)
Retired Col U	pation / Job title (See Instructions) S Army	Employer (See Ins Retired	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/20/2014	Contributor address; City; State; Zip Code 9954 Parsonage Lane Lorton, VA 22079		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Military Office	ration / Job title (See Instructions)	Employer (See Ins US Marine Corp		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/2014	Contributor address; City; State; Zip Code 11116 McKinney Spring Dr Austin, TX 78717	•••••	\$50.00	
<u> </u>			(If travel outside of	Texas, complete Schedule T)
Principal occup Owner	ation / Job title (See Instructions)	Employer (See Ins TLK Healthcare	structions)	

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	1/26 Report: 16/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Lefeve, Don	¥)	7 Amount of contribution (\$)	8
06/20/2014	6 Contributor address; City; State; Zip Code 2202 Hall Place Washington, DC 20007		\$60.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup President	pation / Job title (See Instructions)	10 Employer (See In Commercial Be	structions) hicle Training Ass	in
Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/26/2014	Contributor address; City; State; Zip Code	••••••••••••••••••••••••••••••••••••••	\$35.00	[[
	Austin, TX 78748		(If traval autoido of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:		Texas, complete schedule 1)
Scheduler An	alyst	Austin Water		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/17/2014	Contributor address; City; State; Zip Code 103 Flournoy Odom, TX 78370		\$60.00	 - -
	· ·		(If travel outside of	Texas, complete Schedule T)
Principal occup Regional Prop	ation / Job title (See Instructions) perty Manager	Employer (See Ins Greystar		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014	Contributor address; City; State; Zip Code 305 Glen Hollow Street Cedar Park, TX 78613	4 ···	\$20.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Accountant	ation / Job title (See Instructions)	Employer (See Ins Blakeslee Monz		
Date	Full name of contributor ut-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/29/2014	Contributor address; City; State; Zip Code 3306 Jamesborough Street Austin, TX 78703		\$250.00	
			(if traval autaida -41	Texas, complete Schedule T)
Principal occup: Contractor/Re	ation / Job title (See Instructions) al Estate	Employer (See Ins Sabre Commerc	structions)	Texas, complete scriedule 1)

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The Ins	TRUCTION GUIDE explains how to complete this form.		1 PAGE#	5/26 Report: 17/53
2 FILER	IAME Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor	D#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
06/12/2	6 Contributor address; City; State; Zip Code 26019 Torena Loop San Antonio, TX 78261		\$60.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principa Military	occupation / Job title (See Instructions) Officer	10 Employer (See In TX National Gu	structions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2	014 Contributor address; City; State; Zip Code 3401 Northwood Circle Austin, TX 78703		\$250.00	
			·	i
Principal	occupation / Job title (See Instructions)	T		Texas, complete Schedule T)
Physicia	an4147	Employer (See In Austin Bone and		
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/03/2	014 Contributor address; City; State; Zip Code 827 North Hollywood Way #104		\$100.00	<u> </u>
	Burbank, CA 91505		(If travel outside of	Texas, complete Schedule T)
Principal Attorne	occupation / Job title (See Instructions)	Employer (See In: The McClaren L		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2	Contributor address; City; State; Zip Code 1204 Arronimink circle Austin, TX 78746		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal Director	occupation / Job title (See Instructions) /consultant	Employer (See Ins Austin institute	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2	Contributor address; City; State; Zip Code 713 E 43rd Street Austin, TX 78751		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal Consulta	occupation / Job title (See Instructions) ant	Employer (See Ins Synnex (Concer	structions)	,

The Instructs	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 16	5/26 Report: 18/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor out-of-state PAC (ID: McNabb, Connie	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
05/26/2014	6 Contributor address; City; State; Zip Code 19164 Laketree Drive Montgomery, TX 77356		\$100.00	
a Dain de d				Texas, complete Schedule T)
ANG Assista	pation / Job title (See Instructions) int to AFISRA/SG	10 Employer (See In: Air National Gua		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/2014	Contributor address; City; State; Zip Code 19164 Laketree Drive Montgomery, TX 77356		\$60.00	; []
			(If travel outside of	Texas, complete Schedule T)
	eation / Job title (See Instructions)	Employer (See Ins	structions)	
Veterinarian Air National Guard				
Date	Full name of contributor ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 19164 Laketree Drive Montgomery, TX 77356		\$60.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Veterinarian	ation / Job title (See Instructions)	Employer (See Ins Air National Gua	structions)	
Date	Full name of contributor	!)	Amount of	In-kind contribution
	Murphy, Gregg		contribution (\$)	description (if applicable)
06/21/2014	Contributor address; City; State; Zip Code 2807 Primwood Path Cedar Park, TX 78613		\$250.00 	ì
			(If travel outside of	Texas, complete Schedule T)
Principal occup owner	ation / Job title (See Instructions)	Employer (See Ins friendly car care	tructions)	
Date	Full name of contributor	ı 1	Amount of	In-kind contribution
	Nutt, Daryl & Meaghan	/	contribution (\$)	description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 12701 pheasant run Buda, TX 78610		\$50.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

The Instr	истюм Guide explains how to complete this form.	1 PAGE# Schedule: 17	7/26 Report: 19/53	
2 FILER NA	ME Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor)#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/20	6 Contributor address; City; State; Zip Code 6603 Mesa Drive Austin, TX 78731		\$350.00	
	<u> </u>		(If travel outside of	Texas, complete Schedule T}
9 Principal o Army Offi	ccupation / Job title (See Instructions) cer	10 Employer (See In US Army	structions)	
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/26/20	Contributor address; City; State; Zip Code 933 E 54th Austin, TX 78751		\$35.00]
			(If travel outside of	Texas, complete Schedule T)
Principal o Loan Offic	ccupation / Job title (See Instructions) cer	Employer (See In: Willow Bend Mo		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/03/20	Contributor address; City; State; Zip Code 14110 Wellman CT Manassas, VA 20112		\$250.00	1 I
	Wallassas, VA 20112		(If travel outside of	Texas, complete Schedule Ti
Principal of Analyst	ccupation / Job title (See Instructions)	Employer (See Ins Leonie Industrie	structions)	Taxas, complete concease 1,
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/201	Contributor address; City; State; Zip Code 12445 Alameda Trace Circle Austin, TX 78727		\$35.00]
			(If travel outside of	Texas, complete Schedule T)
Principal od N/A	ccupation / Job title (See Instructions)	Employer (See Ins N/A	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/201	4 Contributor address; City; State; Zip Code 9215 La Tierra Ct Albuquerque, NM 87122		\$100.00 	
Data -1		<u> </u>		Texas, complete Schedule T)
Principal oc Physician	cupation / Job title (See Instructions)	Employer (See Ins Self	structions)	

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The Instructi	ON GUIDE explains how to complete this form.		1 PAGE#	
3 FUED MARKE	District the state of the state			3/26 Report: 20/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of	8 In-kind contribution
	Peckham, Rachel		contribution (\$)	description (if applicable)
05/21/2014	6 Contributor address; City; State; Zip Code 7760 Brothers Bay Ct Las Vegas, NV 89145	• • • • • • • • • • • • • • • • • • • •	\$200.00	
		•	(If traval outside of	Texas, complete Schedule T)
9 Principal occup	Dation / Job title (See Instructions)	10 Employer (See In		Texas, complete schedule 1)
Teacher		Clark County S		
Date	Full name of contributor	/)	Amount of	In-kind contribution
	Peterson, Doug		contribution (\$)	description (if applicable)
06/10/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$35.00	1
	2426 Badajoz Place. #B Carlsbad, CA 92009			!
			(If travel outside of	Texas, complete Schedule T)
Principal occup Trauma Cons	pation / Job title (See Instructions)	Employer (See In	structions)	
Trauma Cons	suitant	Synthes		
Date	Full name of contributor ut-of-state PAC (ID#	1	Amount of	In-kind contribution
	Pickett, David	·	contribution (\$)	description (if applicable)
05/30/2014	Contributor address; City; State; Zip Code		\$350.00	1
	3108 Riva Ridge Rd. Austin, TX 78746-1815			I
			(If travel outside of	Texas, complete Schedule T)
Principal occup President	eation / Job title (See Instructions)	Employer (See In:	structions)	
President		Financial Corpo	ration of America	
Date	Full name of contributor ut-of-state PAC (ID#	·	Amount of	In-kind contribution
	Pohler, Clint		contribution (\$)	description (if applicable)
05/21/2014	Contributor address; City; State; Zip Code		\$100.00	
	5719 Joe Sayers Ave Austin, TX 78756		Ψ100.00	
·	Austill, 17 76736			
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
Software Eng	ineer	Coupa 		
Date	Full name of contributor)	Amount of	In-kind contribution
	Posey, Ken		contribution (\$)	description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code	* * * * * * * * * * * * * * * * * * * *	\$150.00	
,	305 Glen Hollow St		\$150.00	
ł	Cedar Park, TX 78613			
		ļ	(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See Ins		
Sales	·	Dell ———		

The Instruct	The Instruction Guide explains how to complete this form. 1 PAGE # Schedule: 19/26 Report: 21/53					
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)		
4 Date	5 Full name of contributor ut-of-state PAC (ID Potter, Thomas	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06/15/2014	6 Contributor address; City; State; Zip Code 3416 middle plantation quay Virgina Beach, VA 23452		\$150.00	 		
	<u> </u>		(If travel outside o	f Texas, complete Schedule T)		
9 Principal occu DOD	pation / Job title (See Instructions)	10 Employer (See In US Army	structions)			
Date	Full name of contributor ut-of-state PAC (ID: Quintanilla, Elizabeth	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
05/15/2014	Contributor address; City; State; Zip Code 1003 Justin Ln #1050 Austin, TX 78757	•••••	\$200.00	 		
				Texas, complete Schedule T)		
Consultant /	pation / Job title (See Instructions) owner	Employer (See In EQ Consulting,				
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/20/2014	Contributor address; City; State; Zip Code 206 Cedar Ridge Drive Georgetown, TX 78628	•••••••••••••	\$100.00	! 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Business Cor	pation / Job title (See Instructions) nsultant	Employer (See In: Self-employed		Toxas, complete soriedate 1)		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/12/2014	Contributor address; City; State; Zip Code 1112 Myrtle st Austin, TX 78702	· · · · · · · · · · · · · · · · · · ·	\$35.00	1 1		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Oracle DBA	ation / Job title (See Instructions)	Employer (See Ins URS		Toxos, complete concease 1,		
Date	Full name of contributor					
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Photography services		
05/23/2014	Contributor address; City; State; Zip Code 303 Steer Acres Ct Cedar Park, TX 78613		\$50.00			
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Web Develop	ation / Job title (See Instructions) er	Employer (See Ins Clear Channel C	structions)			

The Namuron Goode explains how to complete this form. 1 PAGE # Schedule: 20/26 Report: 22/53 2 FILER NAME Phillips, Lloyd Jr. (Mr.) 3 ACCOUNT # (Ethics Commission flers) 12/345678 4 Date S Full name of contributor out-of-state PAC (ID# 7 Amount of contribution (\$) 8 In-lend contribution (\$) 06/30/2014 6 Contributor address; City: State; Zip Code \$150.00 (If travel outside of Texas, complete Schedule 1) 9 Principal occupation / Job title (See Instructions) Web Developer Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) 08-scription (if applicable) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) 08-scription (if applicable) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) 08-scription (if applicable) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) 08-scription (if applicable) Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) 08-scription (if applicable) Principal occupation / Job title (See Instructions) Manager Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Mister Car Wash Date Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) 08-scription (if applicable) Principal occupation / Job title (See Instructions) Mister Car Wash Principal occupation / Job title (See Instructions) Mister Car Wash Principal occupation / Job title (See Instructions) Mister Car Wash Principal occupation / Job title (See Instructions) Mister Car Wash Principal occupation / Job title (See Instructions) Mister Car Wash Principal occupation / Job title (See					<u> </u>
Date S Full name of contributor out-of-state PAC (ID# 7 Amount of 8 In-kind contribution (3) O6/30/2014 6 Contributor address; City: State: Zip Code S150.00 (If travel outside of Texas, complete Schedule T)	The Instruction	ON GUIDE explains how to complete this form.			0/26 Report: 22/53
Rowell, Robin O6/30/2014 6 Contributor address; 30 Steer Acres Ct. Ceder Park, TX. 76913	2 FILER NAME	Phillips, Lloyd Jr. (Mr.)			(Ethics Commission filers)
303 Steer Acres Ct Cedar Park, TX 78613 9 Principal occupation / Job title (See Instructions) Web Developer Date Full name of contributor out-of-state PAC (ID# Amount of contribution (If applicable) 05/19/2014 Contributor address; City; State; Zip Code S350.00 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (If applicable) 05/19/2014 Contributor address; City; State; Zip Code S350.00 Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (If applicable) 06/19/2014 Contributor address; City; State; Zip Code S100.00 Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of contribution (If applicable) Principal occupation / Job title (See Instructions) Employer (See Instructions) Manager Date Full name of contributor out-of-state PAC (ID# Amount of contribution (If applicable) Principal occupation / Job title (See Instructions) In-kind contribution (If applicable) O6/13/2014 Contributor address; City; State; Zip Code \$50,000 Amount of contribution (If applicable) O6/17/2014 Contributor address; City; State; Zip Code \$50,000 Amount of contribution (If applicable) O6/17/2014 Contributor address; City; State; Zip Code \$50,000 Amount of contribution (If applicable) O6/17/2014 Contributor address; City; State; Zip Code \$50,000 Amount of contribution (If applicable) O6/17/2014 Contributor address; Cit	4 Date		#)		
Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Clear Channel Outdoor	06/30/2014	303 Steer Acres Ct		\$150.00	
Date Full name of contributor Out-of-state PAC (ID# Ontribution (\$) Date Contributor address; City; State; Zip Code S350.00 S3				(If travel outside of	Texas, complete Schedule T)
Rummel, Vicki Contributor address; 257 Malone St Houston, TX 77007 Principal occupation / Job title (See Instructions) Date Full name of contributor Rust, Dean Principal occupation / Job title (See Instructions) Date Full name of contributor Sane, Dhiraj Contributor address; City; State; Zip Code 6820 Gessner Road Apt #1108 Apt State Apt State Britiname of Contributor Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Manager Date Full name of contributor Contributor address; City; State; Zip Code 6820 Gessner Road Apt #1108 Apt State Apt State Britiname of Contributor Seidel, Celisa Date Full name of contributor Contributor address; City; State; Zip Code Seidel, Celisa Date Full name of contributor Amount of contribution (If travel outside of Texas, complete Schedule T) Amount of contribution (S) In-kind contribution (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Mister Car Wash Date Full name of contributor Seidel, Celisa City; State; Zip Code Po box 17370 tot 1050 Al Paul, MN 55117 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (Date		<u> </u>		
Principal occupation / Job title (See Instructions) Employer (See Instructions) Pinot Palace	05/19/2014	257 Malone St	•••••••••	\$350.00	 -
Date Full name of contributor out-of-state PAC (ID#				(If travel outside of	I Texas, complete Schedule T)
Date Full name of contributor out-of-state PAC (ID#		ation / Job title (See Instructions)		structions)	<u> </u>
Rust, Dean Contribution (\$) description (if applicable) Contributor address; City: State; Zip Code \$100.00 Principal occupation / Job title (See Instructions) Manager Date Full name of contributor Out-of-state PAC (ID# Nitrayel outside of Texas, complete Schedule T) O6/13/2014 Contributor address; City: State: Zip Code		<u> </u>	Pinot Palace		•
Principal occupation / Job title (See Instructions) Employer (See Instructions) Manager	Date)		
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)	06/19/2014	2714 e birchwood place		\$100.00	
Date Full name of contributor out-of-state PAC (ID#)				(If travel outside of	Texas, complete Schedule T)
Sane, Dhiraj Contribution (\$) description (if applicable) Sane, Dhiraj contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) In-kind contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) In-kind contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) In-kind contribution (\$) description (if applicable) Contribution (\$) description (if applicable) Contribution (\$) In-kind contribution (\$) description		ation / Job title (See Instructions)		structions)	
6620 Gessner Road Apt #1106 Houston, TX 77040 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Mister Car Wash Date	Date	= 34. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.)		
Principal occupation / Job title (See Instructions) Manager Date Full name of contributor Seidel, Celisa Contributor address; City; State; Zip Code Po box 17370 lot 1050 At Paul, MN 55117 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)	06/13/2014	6620 Gessner Road Apt #1106		\$35.00	
Manager Date Full name of contributor Seidel, Celisa City; State; Zip Code S50.00 Po box 17370 lot 1050 At Paul, MN 55117 City; State; Zip Code State; Zip Code City; State; Zip Code City; State; Zip Code State; Zip Code City; State; Zip Code City; State; Zip Code City; State; Zip Code State; Zip Code City; State; Zip Code City; State; Zip Code State; Zip Code City; State; Zip Code City; State; Zip Code State; Zip Code City; State; Zip Code State	Principal occurs	otion / Joh title (Con Instructions)			Texas, complete Schedule T)
Seidel, Celisa contribution (\$) description (if applicable) Contributor address; City; State; Zip Code Po box 17370 lot 1050 At Paul, MN 55117 Principal occupation / Job title (See Instructions) Contribution (\$) description (if applicable) (If travel outside of Texas, complete Schedule T)		ation / Job title (See Instructions)			
Po box 17370 lot 1050 At Paul, MN 55117 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	·			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	06/17/2014	Po box 17370 lot 1050		\$50.00 	
					Texas, complete Schedule T)
L			Employer (See Ins Advanced Healt	structions) hy and Vitality	

1 PAGE # Schedule: 21/26 Report: 23/53			
3 ACCOUNT # (Ethics Commission filers) 12345678			
7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)			
\$101.00			
(If travel outside of Texas, complete Schedule T)			
10 Employer (See Instructions) Apartment Association of New Mexico			
#) Amount of In-kind contribution contribution (\$) description (if applicable)			
\$150.00			
(If travel outside of Texas, complete Schedule T)			
Employer (See Instructions) Self			
#) Amount of In-kind contribution contribution (\$) description (if applicable)			
\$250.00			
(If travel outside of Texas, complete Schedule T)			
Employer (See Instructions) Republican National Committee			
#) Amount of In-kind contribution contribution (\$) description (if applicable)			
\$35.00			
(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions) Onboarding Specialist Employer (See Instructions) CompasLearning			
#) Amount of In-kind contribution contribution (\$) description (if applicable)			
\$35.00 			
(If travel outside of Texas, complete Schedule T)			
Employer (See Instructions) Self-employed			

		<u> </u>		
The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 22	2/26 Report: 24/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT# 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Simmons, Joseph & Leigh	#)	7 Amount of contribution (\$)	8
06/06/2014	6 Contributor address; City; State; Zip Code 609 West Lynn Unit #4 Austin, TX 78703		\$700.00	
			(if travel outside of	Texas, complete Schedule T)
9 Principal occup Broker / Own	pation / Job title (See Instructions) er	10 Employer (See In Aquila Commer	structions) cial / Tarrytown D	ance
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/12/2014	Contributor address; City; State; Zip Code 3701 Galena Hills Cove Round Rock, TX 78681	• • • • • • • • • • • • • • • • • • • •	\$100.00	
	Hound Nock, 12 70001		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	L	
Account Exec		Oracle		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/30/2014	Contributor address; City; State; Zip Code 201 St. Andrews Drive Aptos, CA 95003		\$100.00	[[
			<u> </u>	Texas, complete Schedule T)
Engineer	ation / Job title (See Instructions)	Employer (See In: Chain Security,		
Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/24/2014	Contributor address; City; State; Zip Code 2717 Sun Mountain Dr. Leander, TX 78641	,	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		Toxas, complete deficulte 1)
Security Cons	sultant	SCS Profession	al Group	
Date	Full name of contributor	!	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 1409 Mulberry Way Cedar Park, TX 78613		\$100.00 	
İ	Y.	•	(If travel outside of	Texas, complete Schedule T)
Principal occup Sales	ation / Job title (See Instructions)	Employer (See Ins IBM		,

				
The Instruction	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 23	3/26 Report: 25/53
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Taliaferro, Jack	<u> </u>	-	8
06/11/2014	6 Contributor address; City; State; Zip Code 1401 Cedar Brook Drive Cedar Park, TX 78613		\$100.00	
		!	(If travel outside of	Texas, complete Schedule T)
9 Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See Ins U. S. Army	<u> </u>	
Date	Full name of contributor	,	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 13131 Sunrise Trail Place NE Albuquerque, NM 87111		\$100.00 _[
	1		/if terval outside of	Texas, complete Schedule T)
Principal occup Marketing	Dation / Job title (See Instructions)	Employer (See Ins Self		Texas, complete Scriedule ()
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/30/2014	Contributor address; City; State; Zip Code 1902 Stamford Lane Austin, TX 78703	•••••	\$250.00 	
·			(If travel outside of	Texas, complete Schedule T)
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Iris Jackson Walker	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/10/2014	Contributor address; City; State; Zip Code 7801 shoal creek blvd #249 Austin, TX 78757		\$35.00 	
				Texas, complete Schedule T)
Principal occupation Teacher	ation / Job title (See Instructions)	Employer (See Ins Good Shepherd	structions) Episcopal School	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/02/2014	Contributor address; City; State; Zip Code 3647 Patriot Drive Frisco, TX 75034		\$100.00 	l .
	<u> </u>		(If travel outside of ?	Texas, complete Schedule T)
Principal occupa Petroleum Lar	ation / Job title (See Instructions) ndman	Employer (See Inst Cimmaron Field	tructions) Services	
	· · · · · · · · · · · · · · · · · · ·			 _

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 24	1/26 Report: 26/53	
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)	. · ·	3 ACCOUNT # 12345678	(Ethics Commission filers)	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Trombetta, Lisa	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
06/17/2014	6 Contributor address; City; State; Zip Code 8218 Summer Side Drive Austin, TX 78759		\$35.00		
		:	(If travel outside of	Texas, complete Schedule T)	
9 Principal occup Program Mar	pation / Job title (See Instructions) nager	10 Employer (See In BinWise	structions)		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/23/2014	Contributor address; City; State; Zip Code 800 Tasha Ct Cedar Park, TX 78613		\$350.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup	pation / Job title (See Instructions)	Employer (See In	L	Toxas, complete scriedule 1)	
Realtor	·	Coldwell Bank	· · · · · · · · · · · · · · · · · · ·		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/16/2014	Contributor address; City; State; Zip Code 129 Hardhack Road Holdemess, NH 03245		\$200.00		
	·		(If travel outside of	Texas, complete Schedule T)	
Principal occup	ation / Job title (See Instructions)	Employer (See In:		Toxus, complete defleable 1/	
freelance write	er/producer/editor	self			
Date	Full name of contributor ut-of-state PAC (ID#) Wansky, Allan)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
06/12/2014	Contributor address; City; State; Zip Code 4421 Windsor Oaks Circle Marietta, GA 30066		\$350.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occup Senior Directo	ation / Job title (See Instructions) or	Employer (See Ins Intercontinental			
Date	Full name of contributor)	Amount of contribution (\$)	Iл-kind contribution description (if applicable)	
06/19/2014	Contributor address; City; State; Zip Code 5400 W. Parmer Lane Apt 432 Austin, TX 78727		\$100.00 	· :	
			(If travel outside of	Texas, complete Schedule T)	
Principal occupa	ation / Job title (See Instructions) nce designer	Employer (See Ins private family, se	structions)		

The Instruction	ION GUIDE explains how to complete this form.	· ·	1 PAGE#	100 5 1 07/70
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)	<u> </u>	_	5/26 Report: 27/53 (Ethics Commission filers)
	Thimpor Lloyd Gr. (Hir.)		3 ACCOUNT # 12345678	(Ethics Commission mers)
4 Date	5 Full name of contributor ut-of-state PAC (ID	#)	7 Amount of	8 In-kind contribution
	Williams, Jen		contribution (\$)	description (if applicable) Social media services
05/12/2014	6 Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	,
•	?41 Waller St APT 101 Austin, TX 78702		\$350.00	<u>.</u>
	,,,			
9 Principal occur	pation / Job title (See Instructions)	10 Employer (See In		Texas, complete Schedule T)
Marketing As		Vyopta, Inc.	Structions)	
Date	Full name of contributor	#	Amount of	In-kind contribution
J	Wilson, Levern	·	contribution (\$)	description (if applicable)
05/16/2014	Contributor address: City: State: Zip Code	••••••	2050.00	Photography services
UD/ 10/20 14	13200 Calf Roping Trail	!	\$250.00	I
	Austin, TX 78727	!		I
		·	<u> </u>	Texas, complete Schedule T)
Principal occup Inside Produc	pation / Job title (See Instructions) ct Specialist	Employer (See In: Dell Inc	structions)	
		<u> </u>		
Date	Full name of contributor ut-of-state PAC (ID# Wilson, Levern	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	viison, Esveri		(4)	i description (ii applicable)
06/19/2014	Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$50.00	! !
	13200 Calf Roping Trail Austin, TX 78727		1	!
			/lif traval autoide of	Tourne
Principal occup	Detion / Job title (See Instructions)	Employer (See Ins	<u> </u>	Texas, complete Schedule T)
Inside Produc	t Specialist	Dell Inc		_
Date	Full name of contributor ut-of-state PAC (ID#	;)	Amount of	In-kind contribution
	Wisian, Kenneth		contribution (\$)	description (if applicable)
06/20/2014	Contributor address; City; State; Zip Code		\$150.00 \$150.00	
	141 John Chisholm Rd Weatherford, TX 76087			
			<u>'</u>	_
Principal occup	pation / Job title (See Instructions)	Employer/See In		Texas, complete Schedule T)
Executive	adon / sou due (see mandedons)	Employer (See Ins State of Texas	structions)	
Date	Full name of contributor	<u> </u>	Amount of	In-kind contribution
	Zimmerman, Marc		contribution (\$)	description (if applicable)
06/10/2014	Contributor address; City; State; Zip Code		\$50.00 l	
00/10/2014	2505 Greenlee Dr.		\$50.00	
	Austin, TX 78703			
				Texas, complete Schedule T)
Principal occupa President / CC	ation / Job title (See Instructions)	Employer (See Ins Royalty Clearing		
				•

POLITICAL CONTRIBUTIONS

		ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 26/26 Report: 28/53	
2	FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12345678	
1	³ Date	5 Full name of contributor ☐ out-of-state PAC (ID# Zimmerman, Marc	<u>'</u>)	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)	
	06/10/2014	6 Contributor address; City; State; Zip Code 2505 Greenlee Dr. Austin, TX 78703		\$300.00 	
_	Principal and I	ction (lab title (O and title)		(If travel outside of Texas, complete Schedule T)	
9	President / Co	ation / Job title (See Instructions)	10 Employer (See In: Royalty Clearing	structions) ghouse	
			,		
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	,				
	-				

Texas Ethics Cor	mmission P.O.Box 12070 Austin	ı, Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
PLEDG	SED CONTRIBUTIONS			SCHEDULE B
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
2 FILER NAME	Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # 12345678	1 Report: 29/53 (Ethics Commission filers)
4 TOTAL	OF UNITEMIZED PLEDGES: ⇒	\$ \$ \$	\$ \$	\$
5 Date	6 Full name of pledgor	#)	8 Amount of pledge (\$)	9 In-kind description (if applicable)
06/27/2014	7 Pledgor address; City; State; Zip Code 2900 Cherry Lane Austin, TX 78703		\$700.00	†
40 Deinsteat		, _		Texas, complete Schedule T)
Manager / Sta	pation / Job title (See Instructions) ay-at-home-mom	11 Employer (See In Capitol Beverag	structions) je / N/A	

Texas Ethics Commis	ssion P.O.Box 12070 Austin, Te	exas 78711-2070	(512)463-5800	TDD 1-800-735-298
LOANS				SCHEDULE E
The Instruction Gu	JIDE explains how to complete this form.		1 PAGE# Schedule: 2/11	1 Report: 31/53
2 FILER NAME Phillips, Lloyd Jr. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 12345678	
TOTAL OF UN	IITEMIZED LOANS:	ರಾವಾರ್		\$
5 Date of loan 05/06/2014	7 Name of lender out Phillips, Lloyd Jr. (Mr.)	-of-state PAC (ID#)	9 Loan Amount (\$) \$26.60
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 28		10 Interest rate 0 11 Maturity date
	n / Job title (See Instructions)	13 Employer (See Instruct		TT Matarity date
US Army		Military		
14 Description of Colla	teral	15 Check if personal fund	s were deposited into	political account
16 GUARANTOR INFORMATION In not applicable	17 Name of guarantor 18 Guarantor address; City; State;	Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation	<u></u>	21 Employer		
Date of loan 05/08/2014	Name of lender	of-state PAC (ID#		Loan Amount (\$) \$42.32
Is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 8		Interest rate 0 Maturity date
Principal occupation US Army	n / Job title (See Instructions)	Employer (See Instruct Military	ions)	
Description of Collar	teral	Check if personal funds	were deposited into	political account
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
X not applicable	Guarantor address; City; State;	Zip Code		
Principal Occupation	1	Employer		
			<u> </u>	<u>.</u>

Texas Ethics Commis	ssion P.O.Box 12070 Austin, T	Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
LOANS				SCHEDULE E
The Instruction Gu	INDE explains how to complete this form.		1 PAGE # Schedule: 3/1	1 Report: 32/53
2 FILER NAME PI	hillips, Lloyd Jr. (Mr.)			Ethics Commission filers)
4 TOTAL OF UN	IITEMIZED LOANS:	ಎಎಎಎಎ		\$
5 Date of loan 05/12/2014	7 Name of lender OL Phillips, Lloyd Jr. (Mr.)	ut-of-state PAC (ID#)	9 Loan Amount (\$) \$14.99
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #1 Austin, TX 78727	Zip Code 128	<u> </u>	10 Interest rate 0 11 Maturity date
	n / Job title (See Instructions)	13 Employer (See Instruct		The manny date
14 Description of Collar	teral	15 Check if personal funds	s were deposited into	political account
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State;	Zip Code		
20 Principal Occupation	n	21 Employer	· · · · · · · · · · · · · · · · · · ·	
Date of loan 05/12/2014	Name of lender ou Phillips, Lloyd Jr. (Mr.)	ut-of-state PAC (ID#		Loan Amount (\$) \$28.33
is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #1 Austin, TX 78727	•		Interest rate 0
No	7.1.6.00 A			Maturity date
US Army	n / Job title (See Instructions)	Employer (See Instructi Military	ions)	
Description of Collat	eral eral	Check if personal funds	s were deposited into	political account
GUARANTOR INFORMATION	Name of guarantor Guarantor address; City; State;			Amount Guaranteed (\$)
ズ not applicable	Otalanto acciess, Giy, Giale,	Zip Code		
Principal Occupation	1	Employer		

Texas Ethics Commis	ssion P.O.Box 12070 Austin, Te	xas 78711-2070	(512)463-5800	TDD 1-800-735-298
LOANS				SCHEDULE E
The Instruction Gu	IDE explains how to complete this form.		1 PAGE # Schedule: 4/1	1 Report: 33/53
2 FILER NAME PI	hillips, Lloyd Jr. (Mr.)		3 ACCOUNT# (1 12345678	Ethics Commission filers)
TOTAL OF UN	ITEMIZED LOANS:	ಎಎಎಎಎ		\$
5 Date of loan 05/13/2014	7 Name of lender out-	of-state PAC (ID#		9 Loan Amount (\$) \$98.08
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code		10 Interest rate
No				11 Maturity date
12 Principal occupation US Army	n / Job title (See Instructions)	13 Employer (See Instructi Military	ions)	
14 Description of Colla	teral	15 Check if personal funds	were deposited into	political account
X none				
16 GUARANTOR INFORMATION	17 Name of guarantor	·		19 Amount Guaranteed (\$)
▼ not applicable	18 Guarantor address; City; State;	Zip Code		
20 Principal Occupation	1	21 Employer		
Date of loan 05/14/2014	Name of lender out- Phillips, Lloyd Jr. (Mr.)	of-state PAC (ID#		Loan Amount (\$) \$20.57
Is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 8		Interest rate
No	·			Maturity date
Principal occupation US Army	/ Job title (See Instructions)	Employer (See Instructi Military	ons)	
Description of Collat	eral	Check if personal funds	were deposited into	political account
X none				
GUARANTOR INFORMATION	Name of guarantor	-		Amount Guaranteed (\$)
X not applicable	Guarantor address; City; State;	Zip Code	•••	
Principal Occupation		Employer	<u>, </u>	
		<u> </u>		

Texas Ethics Commi	ssion P.O.Box 12070 Austin, Te	exas 78711-2070	(512)463-5800	TDD 1-800-735-2989
LOANS				SCHEDULE E
The Instruction Gu	иDE explains how to complete this form.		1 PAGE# Schedule: 7/1	1 Report: 36/53
2 FILER NAME Phillips, Lloyd Jr. (Mr.)			3 ACCOUNT # (E 12345678	thics Commission filers)
TOTAL OF UN	IITEMIZED LOANS:			\$
5 Date of loan 05/30/2014	7 Name of lender out Phillips, Lloyd Jr. (Mr.)	-of-state PAC (ID#)	9 Loan Amount (\$) \$100.00
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code		10 Interest rate
No				11 Maturity date
US Army	n / Job title (See Instructions)	13 Employer (See Instruct Military	ions)	· · · · · · · · · · · · · · · · · · ·
14 Description of Colla	teral	15 Check if personal funds	s were deposited into	political account
16 GUARANTOR INFORMATION	17 Name of guarantor	<u>. </u>		19 Amount Guaranteed (\$)
☑ not applicable	18 Guarantor address; City; State;	Zip Code		
20 Principal Occupatio	n	21 Employer		
Date of loan 06/06/2014	Name of lender ☐ out- Phillips, Lloyd Jr. (Mr.)	of-state PAC (ID#)	Loan Amount (\$) \$80.56
Is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 8		Interest rate 0
No				Maturity date
US Army	/ Job title (See Instructions)	Employer (See Instructi Military	ions)	
Description of Collai	teral	Check if personal funds	were deposited into	political account
GUARANTOR INFORMATION	Name of guarantor	L		Amount Guaranteed (\$)
▼ not applicable	Guarantor address; City; State;	Zip Code		,
Principal Occupation	1	Employer	<u>.</u>	

Texas Ethics Commis	ssion P.O.Box 12070 Austin, Te	exas 78711-2070	(512)463-5800	TDD 1-800-735-2989	
LOANS				SCHEDULE E	
The Instruction Gu	IDE explains how to complete this form.		1 PAGE# Schedule: 9/1	1 Report: 38/53	
2 FILER NAME PI	hillips, Lloyd Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12345678		
4 TOTAL OF UN	ITEMIZED LOANS:	එ එක් කත්ත කත්ත		\$	
5 Date of loan 06/09/2014	7 Name of lender	-of-state PAC (ID#)	9 Loan Amount (\$) \$30.15	
6 Is lender a financial Institution?	8 Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 28		10 Interest rate 0	
No		•		11 Maturity date	
12 Principal occupation US Army	/ Job title (See Instructions)	13 Employer (See Instruct Military	tions)		
14 Description of Collat	teral	15 Check if personal funds were deposited into political account			
X none	•	-			
16 GUARANTOR INFORMATION	17 Name of guarantor 18 Guarantor address; City; State;	Zip Code		19 Amount Guaranteed (\$)	
X not applicable					
20 Principal Occupation	1	21 Employer	I		
Date of loan 06/13/2014	Name of lender out-	of-state PAC (ID#)	Loan Amount (\$) \$30.85	
Is lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code 28		Interest rate	
No				Maturity date	
Principal occupation US Army	/ Job title (See Instructions)	Employer (See Instructi Military	ions)		
Description of Collate	eral	Check if personal funds	were deposited into	political account	
▼ none	}	<u>-</u>			
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)	
▼ not applicable	Guarantor address; City; State;	Zip Code			
Principal Occupation		Employer	<u> </u>		

Texas Ethics Commis	ssion P.O.Box 12070 Austin, T	exas 78711-2070	(512)463-5800	TDD 1-800-735-298	
LOANS	•			SCHEDULE E	
The Instruction Gu	IIDE explains how to complete this form.		1 PAGE# Schedule: 10/1	1 Report: 39/53	
2 FILER NAME Phillips, Lloyd Jr. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 12345678		
TOTAL OF UN	ITEMIZED LOANS:	ಎಎಎಎಎ			
5 Date of loan 06/13/2014	7 Name of lender out Phillips, Lloyd Jr. (Mr.)	I-of-state PAC (ID#		9 Loan Amount (\$) \$238.12	
6 Is lender a financial Institution?	financial Institution? 6001 W. Parmer Lane, Ste. 370 #128			10 Interest rate	
No	Austin, TX 78727			11 Maturity date	
US Army	n / Job title (See Instructions)	13 Employer (See Instructions) Military			
14 Description of Colla	teral	15 Check if personal fund	s were deposited into	political account	
16 GUARANTOR INFORMATION	17 Name of guarantor		1	9 Amount Guaranteed (\$)	
	18 Guarantor address; City; State;	Zip Code		*	
20 Principal Occupation	,	21 Employer	·		
Date of loan 06/16/2014	Name of lender	of-state PAC (ID#)	Loan Amount (\$) \$69.00	
ls lender a financial Institution?	Lender address; City; State; 6001 W. Parmer Lane, Ste. 370 #12 Austin, TX 78727	Zip Code		Interest rate	
No 				Maturity date	
Principal occupation US Army	/ Job title (See Instructions)	Employer (See Instruct Military	ions)		
Description of Collat	eral	Check if personal funds	s were deposited into p	political account	
▼ none	·				
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)	
X not applicable	Guarantor address; City; State;	Zip Code			
Principal Occupation		Employer			

Texas Ethics Commission P.O.Box 12070 Austi	n, Texas 78711-2070	(512)463-580	TDD 1-800-735-2989	
LOANS			SCHEDULE E	
The Instruction Guide explains how to complete this for	m,		/11 Report: 40/53	
2 FILER NAME Phillips, Lloyd Jr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12345678		
TOTAL OF UNITEMIZED LOANS:	\$\$\$\$		\$	
06/20/2014 Phillips, Lloyd Jr. (Mr.)	out-of-state PAC (ID#		9 Loan Amount (\$) \$59.00	
financial Institution? 6001 W. Parmer Lane, Ste. 37 Austin, TX 78727	ate; Zip Code		10 Interest rate 0	
No 12 Principal occupation / Job title (See Instructions)	110 - 100		11 Maturity date	
US Army 14 Description of Collateral	13 Employer (See Instru Military		· .	
X none	15 Check if personal fun	ds were deposited int	o political account	
16 GUARANTOR INFORMATION 17 Name of guarantor			19 Amount Guaranteed (\$)	
18 Guarantor address; City; Sta	ite; Zip Code			
20 Principal Occupation	21 Employer	· ·	· ·	
	•			
			•	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense
Printing Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

	I ne Instruction Guide explains how	to complete this form.	
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 1/13 F	Report: 41/53 Phillips, Lloyd Jr. (Mr.)		12345678
4 Date	5 Payee name		12343076
06/13/2014	Academy		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$238.12	12250 Research Blvd		
	Austin, TX 78759		•
		•	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside	of Towns consists But 11 TO 1
PURPOSE	Event Expense		of Texas, complete Schedule T)
OF	Evolic Experies	Gazebo canopy, canopy v Splash event	veignts, water for Dash 2
EXPENDITURE		Opiasii event	
0.0.14.60044	0 11 / 07	_ _	
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH	·		
D-1-			
Date	Payee name		- · · · · · · · · · · · · · · · · · · ·
05/28/2014	Chisholm Trail Icehouse & BBQ		
Amount (\$)	Payee address City; State; Zip Code		
\$261.51	8650 Spicewood Springs Rd		
Ψ201.01	Austin, TX 78759		
	Catagony (See Catagonia Batad at the Law State		
PURPOSE	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
OF	Event Expense	Campaign kick-off party	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		_	
Date	Payee name		· · · · · · · · · · · · · · · · · · ·
05/06/2014	Compass Bank	•	
Amount (\$)	Payee address City; State; Zip Code	···	
\$12.45	4100 N. Lamar Blvd.		
ψ12. 1 0	Austin, TX 78756-3716		
	Cotogony /S-a Cotogoine listed at the Law (1)	T 5	
PURPOSE	Category (See Categories listed at the top of this schedule)	•	of Texas, complete Schedule T)
OF	Accounting/Banking	Check order fee	
EXPENDITURE			
		<u></u>	
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/QH			
		<u> </u>	
Date	Payee name		
05/30/2014	Four Points Chamber		
Amount (\$)	Payee address City; State; Zip Code		ì
\$100.00	6816 RM 620 N		
\$ 100,00	Austin, TX 78729		
			,
	Category (See Categories listed at the tax of this sector)	D	
PURPOSE	Category (See Categories listed at the top of this schedule)		of Texas, complete Schedule T)
OF	Event Expense	Vendor expo booth rental	- Dash 2 Splash event (in
EXPENDITURE		state / outside district)	l
		<u> </u>	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH	·		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

The Instruction Guide explains how to complete this form.

1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 2/13 F	Report: 42/53	Phillips, Lloyd Jr. (Mr.)		12345678
4 Date	5 Payee name			
05/08/2014	GoDaddy.co			
6 Amount (\$)	7 Payee addres	, ,, 		
\$42.32	14455 North	Hayden Road		
	Ste. 219 Scottsdale,	A7 85260		
				<u> </u>
8 PURPOSE		Categories listed at the top of this schedule)	(b) Description (If travel out	side of Texas, complete Schedule T)
OF	Advertising B	expense	Domain registration - p electpetephillips.com	etephillips4austintexas.com,
EXPENDITURE			Ciccipeteprinips.com	
9 Complete ONLY if	Candidate / O	fficeholder name	Office sought;	Office held:
direct expenditure to benefit C/OH		:	Cinico sought.	Office field.
Date	Payee name		-	
05/12/2014	GoDaddy.co			
Amount (\$)	Payee address	. **		
\$28.33	14455 North Ste. 219	Hayden Road		
	Scottsdale,	AZ 85260		
PURPOSE	Advertising E	Categories listed at the top of this schedule)		side of Texas, complete Schedule T)
OF EXPENDITURE	r to vortioning E	Apense	Domain registration - p peteforaustin.NET	eteroraustin.com,
EXPENDITURE			potos de de la companya de la compan	
Complete ONLY if	Candidate / Of	ficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				Ollido Viela,
			 	
Date 05/12/2014	Payee name			
Amount (\$)	GoDaddy.coi			
` ,	Payee address		•	
\$14.99	Ste. 219	Hayden Road		
	Scottsdale,	AZ 85260		
	Category (See	Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE		ead/Rental Expense	Productivity Plus - mon	
OF EXPENDITURE		•		, (0.0 000)
		<u></u>		
Complete ONLY if direct expenditure	Candidate / Of	ficeholder name	Office sought:	Office held:
to benefit C/OH				\$
Date	Payee name			
05/29/2014	GoDaddy.cor	m	1	
Amount (\$)	Payee address			
\$19.71	•	Hayden Road		
Ψ13.71	Ste. 219	•		
	Scottsdale, A	AZ 85260		
	Category (See	Categories listed at the top of this schedule)	Description (If travel outs	ide of Texas, complete Schedule T)
PURPOSE OF	Advertising E	xpense		yr peteforaustinssake.com
EXPENDITURE				
				
Complete ONLY if direct expenditure	Candidate / Off	īceholder name	Office sought:	Office held:
to benefit C/OH				

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

	I THE INSTRUCTION GUIDE EXPLAINS ho	w to complete this form.	
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 3/13 F			12345678
4 Date	5 Payee name		
05/29/2014	GoDaddy.com	<u> </u>	
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$69.99	14455 North Hayden Road Ste. 219		
	Scottsdale, AZ 85260		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside	of Texas, complete Schedule T)
OF	Advertising Expense	Standard SSL - 1 yr petet	oraustin.com
EXPENDITURE			
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		Omeo Sought.	Office field.
Date	Payee name	-	
06/09/2014	Grasshopper.com		
Amount (\$)	Payee address City; State; Zip Code		
\$30.15	197 1st Avenue, Suite 200 Needham, MA 02494		
	Needilain, MA 02494		
	Catagony (San Catagonia Estad at the Catagonia	1	
PURPOSE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description (If travel outside	of Texas, complete Schedule T)
OF EXPENDITURE	Conclusion and aising Expense	Mthly svc allows voluntee campaign activities w/o us	rs to use prsnl phones for
EXPENDITURE		oumpaign courties wie di	ang pran minutes
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		Office adagne.	Office field.
Date	Payee name		
06/08/2014	Greystar Media		
Amount (\$)	Payee address City; State; Zip Code		
\$3,034.06	PO Box 801 Austin, TX 78767		
	ridduri, TX 70707		
	Category (See Categories listed at the top of this schedule)		
PURPOSE	Advertising Expense		of Texas, complete Schedule T)
OF EXPENDITURE	ravortioning Expense	5,000 pushcards Pete Phi	HIPS FOR DISTRICT 6
EVLEMDITAKE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			Office field.
			
Date 06/08/2014	Payee name Greystar Media		··
Amount (\$)			
` ' '	Payee address City; State; Zip Code PO Box 801		
\$3,000.00	Austin, TX 78767		
	7.00.00		İ
	Category (See Categories listed at the top of this schedule)	Donatation //	
PURPOSE	Consulting Expense		of Texas, complete Schedule T)
OF EXPENDITURE	Bridg Enposito	Corbin consulting svcs 5/1	4 0x 0/14
EAFLINDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		3 3	omou noid.
			_

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 4/13 Report: 44/53 12345678 Date 4 5 Payee name 06/14/2014 Gross, Chris Amount (\$) Payee address City; State; Zip Code \$320.00 4200 Ave A #202 Austin, TX 78751 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) (b) Description **PURPOSE** Advertising Expense 1000 Pete Phillips for District 6 koozies OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/06/2014 LinkedIn.com Amount (\$) Payee address City; State; Zip Code 2029 Stierlin Court \$26.60 Mountain View, CA 94043 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Monthly recurring fee for LinkedIn premium acct -OF PP Candidate for Dist 6 **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name LinkedIn.com 06/06/2014 Amount (\$) Payee address City; State; Zip Code 2029 Stierlin Court \$26.60 Mountain View, CA 94043 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Pete Phillips Candidate for District 6 premium OF membership **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/06/2014 Office Depot Amount (\$) Payee address City; State; Zip Code \$80.56 4501 W Braker Ln Austin, TX 78759 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense Office supplies **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Polling Expense Printing Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 5/13 Report: 45/53 12345678 4 Date 5 Payee name 05/14/2014 **Papyrus** 6 Amount (\$) Payee address State; Zip Code City: 3400 Esperanza Crossing \$20.57 Ste. 100 Austin, TX 78758 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) (b) Description **PURPOSE** Advertising Expense Pete Phillips for District 6 thank-you notes OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Payee name 06/13/2014 Papyrus Amount (\$) Payee address City; State; Zip Code 3400 Esperanza Crossing \$30.85 Ste. 100 Austin, TX 78758 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Papyrus - Pete Phillips for District 6 thank-you notes OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/21/2014 Pirvx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$17.25 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Accounting/Banking Piryx donation processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/22/2014 Piryx Amount (\$) Payee address City; State; Zip Code \$14.38 144 2nd St. 1st Floor San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Food/Beverage Expense
Polling Expense
Printing Expense

EXPENDITURE CATEGORIES

sinse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 6/13 Report: 46/53 12345678 Date 5 Payee name 05/26/2014 Piryx 6 Amount (\$) Payee address City: State: Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Payee name 05/29/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$31.63 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/30/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 05/31/2014 Piryx Amount (\$) Payee address City; State; Zip Code \$8.63 144 2nd St. 1st Floor San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

to benefit C/OH

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form. PAGE # FILER NAME 2 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 7/13 Report: 47/53 12345678 4 Date Payee name 06/02/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$7.76 San Francisco, CA 94105 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/03/2014 Piryx Amount (\$) Pavee address City; State; Zip Code 144 2nd St. 1st Floor \$40.26 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/04/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$3.45 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/05/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Office Overhead/Rental Expense Fees Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE # FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 8/13 Report: 48/53 12345678 4 Date 5 Payee name 06/06/2014 Piryx 6 Amount (\$) Payee address City; State: Zip Code 144 2nd St. 1st Floor \$2.88 San Francisco, CA 94105 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) (b) Description **PURPOSE** Accounting/Banking Pirvx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/10/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$134.58 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/11/2014 Piryx Amount (\$) Payee address City; State; Zip Code \$28.75 144 2nd St. 1st Floor San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/12/2014 Piryx Amount (\$) Payee address City; State; Zip Code \$55.50 144 2nd St. 1st Floor San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Polling Expense Printing Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE # FILER NAME 2 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 9/13 Report: 49/53 12345678 4 Date 5 Payee name 06/13/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$16.96 San Francisco, CA 94105 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/14/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/15/2014 Рігух Amount (\$) Payee address Zip Code City; State; \$35.09 144 2nd St. 1st Floor San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/16/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$13.51 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 10/13 Report: 50/53 12345678 4 Date Payee name 06/17/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code \$28.47 144 2nd St. 1st Floor San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/19/2014 Piryx Amount (\$) Pavee address City: State: Zip Code \$72.18 144 2nd St. 1st Floor San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/QH Date Payee name 06/20/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$24.16 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought. Office held: direct expenditure to benefit C/OH Date Payee name 06/21/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$20,19 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

nse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Phillips, Lloyd Jr. (Mr.) Schedule: 11/13 Report: 51/53 12345678 4 Date Payee name 06/24/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$9.20 San Francisco, CA 94105 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/26/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$15.23 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/27/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$17.25 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 06/28/2014 Рігух Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$5.75 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Piryx contribution processing fees OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense Legal Services
Food/Beverage Expense
Polling Expense

Printing Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District
Travel Out Of District
Office Overhead/Rental Expense

	The Instruction Guide explains how	w to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 12/13	Report: 52/53 Phillips, Lloyd Jr. (Mr.)	12345678
4 Date 06/30/2014	5 Payee name Piryx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$81.38	144 2nd St. 1st Floor	
	San Francisco, CA 94105	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Accounting/Banking	Piryx contribution processing fees
EXPENDITURE		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
06/16/2014	StackSocial	
Amount (\$)	Payee address City; State; Zip Code	
\$69.00	21 Market Street	
	Venice, CA 90291	
	Category (See Categories listed at the top of this schedule)	Description (III)
PURPOSE	Solicitation/Fundraising Expense	Description (If travel outside of Texas, complete Schedule T) Monthly Karma subscription - wifi for Karma hotspots
OF EXPENDITURE		Montally Rainfa Sabsonption Will for Rainfa Hotspots
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH	. ,	
Date	Payee name	
04/25/2014	Travis County Clerk	
Amount (\$)	Payee address City; State; Zip Code	
\$31.00	PO Box 149325	
	Austin, TX 78714-9325	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Fees	Assumed name records cert of ownership - Pete
OF EXPENDITURE		Phillips
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH	<u> </u>	
Date	Payee name	
05/13/2014	Verizon Wireless	
Amount (\$)	Payee address City; State; Zip Code	
\$98.08	PO BOX 660108 Dallas, TX 75266-0108	
	Dallas, 17, 73200-0100	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) Monthly recurring fee - PP Candidate for Dist 6
OF EXPENDITURE		phone
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

	I ne instruction	ON GUIDE explains how to	o complete this for	m.		
1 PAGE#	2 FILER NAME				3 ACCOUNT#	(TEC filers)
Schedule: 13/13		r. (Mr.)			12345678	
4 Date	5 Payee name		-			
06/08/2014	YourKarma.com				_	
6 Amount (\$)	7 Payee address City; Sta	ate; Zip Code				
\$153.99 	1194 Oak Valley Dr. Suite 80 Ann Arbor, MI 48108					
8 PURPOSE	(a) Category (See Categories listed at the		(b) Description	(If travel outside of	f Texas, complete S	schedule T)
OF OF	Office Overhead/Rental Expense	е	Hotspot device #1 for use at campaign events, etc.			
EXPENDITURE						
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	jht:	Office held:	
Date	Рауее пате					
06/20/2014	YourKarma.com					
Amount (\$)	Payee address City; Sta	ate; Zip Code	·			
\$59.00	1194 Oak Valley Dr. Suite 80 Ann Arbor, MI 48108	•	·			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the to Office Overhead/Rental Expense			(If travel outside of om - hotspot d	f Texas, complete Solevice #2	chedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office soug	ht:	Office held:	