CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER							
1 ACCOUNT#	067874	2 Total ;	ages filed: 56		OFFIC	E USE ONL	Υ
3 CANDIDATE/ OFFICEHOLDER NAME	MS/MRS/MR MC. NICKNAME	Robert Thomas		SUFFIX	Date Received	2014 JUL	RE
4 ORIGINAL REPORT TYPE  5 ORIGINAL PERIOD	January 15 July 15 30th day before election  Month Day	Runoff  Exceeded \$500	easurer	year	Date Hand-delivered Receipt # Date Processed	22 or Postmesting 5	ECEIVED
COVERED	03/10/				Date Imaged		
Omission on Schedule G - \$60.00, A Small Orange, Dtd. 5/19/2014 Omission on Schedule G - \$6.01, Ring Central, Dtd. 6/13/2014							
7 AFFIDAVIT		I swear, or affirm report is true an	, under penalty or d correct.	f perjury, ti	nat this correc	cted	
		Check ONLY if a	pplicable:		·		,
·	X	semiannual rep ment/correction report was filed, in good faith and	ports: This repo ort due on or aff is filed on or aft I swear, or affirm I without an inten ained in the repo	ter Septer er the eigl n, that the nt to misles	m <b>ber 1, 201</b> 1 hth day after original repor	i. If amend the origina t was mad	:- :::i::::::::::::::::::::::::::::::::
ADRIAN AVILA Notary Public STATE OF TEXAS My Comm. Exp. 06-20-2016  Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.							
	AMP / SEAL ABOVE  ed before me, by the said	POBERT	Thomas	this the 2	day of _	July	
20	Α Λ.	and and seal of office.  Alcua,	s Avla		7=1501	AL BAW	KER
Signature of officer ad-	ministering oath	Printed name of o	officer administering oat	h	Title of office	er administerir	ng cáth
Remember To Attach Any Part Of The Campaign Finance Report Form  Needed To Report And Explain Corrections							

GO TO PAGE 2

City Council District 10

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13 C/OH NAME Thom	nas, Robert (Mr.)		en de et production de la company de la comp	14 ACCOUNT # 00067874	(Ethics Commission file
15 NOTICE FROM	have been made wit	otice of political expenditure hout the candidate's or offi ey receive notice of such a	res by political committees to suppor ceholder's knowledge or consent. Co		These expenditures may are required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Apericitales	25 2	
	;			•	
	GENERAL	COMMITTEE ADDRESS	the second than the second as a second second	العافرية والأواداء فالعام المتطلقون والمعاري عامل	and the second s
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	or courie	COMMITTEE CAMPAIGN 1	REASURER NAME		
additional pages				· · · · · · · · · · · · · · · · · · ·	
en en lagin in in our de l'Albah an east an l en en lagin de la company	-1	COMMITTEE CAMPAIGN T	75.101.75.		
la de la companya de	k njetsky profite Hanna og skrivet i stateme	The same at the came at the came	REASUREH ADDRESS	tion of the second seco	in an included
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6 CONTRIBUTION TOTALS	t. TOTAL P PLEOGE	OLITICAL CONTRIBUTIO S, LOANS, OR GUARANT	NS OF \$50 OR LESS (OTHER THA EES OF LOANS), UNLESS ITEMIZ	N ED \$44 \$	0.00
e de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela com	2 TOTAL P	OLITICAL CONTRIBUTION THAN PLEDGES, LOANS	OR GUARANTEES OF LOANS)		52,279.00
EXPENDITURE TOTALS	3. TOTAL P		S OF \$100 OR LESS, UNLESS ITE	MIZED	<u> </u>
1.55		•		\$	0.00
	4. TOTAL PO	OLITICAL EXPENDITURE	is .	in the second of	
		entro Aug	er en		12,312.87
CONTRIBUTION BALANCE	5. TOTAL PO LAST DAY	OLITICAL CONTRIBUTION OF THE REPORTING PE	IS MAINTAINED AS OF THE	\$	51,879.00
OUTSTANDING I OAN TOTALS	6. TOTAL PR	INCIPAL AMOUNT OF AL	L OUTSTANDING LOANS AS OF T		gebrata (inc. ) a i
LOAN TOTALS	ALAST DAY	OF THE REPORTING PE	RIOD	\$	100,000.00
AFFIDAVIT	2. D 9 9			1. 40.00 P. (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
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	estate in the second		I swear, or affirm, under pen- is true and correct and include	alty of perjury, that the ad	companying report
	•	:	me.under Title 15, Election C	ode.	o to be reported by
		e Total	- (, )  Y/	Per North	
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Tarantin A	remove the		Signature o	Candidate or Officehold	ler
AFFIX NOTARY STA	MP/SEAL ABOVE				· :
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worn to and subscribed	before me by the	said _ fober1	Thomas	ship shall M	TH
<u>Joh</u>	4.1		nand and seal of office.	this the	AAAAAAA DAYAAA
		minicaa iiiy i	rana ana seal di OMICE.		ADRIAN AVILA
AL ALL	representation of the second of	• '			Notary Public E
Malle		1		ATT C	Notary Public TATE OF TEXAS July Exp. 08-20-3010

The f	NSTRUCTIO	אס Guide explains how to complete this form.		1 PAGE # Schedule: 1/4	18 Report: 3/55
2 FILEF	RNAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Dat	te	5 Full name of contributor  ut-of-state PAC (ID Allen, Dan	#) ·	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/27	7/2014	6 Contributor address; City; State; Zip Code 6808 Marbrys Ridge Cove Austin, TX 78731		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
9 Princip CFO	pal occup	pation / Job title (See Instructions)	10 Employer (See In Hunter Kelsey	structions)	
Dat	te	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/09	)/2014	Contributor address; City; State; Zip Code 6802 Edgefield Dr Austin, TX 78731		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	pal occup cal Doct	oation / Job title (See Instructions) or	Employer (See In Austin Anesthe		
Dat	te	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/09	9/2014	Contributor address; City; State; Zip Code 6802 Edgefield Dr Austin, TX 78731		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	pal occup emaker	oation / Job title (See Instructions)	Employer (See In Homernaker	structions)	
Dat	te	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/27	7/2014	Contributor address; City; State; Zip Code 6808 Marbrys Ridge Cove Austin, TX 78731		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
	pal occup nanical E	pation / Job title (See Instructions) Ingineer	Employer (See In Retired	structions)	
Da	te	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19	9/2014	Contributor address; City; State; Zip Code 4118 Balcones woods dr Austin, TX 78759		\$100.00	 
		_		(If travel outside of	Texas, complete Schedule T)
Princi Engir		ation / Job title (See Instructions)	Employer (See In Freescale	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4	18 Report: 4/55		
2	FILER NAME	Thomas, Robert (Mr.)	"	3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Arcediano, Paul		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/30/2014	6 Contributor address; City; State; Zip Code 1127 Old Bastrop Hwy Austin, TX 78742		\$350.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Transportatio	nation / Job title (See Instructions)	10 Employer (See In R&R Limousine				
	Date	Full name of contributor  ut-of-state PAC (ID# Ashy, Kirk	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 7210 Montana Norte		\$350.00			
		Austin, TX 78731			·		
		•			Texas, complete Schedule T)		
	Principal occup Insurance	eation / Job title (See Instructions)	Employer (See In Shepard & Walt	structions) ton Llfe Insurance	Agency, Inc.		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 7210 Montana Norte Austin, TX 78731		\$350.00	 		
		·		(If travel outside of	Texas, complete Schedule T)		
	Principal occup Teacher	oation / Job title (See Instructions)	Employer (See In First Presbyteria				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/09/2014	Contributor address; City; State; Zip Code 4207 Farhills Dr Austin, TX 78731		\$200.00			
	·			(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self - Saunders	structions) , Norval, Pargama	ın & Atkins, LLP		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 709 W. 14th St. Austin, TX 78701		\$350.00			
		,		(If travel outside of	Texas, complete Schedule T)		
_	Principal occur	pation / Job title (See Instructions)	Employer (See In:	<u> </u>	,,		
	Investor	adon root into (occ instructions)	Self Employed	onuonone)			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/4	48 Report: 5/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Barclay, Andy	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/04/2014	6 Contributor address; City; State; Zip Code 8400 Emerald Hill Drive Austin, TX 78759		\$150.00	   
			•	(If travel outside of	Texas, complete Schedule T)
9	Principal occup Insurance Ag	ation / Job title (See Instructions) ent	10 Employer (See In The John A. Ba	structions) rclay Agency Inc	
	Date	Full name of contributor  ut-of-state PAC (ID# Bassett, Paul	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/30/2014	Contributor address; City; State; Zip Code 3914 Rockledge Dr		\$200.00	 
		Austin, TX 78731	•	(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In		
	Engineer		Qualcomm, Inc.		
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 8402 Burkwood Cove Austin, TX 78735		\$350.00	] 
					_
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chief Financi	ation / Job title (See Instructions) al Officer	Employer (See In: Austin Travis Co	structions) ounty Integral Car	re
	Date	Full name of contributor  ut-of-state PAC (ID# Beattie, Chester	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 8402 Burkwood Cove Austin, TX 78735		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Asst. Genera	ation / Job title (See Instructions)	Employer (See In: Health and Hurr	structions) nan Services Com	nmision
	Date	Full name of contributor  ut-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/03/2014	Contributor address; City; State; Zip Code 6400 Deer Hollow Austin, TX 78750		\$200.00	I
				(If traval autoids of	Texas, complete Schedule T)
	Principal occur	nation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete scriedule 1)
	Retired	ALLEN OUD MILE (USE INDUSTRIE)	Retired	on denotio)	

_	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 4/4	48 Report: 6/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Bell, Gayle	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/03/2014	<b>6</b> Contributor address; City; State; Zip Code 6504 Winterberry Dr Austin, TX 78750		\$100.00	   
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)	· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor  ut-of-state PAC (ID# Bernal, Gilbert (J.)	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
ı	06/19/2014	Contributor address; City; State; Zip Code 10614 Double Spur Loop Austin, TX 78759	•••••	\$200.00	 
			- <del></del> -	l -	Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Stahl, Bernal, D	structions) avies, Sewell & C	Chavarria, LLP
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
ı	05/29/2014	Contributor address; City; State; Zip Code 7140 Chimney Cors Austin, TX 78731		\$250.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chief Financia	ation / Job title (See Instructions) al Officer	Employer (See In PSW Real Esta		
	Date	Full name of contributor  ut-of-state PAC (ID# Betts, Charles	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	06/19/2014	Contributor address; City; State; Zip Code 14741 Arrowhead Volente, TX 78641		\$250.00	1   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Association	ation / Job title (See Instructions)	Employer (See In Downtown Aust		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
,	06/07/2014	Contributor address; City; State; Zip Code 1705 Kinsmon Cove Marietta, GA 30062		\$100.00	1   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Catering	ation / Job title (See Instructions)	Employer (See In Cajun Crawlers	structions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

	The Instruction	ON GUIDE explains how to complete this form.			1 PAGE# Schedule: 5/4	48 Report: 7/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state Blake, Alan	PAC (ID#	<i>#</i> )	7 Amount of contribution (\$)	8
	06/18/2014	6 Contributor address; City; State; Z P.O. Box 20295 Austin, TX 78720	ip Code		\$350.00	   
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Owner	ation / Job title (See Instructions)		10 Employer (See In Glo-Fish	structions)	
	Date	Full name of contributor	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/24/2014	Contributor address; City; State; Z 7709 Shadyrock Drive Austin, TX 78731	ip Code		\$350.00	   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	·	Employer (See In Retired	structions)	
	Date	Full name of contributor  ut-of-state  U out-of-state	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Z 8609 Alverstone way Austin, TX 78759	ip Code		\$100.00	   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired Teach	ation / Job title (See Instructions) ner		Employer (See In Retired Teache		
	Date	Full name of contributor  ut-of-state  Dodenman, David (C)	PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/09/2014	Contributor address; City; State; Z 10821 Range View Dr Austin, TX 78730	ip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	] 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)		Employer (See In Highland Resou		
	Date	Full name of contributor	PAC (ID#	<del>†</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; City; State; Z 106 Laurel Lane Austin, TX 78705	ip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)		Employer (See In Borgelt Law		
				1		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/4	48 Report: 8/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Borow, Hilary (C.)	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/10/2014	6 Contributor address; City; State; Zip Code 1501 Allston St. Houston, TX 77008		\$350.00	! !		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See In: Winstead PC	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 8112 Asherton Cove Austin, TX 78750		\$250.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Home Design	pation / Job title (See Instructions)	Employer (See In: Jeff Watson Ho				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/06/2014	Contributor address; City; State; Zip Code 5201 Rambling Range Austin, TX 78727		\$350.00	I I I		
			- !	(If travel outside of	Texas, complete Schedule T)		
	Principal occup QA Engineer	pation / Job title (See Instructions)	Employer (See In: GM				
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/06/2014	Contributor address; City; State; Zip Code 5201 Rambling Range Austin, TX 78727		\$350.00	 		
	l	1	1	(If travel outside of	Texas, complete Schedule T)		
	Principal occup Sr. Product M	nation / Job title (See Instructions) Ianager	Employer (See In: Ebay	1			
	Date	Full name of contributor  ut-of-state PAC (ID# Brendle, Virginia	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/03/2014	Contributor address; City; State; Zip Code 6501 Winterberry Drive Austin, TX 78750		\$100.00	 		
			!	(15 toward posterido of	Texas, complete Schedule T)		
_	Principal occur	pation / Job title (See Instructions)	Employer (See Ins	<u> </u>	Texas, complete schedule 1)		
	Retired	allotty coo allo (coo managiano)	Retired	3i dello(13)			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/4	48 Report: 9/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Brewer, Joel	)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	6 Contributor address; City; State; Zip Code 3514 Hillbrook Dr. Austin, TX 78731		\$300.00	   		
				(If travel outside of	Texas, complete Schedule T)		
9		ation / Job title (See Instructions) tion Security Specialist	10 Employer (See In Visa, Inc.				
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 3514 Hillbrook Dr. Austin, TX 78731		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) Accessibility Consultant	Employer (See In Stacey Brewer	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 605 Rainbow Cove Austin, TX 78746		\$350.00	[ ] [		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Broaddus & Ass	•			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 605 Rainbow Cove Austin, TX 78746		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In: Homemaker	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/03/2014	Contributor address; City; State; Zip Code 6209 Turtle Point Dr. Austin, TX 78746		\$50.00			
			·	(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:				
	Retired		Retired	•			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/4	48 Report: 10/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full πame of contributor	)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/14/2014	6 Contributor address; City; State; Zip Code 98 San Jacinto Blvd. Ste 2000 Austin, TX 78701	•••••	\$150.00	1 1 1		
		1	!	(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See Ins FBH&H	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Code 120 Highlander Cove		\$100.00	] 		
<u> </u>		Austin, TX 78734		(If travel outside of	Texas, complete Schedule T)		
	Principal occup CEO	pation / Job title (See Instructions)	Employer (See Ins Onsupport Corp				
	Date	Full name of contributor  ut-of-state PAC (ID# Cardwell, Marsha		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/16/2014	Contributor address; City; State; Zip Code P.O. 585 Austin, TX 76950		\$200.00	 		
			• 1	(If travel outside of	Texas, complete Schedule T)		
_	Principal occup Self Employed	pation / Job title (See Instructions)	Employer (See Ins Self Employed	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/22/2014	Contributor address; City; State; Zip Code 3921 Edgerock Austin Austin, TX 78731		\$250.00	 		
	J	Austri, 1770/01	1	(If travel outside of	Texas, complete Schedule T)		
	Principal occupa	pation / Job title (See Instructions)	Employer (See Ins USA Training Co	structions)	<u> </u>		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/19/2014	Contributor address; City; State; Zip Code 6714 Mountain Tr Austin, TX 78731		\$250.00	! !		
			1	(tf travel outside of	Texas, complete Schedule T)		
	Principal occupa Broker	pation / Job title (See Instructions)	Employer (See Ins TicketCity	structions)			

•		·	<u> </u>			
Th	e instruction	ON GUIDE explains how to com	nplete this form.		1 PAGE # Schedule: 9/4	48 Report: 11/55
2 FIL	ER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Colbert, Joseph	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/	/07/2014	6 Contributor address; 108 Vandenter Burnet, TX 78611	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	incipal occup etired	ation / Job title (See Instruction	ns)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor Colbert, Patti	out-of-state PAC (ID#	<u>"</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/	/29/2014	Contributor address; P.O. Box 703 Bertram, TX 78605	City; State; Zip Code		\$350.00	 
			,		j '	Texas, complete Schedule T)
	ncipal occup vestor	ation / Job title (See Instruction	ns) 	Employer (See In Self Employed	structions)	
Ī	Date	Full name of contributor Coopwood, Thomas (Dr.)	☐ out-of-state PAC (ID#	<b>#</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/	/04/2014	Contributor address; 6717 Valburn Drive Austin, TX 78731	City; State; Zip Code		\$250.00	 
						Texas, complete Schedule T)
	ncipal occup etired	ation / Job title (See Instruction	ns)	Employer (See In Retired	structions)	
1	Date	Full name of contributor Crowley, Carol	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/	/16/2014	Contributor address; 5902 Lonesome Valley Trail Austin, TX 78731	City; State; Zip Code		\$350.00	   
					(If travel outside of	Texas, complete Schedule T)
	ncipal occup omemaker	ation / Job title (See Instruction	ns)	Employer (See In Homemaker	structions)	
I	Date	Full name of contributor Crowley, Tim	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/	/16/2014	Contributor address; 5902 Lonesome Valley Trail Austin, TX 78731	City; State; Zip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
_	ncipal occup inker	ation / Job title (See Instruction	ns)	Employer (See In Frost Bank	L <u>.                                    </u>	
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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	1/48 Report: 12/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Crownover, Joseph	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/06/2014	6 Contributor address; City; State; Zip Code 525 Torrey Pines Cibolo, TX 78108		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Manager	ation / Job title (See Instructions)	10 Employer (See In Public Servant	structions)				
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/30/2014	Contributor address; City; State; Zip Code 2306 Masonwood Way Round Rock, TX 78681		\$250.00	 			
		Troulia Flock, 12 70001		(If travel outside of	Texas, complete Schedule T)			
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In: Gila	structions)				
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/11/2014	Contributor address; City; State; Zip Code 15107 Oak Loft San Antonio, TX 78232		\$350.00	 			
		*		(If travel outside of	Texas, complete Schedule T)			
	Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See In: EcoLab	structions)				
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/09/2014	Contributor address; City; State; Zip Code 5501 Cedro Trail Austin, TX 78731		\$250.00	   			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Financial Adv	ation / Job title (See Instructions) isor	Employer (See In: Southwest Secu					
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/29/2014	Contributor address; City; State; Zip Code 1403 Club Ridge Cove Austin, TX 78735		\$250.00	   			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup County Comn	ation / Job title (See Instructions) nissioner	Employer (See In: Travis County	structions)				

P.O.Box 12070

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The INSTRU	истюм Guide explains how to complete this form.		1 PAGE# Schedule: 11	/48 Report: 13/55
2 FILER NAM	ME Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor  ut-of-state PAC (ID#	<del>*</del> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/20/20 <sup>-</sup>	4 6 Contributor address; City; State; Zip Code 2904 Kinloch Dr Cedar Park, TX 78613		\$150.00	1 
			(If travel outside of	Texas, complete Schedule T)
9 Principal od Investmer	ccupation / Job title (See Instructions) nt Advisor	10 Employer (See In Fidelity	structions)	
Date	Full name of contributor  ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/23/201	6800 Burnet Road		\$100.00	] 
	Austin, TX 78757		(If travel outside of	Texas, complete Schedule T)
Principal od None	ccupation / Job title (See Instructions)	Employer (See In	structions)	
None		None		
Date	Full name of contributor  ut-of-state PAC (ID# Delaney, Scott (Bradley)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/201	Contributor address; City; State; Zip Code 15 Eagleview Lane Schwenksville, PA 19473		\$25.00	 
	Scriwerksville, FA 19473		(If travel outside of	Texas, complete Schedule T)
Principal or CEO	ccupation / Job title (See Instructions)	Employer (See In Cadista Pharma	structions)	
Date	Full name of contributor  uut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/201	Contributor address; City; State; Zip Code 5010 North Rim Drive Austin, TX 78731		\$350.00	l
	·		(if travel outside of	Texas, complete Schedule T)
	ccupation / Job title (See Instructions) Citizenship Mgr.	Employer (See In IBM		
Date	Full name of contributor  ut-of-state PAC (ID#	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/04/201	4 Contributor address; City; State; Zip Code 4308 Bellvue Ave. Austin, TX 78756		\$50.00	 
			(If travel outside of	Texas, complete Schedule T)
	cupation / Job title (See Instructions)	Employer (See In	structions)	
Attorney		Texas RioGrand	de Legal Aid	

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	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 12	2/48 Report: 14/55			
2	FILER NAME	Thomas, Robert (Mr.)	. !	3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Edwards, Richard	<i>f</i> )	7 Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/23/2014	6 Contributor address; City; State; Zip Code 5528 Heron Dr Austin, TX 78759	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$125.00	 			
	!		!	(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See Ins Retired	structions)				
	Date	Full name of contributor  uut-of-state PAC (ID# Edwards, Rosemary (Mrs.)	ř)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/23/2014	Contributor address; City; State; Zip Code 6528 Heron Drive Austin, TX 78759	,	\$125.00	 			
	Charles and the		- Cook	_ ·	Texas, complete Schedule T)			
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See Ins Retired	structions)				
_	Date	Full name of contributor  ut-of-state PAC (ID# Elenz, Doug (Dr.)	,	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/24/2014	Contributor address; City; State; Zip Code 1900 Elton Lane Austin, TX 78703		\$199.00	 			
		<u> </u>		1 -	Texas, complete Schedule T)			
_	Principal occup Physician	pation / Job title (See Instructions)	Employer (See Ins Austin Sports M					
	Date	Full name of contributor  ut-of-state PAC (ID# Ely, Sandra	F)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/30/2014	Contributor address; City; State; Zip Code 7608 Valley Dale Dr Austin, TX 78731		\$50.00	 			
_			!	(If travel outside of	Texas, complete Schedule T)			
		pation / Job title (See Instructions) litor, Educational Instructor	Employer (See Ins Self Employed	structions)				
<del>-</del>	Date	Full name of contributor  ut-of-state PAC (ID# Erben, Amy	)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/26/2014	Contributor address; City; State; Zip Code 3310 River Rd. Austin, TX 78703		\$50.00	 			
			1	(If travel outside of	Texas, complete Schedule T)			
	Principal occupa Homemaker	pation / Job title (See Instructions)	Employer (See Ins Homemaker	structions)				

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	The Instruction	ON GUIDE explains how to com	nplete this form.		1 PAGE # Schedule: 13	8/48 Report: 15/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Erben, Randy	ut-of-state PAC (ID#	<i>t</i> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/26/2014	6 Contributor address; 3310 River Rd. Austin, TX 78703	City; State; Zip Code		\$50.00	 
_	!			I	(If travel outside of	Texas, complete Schedule T)
9	Principal occup Lobbyist	pation / Job title (See Instruction	18)	10 Employer (See In: Self Emlployed	structions)	
	Date	Full name of contributor Field, Dianne (Cecile)	□ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; 7201 Spurlock Drive Austin, TX 78731	City; State; Zip Code		\$50.00	 
	-				1 '	Texas, complete Schedule T)
	Principal occup Business Mar	pation / Job title (See Instruction nager	15)	Employer (See In Field Analytics	structions)	
	Date	Full name of contributor Flagg, Adam	out-of-state PAC (ID#	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/28/2014	Contributor address; 2400 Shire Ridge Drive Austin, TX 78732	City; State; Zip Code		\$150.00	] 
	=				<u> </u>	Texas, complete Schedule T)
	Principal occup Financial Adv	pation / Job title (See Instruction /isor	1\$)	Employer (See Ins Upstream Inves		
	Date	Full name of contributor Frankenfeld, Sarah	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/26/2014	Contributor address; 3607 Highland View Drive Austin, TX 78731	City; State; Zip Code		\$50.00	 
		Adduli, 17719757			(If travel outside of	Texas, complete Schedule T)
	Principal occup Self Employed	pation / Job title (See Instructioned	is)	Employer (See Ins Self Employed	structions)	
	Date	Full name of contributor Franklin, Scott	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; 1910 West 35th street Austin, TX 78703	City; State; Zip Code		\$250.00	 
		1			(If travel outside of	Texas, complete Schedule T)
		L pation / Job title (See Instruction	ns)	Employer (See Ins	structions)	
	Orthodontist			Franklin and Co	ollins, LLP	

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	The Instruction	on Guide explains how to compl	lete this form.	-	1 PAGE# Schedule: 14	./48 Report: 16/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor E Frey, Jerry (M)	out-of-state PAC (ID#	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/24/2014	6 Contributor address; Ci 2101 Bindon Drive Cedar Park, TX 78613	ity; State; Zip Code		\$350.00	[   
					(If travel outside of	Texas, complete Schedule T)
9		ation / Job title (See Instructions) Real Estate Professional		10 Employer (See In: CBRE, Inc.	structions)	
	Date	Full name of contributor Frieden, Joanie	out-of-state PAC (ID#	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; Ci 7202 Running Rope Circle Austin, TX 78731	ity; State; Zip Code		\$100.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Owner	ation / Job title (See Instructions)		Employer (See In: Austin Skinny L		
	Date	Full name of contributor Friedman, Jeff	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/16/2014	Contributor address; Ci 6334 Yaupon Drive Austin, TX 78759	ity; State; Zip Code		\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Business Own	ation / Job title (See Instructions) ner		Employer (See In: Capra & Cavelli	,	
	Date	Full name of contributor Frye, David	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/07/2014	Contributor address; Ci 13648 CR 64 Greeley, CO 80631	ity; State; Zip Code	•••••	\$100.00	]   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Senior Consu	ation / Job title (See Instructions)  tant 		Employer (See Ins Kimberly Clark	structions)	
	Date	Full name of contributor E Fulton, Diane (S)	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; Ci 6820 Cypress Point North Austin, TX 78746	ity; State; Zip Code		\$50.00	 
		<u> </u>	<u> </u>		(If travel outside of	Texas, complete Schedule T)
	Principal occup Realtor	ation / Job title (See Instructions)		Employer (See Ins Self Employed	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 15	5/48 Report: 17/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (IDe Galton, Eric	#)	7 Amount of contribution (\$)	8
	06/26/2014	<b>6</b> Contributor address; City; State; Zip Code 8132 Jester Blvd. Austin, TX 78750		\$100.00	[ 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Mediator	ation / Job title (See Instructions)	10 Employer (See In Lakeside Media		_
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 8132 Jester Blvd Austin, TX 78750		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Professor	ation / Job title (See Instructions)	Employer (See In South Texas So		
	Date	Full name of contributor  ut-of-state PAC (ID) Garrison, Nancy	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 517 West 39th Street Austin, TX 78731	••••	\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Investment	ation / Job title (See Instructions)	Employer (See In Scarbrough Ver	,	
	Date	Full name of contributor  ut-of-state PAC (ID: Geller, Robert	<del>*</del>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 3713 Green Trails North Austin, TX 78731		\$50.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Sales Managi	ation / Job title (See Instructions) ment	Employer (See In White Mountain		
	Date	Full name of contributor	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 12345 Alameda Trace Cir. #638 Austin, TX 78727		\$100.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Senior Lectur	ation / Job title (See Instructions) er	Employer (See In University of TX		
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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 16	/48 Report: 18/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID≰ Gonzalez, Rene	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/11/2014	<b>6</b> Contributor address; City; State; Zip Code 15107 Oak Loft San Antonio, TX 78232		\$350.00	 
					Texas, complete Schedule T)
9	Principal occup Attorney	eation / Job title (See Instructions)	10 Employer (See In Exxon Mobil Co		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 4300 Tallowood Drive Austin, TX 78731		\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>
	Attorney		The Law Office	of David Goodma	<b>n</b> 
	Date	Full name of contributor  ut-of-state PAC (ID# Goodman, Patricia	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/18/2014	Contributor address; City; State; Zip Code 4300 Tallowood Drive Austin, TX 78731		\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In The Law Office	structions) of David Goodma	n
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/14/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730		\$350.00	
		·			' -
	Principal occup	ation / Job title (See Instructions)	Employer (See In	,	Texas, complete Schedule T)
_	CEO		Build A Sign		
	Date	Full name of contributor  ut-of-state PAC (ID# Graham, Lisa	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Homemaker	structions)	
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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	7/48 Report: 19/55			
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gramlich, Charles		7 Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/26/2014	6 Contributor address; City; State; Zip Code 8105 Chardonnay Cove Austin, TX 78750		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Requested	pation / Job title (See Instructions)	10 Employer (See In: Requested	structions)				
	Date	Full name of contributor  ut-of-state PAC (ID# Greene, Anji		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/20/2014	Contributor address; City; State; Zip Code 10605 Sans Souci PI Austin, TX 78759		\$100.00	 			
				<u> </u>	Texas, complete Schedule T)			
	Principal occup Security Archi	pation / Job title (See Instructions) itect	Employer (See In: IBM	structions)				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/19/2014	Contributor address; City; State; Zip Code 10605 Sans Souci PI Austin, TX 78759		\$250.00	   			
		1		(If travel outside of	Texas, complete Schedule T)			
_	Principal occup Manager	pation / Job title (See Instructions)	Employer (See In: Homeaway	structions)				
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/29/2014	Contributor address; City; State; Zip Code 7232 Comanche Trail Austin, TX 78732		\$25.00	   			
		_		(If travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In: Self Employed	structions)				
	Date	Full name of contributor  ut-of-state PAC (ID# Greytok, Elizabeth	)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/04/2014	Contributor address; City; State; Zip Code 8510 Emerald Hill Drive Austin, TX 78759		\$350.00	! ! !			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In:	<u> </u>				
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	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 18	/48 Report: 20/55				
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)				
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Greytok, John	<u>†)</u> .	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	06/03/2014	6 Contributor address; City; State; Zip Code 8510 Emerald Hill Drive Austin, TX 78759		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Texas Lobby	structions)					
	Date	Full name of contributor  ut-of-state PAC (ID# Greytok, Marta	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/02/2014	Contributor address; City; State; Zip Code P.O. Box 30401 Austin, TX 78759		\$350.00	 				
	District				Texas, complete Schedule T)				
	Lobbyist	ation / Job title (See Instructions)	Employer (See In: Self Employed	structions)					
	Date	Full name of contributor  ut-of-state PAC (ID# Groos, Ernest (Martin)	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/30/2014	Contributor address; City; State; Zip Code 4209 Cat Hollow Dr. Austin, TX 78731		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Insurance Bro	ation / Job title (See Instructions) oker	Employer (See In EFG&M, LP	structions)					
	Date	Full name of contributor  ut-of-state PAC (ID# Guller, Douglas	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	06/10/2014	Contributor address; City; State; Zip Code 3506 Mount Bonnell Rd Austin, TX 78731		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In: ATX Brands, LL						
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable) Campaign Kick-Off Party				
	05/02/2014	Contributor address; City; State; Zip Code 4006 Rockledge Drive Austin, TX 78731		\$200.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In:						
	Sales		Domain System						

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 19	/48 Report: 21/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor  ut-of-state PAC (ID# Hajdu, Chris	')	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) Campaign Kick-Off Party
	05/02/2014	6 Contributor address; City; State; Zip Code 4006 Rockledge Drive Austin, TX 78731		\$200.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Manager	ation / Job title (See Instructions)	10 Employer (See In SailPoint Techn		
	Date	Full name of contributor  ut-of-state PAC (ID# Hargrave, Tracey	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/14/2014	Contributor address; City; State; Zip Code 9090 E 118th PI S Bixby, OK 74008		\$350.00	 
				I .	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In: Homemaker	structions)	<u>.</u>
	Date	Full name of contributor uut-of-state PAC (ID# Hargrave III, Robert (Ł)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/14/2014	Contributor address; City; State; Zip Code 9090 E 118TH PL S BIXBY, OK 74008		\$350.00	 
	•			(If traval outside of	Toyan complete Schodule T
	Principal occur	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
_	Managing Pa		BAIR		
	Date	Full name of contributor  ut-of-state PAC (ID# Hargrave Jr, Robert Lee		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 5630 E89th PL Tulsa, OK 74137		\$350.00	}   
		·		(If travel outside of	Texas, complete Schedule T)
	Principal occup Pilot	ation / Job title (See Instructions)	Employer (See In FedEx	structions)	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/17/2014	Contributor address; City; State; Zip Code 5630 E89th PL Tulsa, OK 74137		\$350.00	 
				<u> </u>	Texas, complete Schedule T)
	•	ation / Job title (See Instructions)	Employer (See In	structions)	•
	Homemaker		Self Employed		

	The Instruction	ON GUIDE explains how to comple	te this form.		1 PAGE# Schedule: 20	1/48 Report: 22/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor   Harmonson, Peter (C)	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/19/2014	6 Contributor address; City PO Box 30317 Austin, TX 78755	y; State; Zip Code		\$250.00	   
		•			(If travel outside of	Texas, complete Schedule T)
9	Principal occup CEO	ation / Job title (See Instructions)		10 Employer (See In: Far West Capita		·
	Date	Full name of contributor  Harvey, Cherie	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City 7310 Foxtree Cove Austin, TX 78750	y; State; Zip Code		\$50.00	 
		,			(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)		Employer (See In: Homemaker	structions)	
	Date	Full name of contributor  Harvey, Kyle	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City 7310 Foxtree Cove Austin, TX 78750	y; State; Zip Code		\$50.00	   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Director of Qu	ation / Job title (See Instructions) vality		Employer (See Ins Newgistics	structions)	
	Date	Full name of contributor   Hawkins, Albert	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City 7005 Quill Leaf Cove Austin, TX 78750	y; State; Zip Code	••••	\$350.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Policy Consul	ation / Job title (See Instructions) tant		Employer (See Ins Self Employed	structions)	
	Date	Full name of contributor  Hawkins, Jacquelyn	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City 7005 Quill Leaf Cove Austin, TX 78750	y; State; Zip Code		\$350.00	l l
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)		Employer (See Ins		
	None			None		

T	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/48 Report: 23/55		
<b>2</b> F	ILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC (ID Head, Jennifer	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06	6/08/2014	<b>6</b> Contributor address; City; State; Zip Code 8683 Creekstone Place Gainesville, GA 30506-4870	,	\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	rincipal occup roject Mana	ation / Job title (See Instructions) ger	10 Employer (See In Hallmark Cards				
	Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06	6/08/2014	Contributor address; City; State; Zip Code 8683 Creekstone Place Gainesville, GA 30506-4870		\$25.00	 		
	:			<u> </u>	Texas, complete Schedule T)		
	rincipal occup Requested	ation / Job title (See Instructions)	Employer (See In Requested	structions)			
	Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06	6/06/2014	Contributor address; City; State; Zip Code 1812 Bremen Street Austin, TX 78703		\$25.00	 		
				(If traval autoida of	Texas, complete Schedule T)		
	luinainal agaile	otion ( Joh title (Con Instructions)	Topologo (Oct. In	<u> </u>	Texas, complete Schedule 1)		
		eation / Job title (See Instructions) gner & Copy Editor	Employer (See In Self Employed	estructions)			
	Date	Full name of contributor	)*)`	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06	6/10/2014	Contributor address; City; State; Zip Code 100 Congress Ave. # F118 Austin, TX 78701		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	rincipal occup Attorney	ation / Job title (See Instructions)	Employer (See In Hohmann, Taul		<u> </u>		
	Date	Full name of contributor	)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06	6/29/2014	Contributor address; City; State; Zip Code 4002 Sierra Dr Austin, TX 78731		\$250.00	 		
					·		
			<del> </del>		Texas, complete Schedule T)		
	rincipal occup dvertising	eation / Job title (See Instructions)	Employer (See In Holmes Outdoo				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 22	2/48 Report: 24/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Howard, Jeffrey (Steven)	)	7 Amount of contribution (\$)	8		
	06/30/2014	6 Contributor address; City; State; Zip Code 5436 Moon Shadow Austin, TX 78735		\$50.00	 		
			!	(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See Ins McLean & Howa				
	Date	Full name of contributor  ut-of-state PAC (ID# Howard, John		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Code 8601 Emerald Hill Drive		\$250.00	 		
		Austin, TX 78759		l '	Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Ins Dell Inc.	structions)			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/20/2014	Contributor address; City; State; Zip Code 16 Scott Crescent Austin, TX 78703		\$100,00	E .    -		
_			!	(If travel outside of	Texas, complete Schedule T)		
	Principal occup Engineer	pation / Job title (See Instructions)	Employer (See Ins Carngie Design				
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 6109 Lost Horizon Dr. Austin, TX 78759		\$50.00	 		
: I		<b>1</b>	_ !	(If travel outside of	Texas, complete Schedule T)		
	Principal occup Program Man	pation / Job title (See Instructions) nager	Employer (See Ins Dell	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID#)	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/06/2014	Contributor address; City; State; Zip Code 1515 Mohle Drive Austin, TX 78703		\$250.00	1		
			1	l	' -		
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete Schedule T)		
	Title Insurance	· · · · · · · · · · · · · · · · · · ·	Employer (See Ins Prominent Title				

The Instruction Guide exp	lains how to com	plete this form.		1 PAGE # Schedule: 23	/48 Report: 25/55
2 FILER NAME Thomas,	Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date 5 Full nar Jenkins, E		☐ out-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
000.	idge Avenue	City; State; Zip Code		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
9 Principal occupation / Job til Owner	tle (See Instructions	s) ,	10 Employer (See Ins ABC Horne & C	structions) ommercial Servic	es
Date Full nar Jenkins, J		☐ out-of-state PAC (ID#	!	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/16/2014 Contrib 1404 Ethrid Austin, TX	lae	City; State; Zip Code		\$350.00	[ 
Auslin, 1A	78703			(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job ti	tle (See Instructions	s)	Employer (See Ins	structions)	-
Homemaker		•	Homemaker		
D.4. [ 5   1					1.1
Date Full nar Johnston,		☐ out-of-state PAC (ID#	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/09/2014 Contrib 3018 Edge Austin, TX	water Drive	City; State; Zip Code		, \$350.00	   
·				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job til	tle (See Instructions	s)	Employer (See Ins	<u> </u>	Takaba, Takaba ada ada ada ada ada ada ada ada ada
Self Employed			Oxford		
Date Full nar Johnston,		☐ out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
05/09/2014 Contrib 3018 Edge Austin, TX	water Drive	City; State; Zip Code		\$350.00	 
·				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job ti None	tle (See Instructions	s)	Employer (See Ins None	structions)	
Date Full nar Jones, An		☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/20/2014 Contrib 7125 Ridge Austin, TX	Oak Road	City; State; Zip Code		\$50.00	 
				(If frayal autoida -4	Toyac complete Cabadala To
Principal provinction / Joh til	tla (Saa Instruction	p)	Completes /Sec 15		Texas, complete Schedule T)
Principal occupation / Job til Business Development	ue (See instruction: ,	s) i	Employer (See Ins O'Connell Robe		

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE# Schedule: 24	/48 Report: 26/55			
2	FILER NAME	Thomas, Robert (Mr.)	-	3 ACCOUNT # 00067874	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jones, Chris	<del>/</del> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	06/30/2014	6 Contributor address; City; State; Zip Code 9001 Clithea Cove Austin, TX 78759		\$75.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Mgr	ation / Job title (See Instructions)	10 Employer (See In TCS	structions)				
	Date	Full name of contributor  ut-of-state PAC (ID# Joslove, Scott	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/27/2014	Contributor address; City; State; Zip Code 2803 Clearview Drive Austin, TX 78703		\$300.00	l 			
				1	Texas, complete Schedule T)			
	Principal occup President + C	ation / Job title (See Instructions)	Employer (See In Texas Hotel & L	structions) Lodging Associatio	on			
	Date	Full name of contributor  ut-of-state PAC (ID# Kargbo, Edward	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/30/2014	Contributor address; City; State; Zip Code 8426 Antero Austin, TX 78759		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup President	atioп / Job title (See Instructions)	Employer (See In Greater Austin	structions) Transportation Co	mpany			
	Date	Full name of contributor  ut-of-state PAC (ID# Keig, Lowell	)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/10/2014	Contributor address; City; State; Zip Code 5103 Ridgemoor Drive Austin, TX 78731		\$350.00	   			
				(If travel outside of	Texas, complete Schedule T)			
		ation / Job title (See Instructions) Rights Division	Employer (See In Texas Workford					
	Date	Full name of contributor	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	06/07/2014	Contributor address; City; State; Zip Code 6903 Glen Ridge Drive Austin, TX 78731		\$250.00	 			
					<u> </u>			
	6.1			L	Texas, complete Schedule T)			
	Principal occup Manager	ation / Job title (See Instructions)	Employer (See In: AMD	structions)				

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The Instructi	ON GUIDE explains how to complete this form.	*-	1 PAGE # Schedule: 25	/48 Report: 27/55
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kilpatrick, Gaines	<u>'</u> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/08/2014	6 Contributor address; City; State; Zip Code 1802 Eva Street Austin, TX 78704		\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Fuel Sales	pation / Job title (See Instructions)	10 Employer (See In Bison Clean Fu	structions) els	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
06/08/2014	Contributor address; City; State; Zip Code 1802 Eva Street Austin, TX 78704		\$350.00	 
·				Texas, complete Schedule T)
Principal occu Marketing Di	pation / Job title (See Instructions) rector	Employer (See In Kilpatrick Opera		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/12/2014	Contributor address; City; State; Zip Code 40 North IH 35 Austin, TX 78701		\$250.00	 
			<u>'</u>	Texas, complete Schedule T)
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See In UT System	structions)	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/13/2014	Contributor address; City; State; Zip Code 40 North IH 35 Austin, TX 78701		\$250.00	   
			(If travel outside of	Texas, complete Schedule T)
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See In Klein Energy LL		
Date	Full name of contributor  uut-of-state PAC (ID# Kovacs, Jane	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/27/2014	Contributor address; City; State; Zip Code 4003 Greystone Austin, TX 78731		\$50.00	] 
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	1	TOTAL COMPLETE OCHEROIS 1)
Public Relati		3M	,	

The Instructi	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 26	3/48 Report: 28/55		
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kraft, Jill	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06/09/2014	6 Contributor address; City; State; Zip Code 7109 Barefoot Cv austin, TX 78730		\$350.00	 		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal occup Homemaker	pation / Job title (See Instructions)	10 Employer (See In: Homemaker	structions)			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/09/2014	Contributor address; City; State; Zip Code 7109 Barefoot Cv austin, TX 78730		\$350.00	 		
Drive six all again			J '	Texas, complete Schedule T)		
Principal occuj Exec	pation / Job title (See Instructions)	Employer (See In: BuildASign LLC				
Date	Full name of contributor	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/06/2014	Contributor address; City; State; Zip Code 8105 Amelia Cove Austin, TX 78750		\$50.00	 		
I			(If travel outside of	Texas, complete Schedule T)		
	pation / Job title (See Instructions) mpliance Officer	Employer (See In: TX Dept. Family	structions) y and Protective S	ervices		
Date	Full name of contributor	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/16/2014	Contributor address; City; State; Zip Code 6404 Dry Bend Cove Austin, TX 78731		\$350.00	 		
l		_	(If travel outside of	Texas, complete Schedule T)		
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Ins Retired	structions)			
Date	Full name of contributor  ut-of-state PAC (ID# Lampert, Richard	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/16/2014	Contributor address; City; State; Zip Code 6404 Dry Bend Cove Austin, TX 78731		\$350.00	] 		
			/If travel outside of	Texas, complete Schedule T)		
Principal occup Retired	pation / Job title (See Instructions)	Employer (See Ins Retired		Todate, compacts scriedae if		

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The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 27	7/48 Report: 29/55		
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Land, Margaret	<u>;                                    </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06/29/2014	6 Contributor address; City; State; Zip Code 9005 Clithea cv Austin, TX 78759		\$25.00	 		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal occup Director of A	pation / Job title (See Instructions) dministration	10 Employer (See In: Baker Botts	structions)			
Date	Full name of contributor	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/19/2014	Contributor address; City; State; Zip Code 6806 Rockledge Cove Austin, TX 78731		\$350.00	 		
		,		Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In Written	structions)			
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/29/2014	Contributor address; City; State; Zip Code 7809 W Rim Austin, TX 78731		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Managing Di	pation / Job title (See Instructions) rector	Employer (See Instructions) Teacher Retirement System of Texas				
Date	Full name of contributor  ut-of-state PAC (ID# Lardner, Dave	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/24/2014	Contributor address; City; State; Zip Code 1036 Liberty Park Dr. Apt. 13B Austin, TX 78746		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
	pation / Job title (See Instructions) ant Uneven Sidewalk Repair Services	Employer (See In Precision Safe S				
Date	Full name of contributor	+)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/26/2014	Contributor address; City; State; Zip Code 7705 Shadyrock Austin, TX 78731		\$100.00	]   		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup CPA	pation / Job title (See Instructions)	Employer (See In: Self Employed	structions)			

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 28	/48 Report: 30/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Lenihan, Susan	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/29/2014	6 Contributor address; City; State; Zip Code 3915 Rockledge Drive Austin, TX 78731		\$350.00	  -  -
					Texas, complete Schedule T)
9	Principal occup Marketing Co	nation / Job title (See Instructions) nsultant	10 Employer (See In The Lenihan Gr	structions) roup LLC	·
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 6001 Salton Dr Austin, TX 78759		\$100.00	 
				1 '	Texas, complete Schedule T)
		eation / Job title (See Instructions) ner / Technologist	Employer (See In Human Interfac		
	Date	Full name of contributor  ut-of-state PAC (ID# Lindner, Aaron	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; City; State; Zip Code 5821 Kempson Dr. Austin, TX 78735		\$50.00	 
ŀ				/If traval outside of	Texas, complete Schedule T)
┝	Drin singles as a	aking / lab Aikla (One Instructions)	F (0. 1	'	Texas, complete Schedule 1)
	Engineer	eation / Job title (See Instructions)	Employer (See In Samsung	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID# Lindner, Ann	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; City; State; Zip Code 5821 Kempson Dr. Austin, TX 78735	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$50.00	!   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Homemaker		
	Date	Full name of contributor  uut-of-state PAC (ID# Long, Sheldon	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/21/2014	Contributor address; City; State; Zip Code 3714 Stevenson Ave Austin, TX 78703		\$100.00	 
				المراجع	Texas, complete Schedule T)
$\vdash$	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	MD MD	Carrier to the total mondational	ESP (See III	on actions;	

	The Instruction	N GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 29	0/48 Report: 31/55		
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor Maxwell, Peggy	out-of-state PAC (ID#	()	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/01/2014	<b>6</b> Contributor address; 6505 Winterberry Austin, TX 78750	City; State; Zip Code		\$350.00	]   		
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Retired	ation / Job title (See Instruction	ns)	10 Employer (See In Retired	structions)			
	Date	Full name of contributor Maxwell, Terry	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/17/2014	Contributor address; 6505 Winterberry Austin, TX 78750	City; State; Zip Code		\$350.00	 		
					·	Texas, complete Schedule T)		
	Principal occup CPA	ation / Job title (See Instruction	as)	Employer (See In Self Employed	structions)			
	Date	Full name of contributor McElroy, Ryan (Mr.)	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/25/2014	Contributor address; 1121 Choquette Drive Austin, TX 78757	City; State; Zip Code		\$100.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Owner	ation / Job title (See Instruction	is)	Employer (See In Thunderbird Co				
	Date	Full name of contributor McKallip, Murray (Davis)	out-of-state PAC (ID#	<u>'</u> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/28/2014	Contributor address; 6807 Glen Ridge Drive Austin, TX 78731	City; State; Zip Code		\$100.00	 		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Computer Pro	ation / Job title (See Instruction grammer	is)	Employer (See In: Self Employed	structions)	,		
	Date	Full name of contributor McMillan, Tiffany	out-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/22/2014	Contributor address; 106 Harbor Hill Drive Austin, TX 78734	City; State; Zip Code		\$100.00	   		
		<u> </u>			(If travel outside of	Texas, complete Schedule T)		
	Principal occup Homemaker	ation / Job title (See Instruction	is)	Employer (See In: N/A	structions)			

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	The Instruction	ON GUIDE explains how to complete this form.	7	1 PAGE # Schedule: 30	1/48 Report: 32/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	<b>5</b> Full name of contributor  out-of-state PAC (ID Means, Diane	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
(	06/20/2014	6 Contributor address; City; State; Zip Code 6007 Mesa Drive Austin, TX 78731		\$350.00	] 		
		Addair, 17.70701		(If travel outside of	Texas, complete Schedule T)		
			<del></del>	<u> </u>	Texas, complete Schedule 1)		
	Principal occup Teacher	ation / Job title (See Instructions)	10 Employer (See In AISD	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
(	06/20/2014	Contributor address; City; State; Zip Code 6007 Mesa Drive Austin, TX 78731		\$350.00	 		
		Auguit, 1770701		(If travel outside of	Texas, complete Schedule T)		
	Principal occur	ation / Job title (See Instructions)	Employer (See In				
	Owner	ation 7 300 title (386 instructions)	Austin Cab Con				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
(	06/27/2014	Contributor address; City; State; Zip Code 3412 Green Emerald Terrace Austin, TX 78739		\$350.00	[ 		
		Audill, 17/0/33		(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) ic Accountant	Employer (See In R. Mendoza & (				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
,	06/00/0044	Contributor address; City; State; Zip Code		#400.00	<b>.</b> <b>!</b>		
,	06/02/2014	P.O. Box 10343 Austin, TX 78766		\$100.00	] [		
				'	Texas, complete Schedule T)		
	Principal occup Self Employe	ation / Job title (See Instructions) d	Employer (See In Self Employed	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
(	06/18/2014	Contributor address; City; State; Zip Code 6901 Glen Ridge Drive Austin, TX 78731		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Lobbyst	ation / Job title (See Instructions)	Employer (See In Meroney P.R.	structions)			
	<b>,</b>		1				

The Inst	RUCTION GUIDE explains how to complete this form.		1 PAGE#	//48 Report: 33/55
2 FILER N	AME Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor  ut-of-state PAC (ID Meroney, Shannon	#)	7 Amount of contribution (\$)	8   In-kind contribution description (if applicable)
06/18/2	014 6 Contributor address; City; State; Zip Code 6901 Glen Ridge Drive Austin, TX 78731		\$350.00	1 
			(If travel outside of	Texas, complete Schedule T)
	occupation / Job title (See Instructions) ce Professional	10 Employer (See In Aetna	estructions)	
Date	Full name of contributor  ut-of-state PAC (ID Milstead, Mark	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/17/2	O14 Contributor address; City; State; Zip Code 6703 Tree Fern Ln Austin, TX 78750		\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
	occupation / Job title (See Instructions)	Employer (See In		<del></del>
Real Es	tate Broker	NAI Commercia	al 	
Date	Full name of contributor  ut-of-state PAC (ID Milstead, Phyllis	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/17/2	Contributor address; City; State; Zip Code 6703 Tree Fern Ln Austin, TX 78750		\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
	occupation / Job title (See Instructions) tate Lender	Employer (See In Compass Bank	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/20	Contributor address; City; State; Zip Code 1502 Lorrain Austin, TX 78703		\$250.00	    -
	, wasan, maree			·
Dringing	and the Light Hills (Cons.) - should be a	Employer (October	1	Texas, complete Schedule T)
FA —	occupation / Job title (See Instructions)	Employer (See In NM	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/20/20	Contributor address; City; State; Zip Code 2902 Enfield Rd Austin, TX 78703		\$25.00	1   
			(If travel outside of	Texas, complete Schedule T)
	occupation / Job title (See Instructions)	Employer (See In	<u> </u>	
Student		Student		

	The Instruction	DN GUIDE explains how to comp	plete this form.		1 PAGE # Schedule: 32	2/48 Report: 34/55	
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)	
4	Date	5 Full name of contributor Nelson, Marie (Eleanor)	☐ out-of-state PAC (ID#	t)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/21/2014	6 Contributor address; ( 8217 Partridge Bend Cove Austin, TX 78729	City; State; Zip Code		\$350.00	 	
				:	(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Sales	pation / Job title (See Instructions	3)	10 Employer (See In: Xerox	structions)		
	Date	Full name of contributor Nelson, Tony	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/21/2014	Contributor address; ( 8217 Partridge Bend Cove Austin, TX 78729	City; State; Zip Code		\$350.00	l 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	pation / Job title (See Instructions	3)	Employer (See In: Travis County A	structions)		
	Date	Full name of contributor Newman, Holly	☐ out-of-state PAC (ID#	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/29/2014	Contributor address; ( 4208 N Hills Dr Austin, TX 78731	City; State; Zip Code		\$250.00	 	
	Delaciont				<u> </u>	Texas, complete Schedule T)	
	Sales	pation / Job title (See Instructions	;) 	Employer (See In: AT&T	structions)	·	
	Date	Full name of contributor Nims, Adam	Out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/30/2014	Contributor address; C 5101 Cuesta Verde Austin, TX 78746	City; State; Zip Code		\$150.00	 	
	Origoinal agour	ention / Joh title (Con Jackwestians		Employer (Cooks	<u> </u>	Texas, complete Schedule T)	
	Real Estate	pation / Job title (See Instructions	;) 	Employer (See In: CBRE / Tramme	ell Crow Company	/	
	Date	Full name of contributor Norman, Monique	out-of-state PAC (ID#	•	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/12/2014	Contributor address; C 3605 Edgemont Drive Austin, TX 78731	City; State; Zip Code		\$350.00	[   	
					· .	Texas, complete Schedule T)	
	Principal occupa Attorney	eation / Job title (See Instructions	;)	Employer (See Ins Monique Norma	structions) an Attorney at Law	,	

	The Instruction	N GUIDE explains how to complete this form.	•	1 PAGE# Schedule: 33	3/48 Report: 35/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Norman, Scott	!)	7 Amount of contribution (\$)	8
	06/12/2014	6 Contributor address; City; State; Zip Code 3605 Edgemont Drive Austin, TX 78731		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Executive Dir	ation / Job title (See Instructions) ector	10 Employer (See In Texas Homebu	structions) ilders Association	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/08/2014	Contributor address; City; State; Zip Code 4704 Fawn Run	•••••	\$50.00	1 1
		Austin, TX 78735			_
	Deinainal annua	otion / tab Etta (Con Industrial)	F   (0)	<u> </u>	Texas, complete Schedule T)
	Agent	etion / Job title (See Instructions)	Employer (See In Central Insuran		
	Date	Full name of contributor uut-of-state PAC (ID# Onion, David	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 4301 Tallowood Drive Austin, TX 78731		\$125.00	
				<u></u>	' 
	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	Athletics	anon 7 oob tille (See Institutions)	University of Te		
	Date	Full name of contributor  ut-of-state PAC (ID# Onion, Susan	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 4301 Tallowood Drive Austin, TX 78731		\$125.00	 
		Ausuii, 1770731		(If travel outside of	Texas, complete Schedule T)
	Principal occup Event Coordi	nation / Job title (See Instructions) nator	Employer (See In Self Employed		
	Date	Full name of contributor  ut-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/22/2014	Contributor address; City; State; Zip Code 7200 West RIm Dr. Austin, TX 78731		\$150.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Volunteer	ation / Job title (See Instructions)	Employer (See In None	<u> </u>	

			<del> </del>	
The Instruction	ON GUIDE explains how to complete this form.	,	1 PAGE# Schedule: 34	/48 Report: 36/55
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Owens, Jennifer	<b>/</b> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/16/2014	6 Contributor address; City; State; Zip Code 7200 Montana Norte Austin, TX 78731		\$25.00	 
*			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Sales.	pation / Job title (See Instructions)	10 Employer (See In Boundless Netv		
Date	Full name of contributor  ut-of-state PAC (ID: Owens, Wade	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/16/2014	Contributor address; City; State; Zip Code 7200 Montana Norte Austin, TX 78731	.,,	\$25.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup Requested	pation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>
nequested		Requested		
Date	Full name of contributor  ut-of-state PAC (ID: Page, Curtis	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/08/2014	Contributor address; City; State; Zip Code 3008 Scenic Drive Austin, TX 78703		\$250.00	]   
			(If travel outside of	Texas, complete Schedule T)
Principal occup Insurance Bro	pation / Job title (See Instructions) oker	Employer (See In Higginbotham	structions)	
Date	Full name of contributor	<del>*)</del>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/26/2014	Contributor address; City; State; Zip Code 4009 Greenhill PI Austin, TX 78759		\$100.00	<b>i</b>   
i			(If travel outside of	Texas, complete Schedule T)
Principal occup President	oation / Job title (See Instructions)	Employer (See In The Payton Co		<u> </u>
Date	Full name of contributor  ut-of-state PAC (ID#	<del></del>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/19/2014	Contributor address; City; State; Zip Code 4305 Deepwoods Drive Austin, TX 78731		\$350.00	 
	·		(If travel outside of	Texas, complete Schedule T)
Principal occup Self Employe	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)	

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 35	5/48 Report: 37/55
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Petrick, David (W)	f)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
06/19/2014	6 Contributor address; City; State; Zip Code 4305 Deepwoods Drive Austin, TX 78731		\$350.00	 
		!	(If travel outside of	Texas, complete Schedule T)
9 Principal occup Real Estate	pation / Job title (See Instructions)	10 Employer (See In: David Petrick Co		
Date	Full name of contributor  uut-of-state PAC (ID# Petrosewicz, Norma (Mr.)	<u>;                                    </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/07/2014	Contributor address; City; State; Zip Code 1110 Plantation Meadows Drive Richmond, TX 77406		\$350.00	 
Dámainal coour		- (2aa la	l ,	Texas, complete Schedule T)
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Ins Norma Montalvo	structions) o Petrosewicz PC	
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/07/2014	Contributor address; City; State; Zip Code 1110 Plantation Meadows Drive Richmond, TX 77406		\$350.00   	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup CPA	pation / Job title (See Instructions)	Employer (See Ins Petrosewicz & C		
Date	Full name of contributor  ut-of-state PAC (ID# Pierce, Jack (William)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/22/2014	Contributor address; City; State; Zip Code 6811 Glen Ridge Dr. Austin, TX 78731		\$150.00   	] 
			1 .	Texas, complete Schedule T)
Principal occup Physician	pation / Job title (See Instructions)	Employer (See Ins Self Employed	structions)	
Date	Full name of contributor  ut-of-state PAC (ID# Pierce, P.J.	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
06/22/2014	Contributor address; City; State; Zip Code 6811 Glen Ridge Dr. Austin, TX 78731	,	\$350.00	 
			(If travel outside of	Texas, complete Schedule T)
Principal occup Writer	pation / Job title (See Instructions)	Employer (See Ins Self Employed	structions)	

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 36	6/48 Report: 38/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor  ut-of-state PAC Polumbo, Carol	(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/30/2014	6 Contributor address; City; State; Zip Co 7900 Escala Drive Austin, TX 78735	de	\$350.00	  - 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See la McCall, Parkhu	nstructions) urst & Horton LLP			
	Date	Full name of contributor	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Co 11818 Pennsylvania Ave Kansas City, MO 64114-5547	de	\$50.00	 		
			·	(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) s, Channel Development	Employer (See In Avanti Systems				
	Date	Full name of contributor  ut-of-state PAC Ramirez, Brenda	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/18/2014	Contributor address; City; State; Zip Co P.O. Box 102695 Austin, TX 78720	de	\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Teacher	ation / Job title (See Instructions)	Employer (See II AISD	nstructions)			
	Date	Full name of contributor  ut-of-state PAC Rao, Satish (Krishna)	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/22/2014	Contributor address; City; State; Zip Co 3103, Riva Ridge Rd Austin, TX 78746	de	\$150.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Chief Enginee	ation / Job title (See Instructions)	Employer (See In IBM	nstructions)			
	Date	Full name of contributor	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Co 2404 Forest Bend Dr Austin, TX 78704	de	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Husch Blackwe				

The Inst	RUCTION GUIDE explains how to complete this form.		1 PAGE# Schedule: 37	7/48 Report: 39/55		
2 FILER NA	AME Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4 Date	5 Full name of contributor  ut-of-state PAC (ID: Romano, Miguel	<b>#</b> )	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06/15/20	6 Contributor address; City; State; Zip Code 3918 Dry Creek Drive Austin, TX 78731	· · · · · · · · · · · · · · · · · · ·	\$200.00	 		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal Banker	occupation / Job title (See Instructions)	10 Employer (See In American Bank				
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
05/21/20	Contributor address; City; State; Zip Code 300 Bowie St. # 2602 Austin, TX 78703		\$350.00	 		
5			·	Texas, complete Schedule T)		
Self Emp	occupation / Job title (See Instructions) ployed	Employer (See In Self Employed	structions)			
Date	Full name of contributor  ut-of-state PAC (ID: Rousselot, Mark	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/27/20	Contributor address; City; State; Zip Code P.O. Box 413 Sonora, TX 76950	• • • • • • • • • • • • • • • • • • • •	\$100.00	   		
			(If travel outside of	Texas, complete Schedule T)		
Principal Rancher	occupation / Job title (See Instructions)	Employer (See in Self Emiployed	structions)			
Date	Full name of contributor  ut-of-state PAC (IDa Rousselot, Norman	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
05/20/20	Contributor address; City; State; Zip Code 520 E. 2nd St. Sonora, TX 76950	• • • • • • • • • • • • • • • • • • • •	\$200.00	 		
		,	(If travel outside of	Texas, complete Schedule T)		
Principal Rancher	occupation / Job title (See Instructions)	Employer (See In Self Employed	structions)			
Date	Full name of contributor  ut-of-state PAC (ID#Rousselot, Reid (W)	<del>*</del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
05/29/20	Contributor address; City; State; Zip Code 5800 Highland Hills Drive Austin, TX 78731		\$350.00	†   		
			(If travel outside of	Texas, complete Schedule T)		
Principal Investor	occupation / Job title (See Instructions)	Employer (See In: Self Employed	structions)			

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	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 38	/48 Report: 40/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Safady, Randa (S)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/29/2014	6 Contributor address; City; State; Zip Code 3915 Rockledge Drive Austin, TX 78731		\$350.00	I I I
		<u> </u>		(If travel outside of	Texas, complete Schedule T)
9	Principal occup Vice Chancell	oation / Job title (See Instructions) lor	10 Employer (See In: University of Te		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 6701 N. Park Dr. Austin, TX 78757		\$100.00	 
	Principal popus	-ti / (-b title (Coe best estima)			Texas, complete Schedule T)
		pation / Job title (See Instructions) rector, The Seton Fund	Employer (See Ins Seton Healthcar		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/19/2014	Contributor address; City; State; Zip Code 210 Lavaca St. #2803 Austin, TX 78701		\$250.00	]   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Marketing	ation / Job title (See Instructions)	Employer (See Ins Schaaf-Partner(		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/25/2014	Contributor address; City; State; Zip Code 210 Lavaca St. # 2803 Austin, TX 78701		\$100.00	   
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Marketing	eation / Job title (See Instructions)	Employer (See Ins Schaaf-Partner(		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/29/2014	Contributor address; City; State; Zip Code 4201 Greystone Drive Austin, TX 78731		\$50.00	 
		I		(If travel outside of	Texas, complete Schedule T)
		nation / Job title (See Instructions)	Employer (See Ins	structions)	
	Clinical Psych	ologist	CPI		

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	The Instruction	on Guide explains how to complete this form.	÷	1 PAGE # Schedule: 39	/48 Report: 41/55		
2	FILER NAMÉ	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Seibel, Ronald	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	06/23/2014	6 Contributor address; City; State; Zip Code 181 Rock Vista run Austin, TX 78737		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Benefits Exec	ation / Job title (See Instructions) cutive	10 Employer (See In Advanced Bene				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/24/2014	Contributor address; City; State; Zip Code 801 W. 5th St. Austin, TX 78703		\$350.00	 		
		Austin, 12 78703		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Investor		None				
	Date	Full name of contributor  ut-of-state PAC (ID# Sepehri, John	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 5817 Mount Bonnell Road Austin, TX 78731		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
•	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Texas Apartme				
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/20/2014	Contributor address; City; State; Zip Code 5600 Scout Island Circle South Austin, TX 78731		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In: Retired	-	, <u>, , , , , , , , , , , , , , , , , , </u>		
	Date	Full name of contributor  ut-of-state PAC (ID# Shaw, John E.	)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/27/2014	Contributor address; City; State; Zip Code 5245 Biloxi Avenue Toluca Terrace, CA 91601		\$350.00	l I		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Insurance Bro	ation / Job title (See Instructions) oker	Employer (See In: Marsh	structions)			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 40	0/48 Report: 42/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Shaw, Shirin	(	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/27/2014	6 Contributor address; City; State; Zip Code 5245 Biloxi Avenue Toluca Terrace, CA 91601		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Producer	ation / Job title (See Instructions)	10 Employer (See In Persian Cowbo	structions) y Productions, Inc	:.
	Date	Full name of contributor  ut-of-state PAC (ID# Shaw, Shirley	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City; State; Zip Code 6800 Austin Center Blvd. # 1351 Austin, TX 78731		\$350.00	 
				Of trough putnish of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In		rexas, complete Schedule 1)
	Retired		Retired		
	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 4905 Tenison Ct Austin, TX 78731		\$350.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Commercial F	ation / Job title (See Instructions) Real Estate	Employer (See In Congress Holdi	,	
	Date	Full name of contributor  ut-of-state PAC (ID# Shine, Ken		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; City; State; Zip Code 902B West 18th St Austin, TX 78701		\$200.00	] 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consulting	ation / Job title (See Instructions)	Employer (See In UT System	structions)	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; City; State; Zip Code 5705 Wilder Ridge Austin, TX 78759		\$250.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	, ,
		- Clinical Research	INC Research	•	

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	The Instruction	on Guide explains how to com	plete this form.		1 PAGE # Schedule: 41	/48 Report: 43/55
2	FILER NAME	Thomas, Robert (Mr.)			3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Singh, Seetha	☐ out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/24/2014	6 Contributor address; 1004 N Weston Ln Austin, TX 78733	City; State; Zip Code		\$350.00	 
					(if travel outside of	Texas, complete Schedule T)
9	Principal occup Engineer	ation / Job title (See Instruction	s)	10 Employer (See In Austin Bazaar II		
	Date	Full name of contributor Singh, Suman	ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; 1004 N Weston Ln Austin, TX 78733	City; State; Zip Code		\$350.00	 
	Discipal and	china ( Jala Airla (Can Instruction		5	<u> </u>	Texas, complete Schedule T)
	CEO	ation / Job title (See Instruction:	S}	Employer (See In: Austin Bazaar II	,	
	Date	Full name of contributor Skaggs, Jack (E.)	☐ out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; 7700 Stoneywood Dr. Austin, TX 78731	City; State; Zip Code		\$25.00	] [
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions	s)	Employer (See In	structions)	
	Attorney			Jackson Walker, LLP		
	Date	Full name of contributor Smith, Andrew	ut-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/20/2014	Contributor address; 6012 Cervinus Run Austin, TX 78735	City; State; Zip Code		\$150.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	ation / Job title (See Instructions	s)	Employer (See In: Parkway	structions)	
	Date	Full name of contributor Solomon, Robert	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/23/2014	Contributor address; 7802 Deer Ridge Circle Austin, TX 78731	City; State; Zip Code		\$250.00	 
	•				(If traval outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions	s) T	Employer (See In:	<u> </u>	
	Marketing Ex			Bulldog Solution		

The Instruct	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 42	2/48 Report: 44/55		
2 FILER NAME	Thomas, Robert (Mr.)	,	3 ACCOUNT # 00067874	(Ethics Commission filers)		
4 Date	5 Full name of contributor  ut-of-state PAC (ID: Soper, Steven	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
06/23/2014	6 Contributor address; City; State; Zip Code 6002 Westside Drive Austin, TX 78731		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal occi Consulting	upation / Job title (See Instructions)	10 Employer (See In Direct Impact	estructions)			
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/19/2014	Contributor address; City; State; Zip Code 1605 Lakecliff Hills Ln. Austin, TX 78732		\$350.00	1 		
			(If traval outside of	Texas, complete Schedule T)		
Principal occi	upation / Job title (See Instructions)	Employer (See In	1 '	rexas, complete schedule 1)		
Attorney		Jones & Spross	s, PLLC			
Date .	Full name of contributor  ut-of-state PAC (ID# Spurck, Robert	¥)	Amount of contribution (\$)	fn-kind contribution description (if applicable)		
06/20/2014	Contributor address; City; State; Zip Code 4007 Rockledge Dr. Austin, TX 78731		\$100.00	I 		
		•	(If travel outside of	Texas, complete Schedule T)		
Principal occu Attorney	upation / Job title (See Instructions)	Employer (See Instructions) Reed, Claymon, Meeker & Hargett, PLLC				
Date	Full name of contributor  ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/26/2014	Contributor address; City; State; Zip Code 10501 Brannon Cove Austin, TX 78759	•••••••••••••••••••••••••••••••••••••••	\$200.00	l I I		
			(If travel outside of	Texas, complete Schedule T)		
Principal occu Attorney	upation / Job title (See Instructions)	Employer (See In Stahl, Bernal, D				
Date	Full name of contributor  ut-of-state PAC (ID#	<del></del>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/12/2014	Contributor address; City; State; Zip Code 3702 Terrina # I- 9 Austin, TX 78759		\$250.00	   		
			(If travel outside of	Texas, complete Schedule T)		
Principal occu Retired	upation / Job title (See Instructions)	Employer (See In	structions)			
nelired	•	Retired				

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	The Instruction	ON GUIDE explains how to complet	te this form.		1 PAGE # Schedule: 43	/48 Report: 45/55
2	FILER NAME	Thomas, Robert (Mr.)	<del></del>		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor Stahl, Susan	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/26/2014	6 Contributor address; City 10501 Brannon Cove Austin, TX 78731	v; State; Zip Code	•••••	\$200.00	 
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Co-Director	ation / Job title (See Instructions)		10 Employer (See In Power for Parki		
	Date	Full name of contributor  Tanner, Christy	out-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/30/2014	Contributor address; City 8426 Antero Austin, TX 78759	y; State; Zip Code		\$350.00	1 1 1
	,				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)		Employer (See In: Homemaker	structions)	
	Date	Full name of contributor  Taylor, Kathy	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; City 1902 Stamford Lane Austin, TX 78703-2942	r; State; Zip Code		\$350.00	 
		Additi, 17.70700-2042			(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)		Employer (See In: Homemaker	structions)	···
	Date	Full name of contributor  Taylor, Tim	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/27/2014	Contributor address; City 1902 Stamford Lane Austin, TX 78703-2942	; State; Zip Code		\$350.00	[   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)		Employer (See In: Jackson Walker		·
•	Date	Full name of contributor  Thompson, Jodie	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/11/2014	Contributor address; City 6902 Beauford Drive Austin, TX 78750	r; State; Zip Code		\$250.00	] 
					(If traval autoido -4	Texas, complete Schedule T)
	Principal occurs	ation / Job title (See Instructions)	<del></del>	Employer (See In:	•	TEXAS, Complete Schedule 1)
	None	and the transfer of the transf		None None	on aquong <sub>j</sub>	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 44	1/48 Report: 46/55		
2 FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Thompson, Matthew	<del>;</del> )	7 Amount of contribution (\$)	8		
06/19/2014	6 Contributor address; City; State; Zip Code 6804 Glen Ridge Dr Austin, TX 78731		\$200.00	 		
			(If travel outside of	Texas, complete Schedule T)		
9 Principal occup Healthcare M	pation / Job title (See Instructions) lanagement	10 Employer (See In: Medical Manage	estructions) ement Solutions			
Date	Full name of contributor  ut-of-state PAC (ID# Thorne, George	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/20/2014	Contributor address; City; State; Zip Code 300 Bowie #1801 Austin, TX 78703		\$350.00	 		
D-i- single cases			<u> </u>	Texas, complete Schedule T)		
Principal occup Physician	pation / Job title (See Instructions)	Employer (See Ins Eye Physicians				
Date	Full name of contributor  ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/07/2014	Contributor address; City; State; Zip Code 3704 Eastledge Dr. Austin, TX 78731		\$350.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Investments	pation / Job title (See Instructions)	Employer (See Ins Self Employed	structions)			
Date	Full name of contributor  ut-of-state PAC (ID# Turner, Mark	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/28/2014	Contributor address; City; State; Zip Code 2904 Bridle Path Austin, TX 78703		\$100.00	 		
			1	Texas, complete Schedule T)		
Principal occup Entrepreneur	pation / Job title (See Instructions)	Employer (See Ins Bona Dea	structions)			
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
06/24/2014	Contributor address; City; State; Zip Code 309 Hacienda Place Dripping Springs, TX 78620		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Director of All	pation / Job title (See Instructions)	Employer (See Ins Kronos	!			
2		Monos		•		

	The Instruction	ON GUIDE explains how to complete this form.	*	1 PAGE# Schedule: 45	/48 Report: 47/55
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Wallace, Tina	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	06/29/2014	6 Contributor address; City; State; Zip Code 6405 Sumac Drive Austin, TX 78731		\$25.00	] 
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Teacher	eation / Job title (See Instructions)	10 Employer (See In St. Austin Catho		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/26/2014	Contributor address; City; State; Zip Code 6208 Harrogate Drive Austin, TX 78759		\$100.00	 
					Texas, complete Schedule T)
	Principal occup Lawyer	eation / Job title (See Instructions)	Employer (See In State of Texas	structions) · Office of the Atto	rney General
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/23/2014	Contributor address; City; State; Zip Code 5952 Highland Hills Dr Austin, TX 787314052		\$80.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Planner	ation / Job title (See Instructions)	Employer (See In JRW Consulting		
	Date	Full name of contributor  ut-of-state PAC (ID# Welch, Matt	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/24/2014	Contributor address; City; State; Zip Code 4513 Autumnleaf Hollow Austin, TX 78731	•••••	\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
	Date	Full name of contributor  ut-of-state PAC (ID# Wells, Dustin	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	06/23/2014	Contributor address; City; State; Zip Code 6200 Northern Dancer Dr. Austin, TX 78746		\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In	,	renes, complete constants 1/
	CEO		Headspring		

The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 46	/48 Report: 48/55	
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# White, Andrew	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/20/2014	6 Contributor address; City; State; Zip Code P.O. Box 49612 Austin, TX 78765		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See In: Andrew S. White	structions)		
	Date	Full name of contributor  ut-of-state PAC (ID# Whitney, Leon	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/30/2014	Contributor address; City; State; Zip Code 3909 Rockledge Dr. Austin, TX 78731		\$100.00	l   	
				· ·	Texas, complete Schedule T)	
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In: Retired	structions)		
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/21/2014	Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin, TX 78731		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Interior Designer		Employer (See In: Self Employed	structions)		
<u>-</u>	Date	Full name of contributor	÷)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/21/2014	Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin, TX 78731		\$350.00   	   	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins		<u>·</u>	
	Infill Builder		Self Employed			
	Infill Builder  Date	Full name of contributor  ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	Date	Wicheta, Tom  Contributor address; City; State; Zip Code 1703 W. 33rd		contribution (\$)		

The Instruction Guide explains how to complete this form.				1 PAGE#			
	<del></del>				7/48 Report: 49/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Williams, Donnie	<u>+</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/29/2014	6 Contributor address; City; State; Zip Code 4008 Knollwood Drive Austin, TX 78731		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Banker	oation / Job title (See Instructions)	10 Employer (See Ins Sovereign Bank				
	Date	Full name of contributor	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/05/2014	Contributor address; City; State; Zip Code 2801 Scenic Drive Austin, TX 78703		\$350.00	]		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Retired/Civic	vation / Job title (See Instructions) Volunteer	Employer (See In: N/A	structions)			
	Date	Full name of contributor	! . )	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/29/2014	Contributor address; City; State; Zip Code 6617 Valleyside Road Austin, TX 78731		\$100.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occupation / Job title (See Instructions) Title		Employer (See In: Title Company	structions)			
	Date	Full name of contributor  ut-of-state PAC (ID# Winchell, Maria	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/29/2014	Contributor address; City; State; Zip Code 8607 Green Valley Austin, TX 78759-8045		<b>\$25</b> .00	 		
				(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions) Retired		Employer (See Ins Retired	structions)				
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	06/30/2014	Contributor address; City; State; Zip Code 3906 Rockledge Dr Austin, TX 78731		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Principal	ation / Job title (See Instructions)	Employer (See Ins Cresa Partners				

The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 48/48 Report: 50/55		
2	FILER NAME	Thomas, Robert (Mr.)		3 ACCOUNT # 00067874	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Yanke, Dave		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	06/07/2014	6 Contributor address; City; State; Zip Code 7817 Harvestman Cove Austin, TX 78731		\$200.00	       Texas, complete Schedule 1)	
_	Deignal annua	total / I-b till (O Itill-i)		,		
9	Utility Consult	eation / Job title (See Instructions) tant	10 Employer (See Ins NewGen Strate		<u></u>	
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/25/2014	Contributor address; City; State; Zip Code 7913 Davis Mountain Pass Austin, TX 78726		\$50.00	 	
	Principal occup	nation / Job title (See Instructions)	Employer (Soo Inc		Texas, complete Schedule T)	
	CEO		Employer (See Ins			
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/24/2014	Contributor address; City; State; Zip Code 7605 Stoneywood Drive Austin, TX 78731		\$100.00		
	Delegation and an analysis	Total Alle Male 70s a Last Argania		<u> </u>	Texas, complete Schedule T)	
	Attorney	ation / Job title (See Instructions)	Employer (See Ins Winstead PC	structions)		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	06/23/2014	Contributor address; City; State; Zip Code 4104 Tablerock Dr. Austin, TX 78731		\$100.00		
		<u> </u>			Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) Retired			

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage 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

Event Expense Polling Expense Fees Printing Expense 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) Thomas, Robert (Mr.) Schedule: 1/4 Report: 52/55 00067874 4 Date 5 Payee name A Small Orange 05/19/2014 6 Amount (\$) Payee address City; State; Zip Code 720 Brazos St. Ste 120 Austin, TX 78701 \$60.00 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Web Hosting OF **EXPENDITURE** Date Payee name 05/30/2014 American Printing and Mailing Amount (\$) Payee address City; State; Zip Code 1606 Headway Circle \$2,197.14 Austin, TX 78754 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Expense Push Cards for Events OF **EXPENDITURE** Date Payee name Austin Screen Printing 06/30/2014 Amount (\$) Pavee address City; State; Zip Code 4204 Medical Parkway \$631.12 Austin, TX 78756 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Campaign T-Shirts OF **EXPENDITURE** Date Payee name 06/04/2014 Borgelt Law Amount (\$) Payee address City: State; Zip Code 614 S. Capital of Texas Hwy. \$162.50 Austin, TX 78746 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Legal Services Legal Advice OF **EXPENDITURE** 

SCHEDULE G

**EXPENDITURE CATEGORIES** 

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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 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)

Printing Expense The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Thomas, Robert (Mr.) Schedule: 2/4 Report: 53/55 00067874 4 Date 5 Payee name 06/20/2014 Kelly, Thomas (Mr.) 6 Amount (\$) Payee address City; State; Zip Code 1409 Quaker Ridge Drive \$5,933.63 Austin, TX 78746 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Expense Mailer **EXPENDITURE** Date Payee name Longhorn Trophy 05/21/2014 Amount (\$) Payee address City; State; Zip Code 4912 Burnet Road \$59.54 Austin, TX 78756 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Advertising Expense Campaign Name Tags OF **EXPENDITURE** Date Payee name Longhorn Trophy 06/02/2014 Amount (\$) Payee address City; State; Zip Code 4912 Burnet Road \$51.96 Austin, TX 78756 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Name Badges **EXPENDITURE** Date Payee name 06/19/2014 Opinion Analysts, Inc. Amount (\$) Payee address City; State; Zip Code 906 Rio Grande St. \$327.46 Austin, TX 78701 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Advertising Expense OF **EXPENDITURE** 

SCHEDULE G

**EXPENDITURE CATEGORIES** 

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

P.O.Box 12070

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

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) PAGE# FILER NAME Thomas, Robert (Mr.) Schedule: 3/4 Report: 54/55 00067874 5 Payee name 4 Date PayPal 06/30/2014 6 Amount (\$) Payee address City; State; Zip Code 2211 N. 1st St \$13.00 San Jose, CA 95131 Reimbursement from political contributions intended 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fees Fees OF **EXPENDITURE** Date Payee name 06/30/2014 Piryx, Inc. Payee address Amount (\$) City; State; Zip Code 144 2nd Street \$1,587.61 1st Floor Reimbursement from political contributions intended San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fees Fees **QF EXPENDITURE** Payee name Date Ranch Road 05/30/2014 Amount (\$) Pavee address City: State: Zip Code 8906 Wall Steet \$591.05 Suite 507 Reimbursement from political contributions intended Austin, TX 78754 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Advertising Expense Notes, Cards, and Envelopes OF **EXPENDITURE** Date Payee name Ranes, Jim (Mr.) 05/30/2014 Amount (\$) Payee address City; State; Zip Code 1501 Barton Springs Rd., Ste. 233 \$286.60 Austin, TX 78704 Reimbursement from political contributions intended Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Design Work **EXPENDITURE** 

SCHEDULE G

#### **EXPENDITURE CATEGORIES**

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

P.O.Box 12070

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

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME PAGE# 3 ACCOUNT # (TEC filers) Thomas, Robert (Mr.) Schedule: 4/4 Report: 55/55 00067874 Date 5 Payee name Ring Central 05/12/2014 Amount (\$) Payee address City; State; Zip Code 1400 \$299.41 Fashion Island Blvd. 7th Floor Reimbursement from political contributions intended San Mateo, CA 94404 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OTHER - Phones **VOIP System** OF EXPENDITURE Date Payee name Ring Central 06/13/2014 Amount (\$) Pavee address City: State: Zip Code 1400 \$6.01 Fashion Island Blvd. 7th Floor Reimbursement from political contributions intended San Mateo, CA 94404 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** OTHER - Phones VOIP System **EXPENDITURE** Date Pavee name U.S. Postal Service 05/22/2014 Amount (\$) Payee address City; State; Zip Code 3575 Far West Blvd \$49.00 Austin, TX 78731 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OTHER - Postage Stamps **EXPENDITURE** Date Payee name 06/23/2014 U.S. Postal Service Amount (\$) Payee address City; State; Zip Code 3575 Far West Blvd \$56.84 Austin, TX 78731 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** OTHER - Postage Postage **OF EXPENDITURE**