

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084697	2 Total pages filed: 13
3 COMMITTEE NAME TownshipFuture		OFFICE USE ONLY	
		Date Received	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1095 Evergreen Cir. Ste. 200 The Woodlands, TX 77380		
	5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mr. Walter Clay NICKNAME LAST SUFFIX Cooke		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1095 Evergreen Cir. Ste. 200 The Woodlands, TX 77380		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1095 Evergreen Cir. Ste. 200 The Woodlands, TX 77380		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 603-9962		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2020 THROUGH 06/30/2020		
11 ELECTION	ELECTION DATE Month Day Year 11/02/2020	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2


12 COMMITTEE NAME TownshipFuture	13 Filer ID (Ethics Commission Filers) 00084697
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) SEE ATTACHED	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported NONE
		B. Opposed NONE
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported NONE
		B. Opposed NONE
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	NONE

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,782.31
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,941.60
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,840.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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



Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC

17 COMMITTEE NAME TownshipFuture		18 Filer ID (Ethics Commission Filers) 00084697
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,782.31
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,941.60
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/13
2 FILER NAME TownshipFuture		3 Filer ID (Ethics Commission Filers) 00084697
4 Date 04/20/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Kira (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 87 S Beech Springs Circle The Woodlands, TX 77389	7 Amount of Contribution (\$) \$485.20
8 Principal occupation / Job title (See Instructions) Corporate Communication		9 Employer (See Instructions) Oracle Corporation
Date 02/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bredehoft, Arthur (Mr.) <hr/> Contributor address; City; State; Zip Code 10 E Cottage Green St The Woodlands, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Safmarine
Date 05/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bredehoft, Arthur (Mr.) <hr/> Contributor address; City; State; Zip Code 10 E Cottage Green St. The Woodlands, TX 77382	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Safmarine
Date 02/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Walter (Mr.) <hr/> Contributor address; City; State; Zip Code 26 Skyland Place The Woodlands, TX 77381	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Walter Clay Cooke, PC
Date 06/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Walter (Mr.) <hr/> Contributor address; City; State; Zip Code 26 Skyland Place The Woodlands, TX 77381	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Walter Clay Cooke, PC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/13
2 FILER NAME TownshipFuture		3 Filer ID (Ethics Commission Filers) 00084697
4 Date 05/27/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cunningham, Bruce (Mr.) ----- 6 Contributor address; City; State; Zip Code 2 Moonvine Ct The Woodlands, TX 77380	7 Amount of Contribution (\$) \$96.80
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 05/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaynor, Chris (Ms.) ----- Contributor address; City; State; Zip Code 34 Lakeside Cir The Woodlands, TX 77380	Amount of Contribution (\$) \$96.80
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodpastor, Patricia (Ms.) ----- Contributor address; City; State; Zip Code 22307 Rock Oak Pl The Woodlands, TX 77380	Amount of Contribution (\$) \$48.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jeff (Mr.) ----- Contributor address; City; State; Zip Code 44 Falling Star Cr The Woodlands, TX 77381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hathaway, John (Mr.) ----- Contributor address; City; State; Zip Code 6 Roserush Ct. The Woodlands, TX 77380	Amount of Contribution (\$) \$23.97
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/13
2 FILER NAME TownshipFuture		3 Filer ID (Ethics Commission Filers) 00084697
4 Date 05/03/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobsen, Malcolm (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 14 Violetta Ct The Woodlands, TX 77381	7 Amount of Contribution (\$) \$145.35
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Recurve Energy Asset Management, Inc.
Date 06/16/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code 26 Waterford Ct The Woodlands, TX 77381	Amount of Contribution (\$) \$242.45
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerschenbaum, Joel (Dr.) <hr/> Contributor address; City; State; Zip Code 26 Cedarwing Ln The Woodlands, TX 77380	Amount of Contribution (\$) \$23.97
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Woodlands Family & Community Medicine
Date 05/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapp, Stuart (Mr.) <hr/> Contributor address; City; State; Zip Code 10911 Mystic Cove Magnolia, TX 77354	Amount of Contribution (\$) \$96.80
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Stibbs & Co.
Date 04/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lecocq, Amy (Ms.) <hr/> Contributor address; City; State; Zip Code 27 Frontenac Way The Woodlands, TX 77382	Amount of Contribution (\$) \$23.97
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/13
2 FILER NAME TownshipFuture		3 Filer ID (Ethics Commission Filers) 00084697
4 Date 05/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lecocq, Barbara (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code 41 Watermill Court The Woodlands, TX 77380	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 03/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lecoq, Amy (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code 27 Frontenac Way The Woodlands, TX 77382	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/27/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leiber, Deborah (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code 5 Featherfall Place The Woodlands, TX 77381	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Liquid Energy Fuels Corporation
Date 03/04/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leilich, Robert (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code 11 Chestnut Hill Ct The Woodlands, TX 77380	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, John (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code 27 Raintree PI The Woodlands, TX 77381	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/6 Rpt: 8/13
2 FILER NAME TownshipFuture		3 Filer ID (Ethics Commission Filers) 00084697
4 Date 03/04/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisiweski, Walter (Mr.)	7 Amount of Contribution (\$) \$106.18
	6 Contributor address; City; State; Zip Code 33 Rustic View Ct Spring, TX 77381	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 04/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisiweski, Walter (Mr.)	Amount of Contribution (\$) \$242.45
	Contributor address; City; State; Zip Code 33 Rustic View Ct Spring, TX 77381	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthews, Lloyd (Mr.)	Amount of Contribution (\$) \$145.35
	Contributor address; City; State; Zip Code 11 Redhaven Place The Woodlands, TX 77381	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 04/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Carolyn (Ms.)	Amount of Contribution (\$) \$96.80
	Contributor address; City; State; Zip Code 42 North Wyckham Cir The Woodlands, TX 77382	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, Norman (Mr.)	Amount of Contribution (\$) \$145.35
	Contributor address; City; State; Zip Code 26 S Brokenfern Dr The Woodlands, TX 77380	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/6 Rpt: 9/13
2 FILER NAME TownshipFuture		3 Filer ID (Ethics Commission Filers) 00084697
4 Date 05/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Queen, Lucia (Ms.) ----- 6 Contributor address; City; State; Zip Code 16 Thunder Hollow Pl The Woodlands, TX 77381	7 Amount of Contribution (\$) \$48.25
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 06/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagaman, Theresa (Ms.) ----- Contributor address; City; State; Zip Code 97 Speckled Egg Pl The Woodlands, TX 77381	Amount of Contribution (\$) \$145.35
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Theresa Wagaman and Associates - Abby Reality
Date 04/28/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winningkoff, Kenneth (Mr.) ----- Contributor address; City; State; Zip Code 22 Waterford Circle The Woodlands, TX 77381	Amount of Contribution (\$) \$48.25
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 10/13	2 FILER NAME TownshipFuture	3 Filer ID (Ethics Commission Filers) 00084697
4 Date 04/08/2020	5 Payee name Becker, Kira (Ms.)	
6 Amount (\$) \$191.62 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 87 S Beech Springs Cir The Woodlands, TX 77389	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for purchase of management of WordPress websites
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/13/2020	Payee name Becker, Kira (Ms.)	
Amount (\$) \$376.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 87 S Beech Springs Circle The Woodlands, TX 77382	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for payment to GoDaddy.com for managed SSL and website backup
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/28/2020	Payee name Becker, Kira (Ms.)	
Amount (\$) \$286.05 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 87 S Beech Springs Cir The Woodlands, TX 77389	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for purchase from GoDaddy.com of domain registrations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/4 Rpt: 11/13	2 FILER NAME TownshipFuture	3 Filer ID (Ethics Commission Filers) 00084697
4 Date 06/25/2020	5 Payee name Becker, Kira (Ms.)	
6 Amount (\$) \$102.27 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 87 S Beech Springs Circle The Woodlands, TX 77389	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for monthly payment to Constant Contact
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/25/2020	Payee name Becker, Kira (Ms.)	
Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 87 S Beech Springs Circle The Woodlands, TX 77389	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for monthly charge by Hootsuite
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/04/2020	Payee name Harland Clarke	
Amount (\$) \$272.95 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 15955 La Cantera Pkwy San Antonio, TX 78256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Checks
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 12/13	2 FILER NAME TownshipFuture	3 Filer ID (Ethics Commission Filers) 00084697
4 Date 04/20/2020	5 Payee name Kira , Becker (Ms.)	
6 Amount (\$) \$78.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 87 S Beech Springs Cir The Woodlands, TX 77389	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement purchase name badges from Name Badges, Inc, 12240 SW 53rd Street, Cooper City, FL
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2020	Payee name Lecocq, Amy (Ms.)	
Amount (\$) \$550.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 27 Frontenac Way The Woodlands, TX 77382	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement of cost of joining The Woodlands Area Chamber of Commerce
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/31/2020	Payee name Woodforest National Bank	
Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1330 Lake Robbins Drive The Woodlands, TX 77380	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 13/13	2 FILER NAME TownshipFuture	3 Filer ID (Ethics Commission Filers) 00084697
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4 Date 04/30/2020	5 Payee name Woodforest National Bank
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6 Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1330 Lake Robbins Drive The Woodlands, TX 77380
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Charge
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/31/2020	Payee name Woodforest National Bank
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Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1330 Lake Robbins Drive The Woodlands, TX 77380
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service charge
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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