

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <div style="font-size: 2em; text-align: center;">13</div>									
3 COMMITTEE NAME <div style="font-size: 1.5em; font-family: cursive;">Say YES For GFISD Kids</div>		<div style="border: 2px solid blue; padding: 5px; display: inline-block;"> OFFICE USE ONLY RECEIVED APR 10 2014 11:40 Am. By OB </div>										
4 COMMITTEE ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: APT / SUITE # CITY: STATE: ZIP CODE <div style="font-size: 1.2em; font-family: cursive;">12218 Jones Rd Ste D#134 Houston, TX. 77070</div>											
5 CAMPAIGN TREASURER NAME <input type="checkbox"/> change of address	MS / MRS / MR FIRST MI NICKNAME LAST SUFFIX <div style="font-size: 1.2em; font-family: cursive; text-align: center;">Becky J. Knight</div>											
6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE # CITY: STATE: ZIP CODE <div style="font-size: 1.2em; font-family: cursive;">12402 Hideaway Park Drive Cypress, Texas 77429</div>											
7 CAMPAIGN TREASURER'S MAILING ADDRESS <input type="checkbox"/> change of address	STREET OR PO BOX: APT / SUITE # CITY: STATE: ZIP CODE <div style="font-size: 1.2em; font-family: cursive; text-align: center;">Same as above</div>											
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="font-size: 1.2em; font-family: cursive;">(281) 433-8221</div>											
9 REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Dissolution (attach PAC-DR)</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 10th day after campaign treasurer termination</td> </tr> </table>			<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Dissolution (attach PAC-DR)		<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination
<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Exceeded \$500 limit										
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Dissolution (attach PAC-DR)										
	<input type="checkbox"/> Runoff	<input type="checkbox"/> 10th day after campaign treasurer termination										
10 PERIOD COVERED	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">Month Day Year</td> <td style="text-align: center;">THROUGH</td> <td style="text-align: center;">Month Day Year</td> </tr> <tr> <td style="font-size: 1.2em; font-family: cursive; text-align: center;">03 / 03 / 2014</td> <td></td> <td style="font-size: 1.2em; font-family: cursive; text-align: center;">03 / 31 / 2014</td> </tr> </table>			Month Day Year	THROUGH	Month Day Year	03 / 03 / 2014		03 / 31 / 2014			
Month Day Year	THROUGH	Month Day Year										
03 / 03 / 2014		03 / 31 / 2014										
11 ELECTION	<table style="width:100%; border: none;"> <tr> <td style="text-align: center;">ELECTION DATE Month Day Year</td> <td colspan="2" style="text-align: center;">ELECTION TYPE</td> <td style="text-align: center;">?</td> </tr> <tr> <td style="font-size: 1.2em; font-family: cursive; text-align: center;">05 / 10 / 2014</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input checked="" type="checkbox"/> General <input type="checkbox"/> Special</td> </tr> </table>			ELECTION DATE Month Day Year	ELECTION TYPE		?	05 / 10 / 2014	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
ELECTION DATE Month Day Year	ELECTION TYPE		?									
05 / 10 / 2014	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input checked="" type="checkbox"/> General <input type="checkbox"/> Special									

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
1 of 10

2 FILER NAME

Say YES For CFISD Kids

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/6/2014

5 Full name of contributor out-of-state PAC (ID#: _____)

Darcy Mingoia

6 Contributor address; City; State; Zip Code

6610 Barrington Gdn
Houston, TX. 77069-1131

7 Amount of contribution (\$)
\$1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Executive Director

10 Employer (See Instructions)

Lone Star College / Foundation

Date

3/7/14

Full name of contributor out-of-state PAC (ID#: _____)

Godfrey Hubert

Contributor address; City; State; Zip Code

12231 Cypresswood Dr.
Houston, TX. 77070-2733

Amount of contribution (\$)
\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/14

Full name of contributor out-of-state PAC (ID#: _____)

Bill St. Clair

Contributor address; City; State; Zip Code

13407 Oak Alley Lane
Cypress, TX. 77429

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/14/14

Full name of contributor out-of-state PAC (ID#: _____)

Jane Humphreys

Contributor address; City; State; Zip Code

6923 Walton Heath Dr.
Houston, TX. 77069

Amount of contribution (\$)
\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/17/14

Full name of contributor out-of-state PAC (ID#: _____)

Mary Kay Milks

Contributor address; City; State; Zip Code

16205 Acapulco
Houston, TX. 77040

Amount of contribution (\$)
\$475.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
2 of 10

2 FILER NAME

Say YES For CFISD Kids

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/17/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Matt Milks

7 Amount of contribution (\$)
\$475.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
13903 Blanco Falls Ln.
Cypress, Tx. 77429

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/17/14

Full name of contributor out-of-state PAC (ID#: _____)

PBK, Inc.

Amount of contribution (\$)

\$10,000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
11 Greenway Plaza, 22nd Floor
Houston, Tx. 77046-1140

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Architectural FIRM

Employer (See Instructions)

Date

3/17/14

Full name of contributor out-of-state PAC (ID#: _____)

Robert Adam

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
13218 Pine Drive
Cypress, Tx 77429

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Adam + Bing PC

Date

3/17/14

Full name of contributor out-of-state PAC (ID#: _____)

Milford Milks

Amount of contribution (\$)

\$475.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
8525 Westland West Blvd.
Houston, Tx. 77041

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/17/14

Full name of contributor out-of-state PAC (ID#: _____)

Campus Impressions L.P.

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
2930 Chimney Rock
Houston, Tx. 77056

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Bal four Yearbooks

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3 of 10	
2 FILER NAME Say YES For CFIST Kids		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/17/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassandra Milks	7 Amount of contribution (\$) \$ 475.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 13903 Blanco Falls Lane Cypress, TX. 77429		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/17/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard Brautigam	Amount of contribution (\$) \$ 200.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12718 Chriswood Dr. Cypress, TX. 77429		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Brandman	Amount of contribution (\$) \$ 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7907 Ivy Trl. Ct. Houston, TX. 77095		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair + Sampson, LLP	Amount of contribution (\$) \$ 10,000.	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 17428 Austin, TX. 78760		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Law Firm		Employer (See Instructions)	
Date 3/24/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell + Giuliani Committee	Amount of contribution (\$) \$ 1000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 711 Louisiana Street Suite 2300 Houston, Tx. 77002-2770		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Law Firm		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

4 of 10

2 FILER NAME

Say YES For CFISD Kids

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/24/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Becky Knight

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
12402 Hideaway Park Dr.
Cypress, TX. 77429

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/24/14

Full name of contributor out-of-state PAC (ID#: _____)

Larry Martin

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
12922 Lynn Haven St.
Cypress, TX. 77429

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/27/14

Full name of contributor out-of-state PAC (ID#: _____)

Fox Appraisal Co.

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
17385 Village Green Dr, Suite B
Houston, Tx. 77040

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/27/14

Full name of contributor out-of-state PAC (ID#: _____)

Peter Postma

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
14206 Marin Drive
Cypress, TX. 77429-4961

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/27/14

Full name of contributor out-of-state PAC (ID#: _____)

Marilyn Ruzicka

Amount of contribution (\$)

\$1000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
14114 Cellini Dr.
Cypress, TX. 77429

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

5 of 10

2 FILER NAME

Say YES For CFISD Kids

3 ACCOUNT # (Ethics Commission Filers)

4 Date

3/27/14

5 Full name of contributor out-of-state PAC (ID# _____)

Cheryl Salyards

7 Amount of contribution (\$)

\$ 300.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

13530 Via Chianti Lane
Cypress, Tx. 77429

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

3/27/14

Full name of contributor out-of-state PAC (ID# _____)

Thompson + Horton LLP

Amount of contribution (\$)

\$ 2500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3200 Southwest Fwy. Ste. 2000
Houston, TX. 77027

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Law Firm

Employer (See Instructions)

Date

3/27/14

Full name of contributor out-of-state PAC (ID# _____)

Upchurch Kimbrough, LTD.

Amount of contribution (\$)

\$ 2000.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
7401 Westview Drive
Houston, TX. 77055

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Arch. Bldg. Products

Employer (See Instructions)

Date

3/28/14

Full name of contributor out-of-state PAC (ID# _____)

Debra Blackshear

Amount of contribution (\$)

\$ 500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
17415 Swansbury
Cypress, Tx. 77429

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/28/14

Full name of contributor out-of-state PAC (ID# _____)

Randall Curry

Amount of contribution (\$)

\$ 495.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3422 Mimosa Way
Sugar Land, Tx. 77479-2706

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 6 of 10	
2 FILER NAME: Say YES For CFISD Kids		3 ACCOUNT # (Ethics Commission Filers)	
4 Date: 3/28/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): Mark French	7 Amount of contribution (\$): \$ 490.00	8 In-kind contribution description (if applicable):
6 Contributor address; City; State; Zip Code: 3881 Summer Manor Dr. League City, TX. 77573		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions):		10 Employer (See Instructions):	
Date: 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): Britt Gardner	Amount of contribution (\$): \$ 250.00	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 11755 Cawdor Way Houston, TX. 77024-2618		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
Date: 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): Green River Oil, Inc.	Amount of contribution (\$): \$ 2500.00	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 7710-T Cherry Park, Suite 502 Houston, TX. 77095-2725		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions): Dev + Production		Employer (See Instructions):	
Date: 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): Blair Hamilton	Amount of contribution (\$): \$ 475.00	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 3410 Chambers Court Missouri City, TX. 77459		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	
Date: 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#): Shelly Hancock	Amount of contribution (\$): \$ 150.00	In-kind contribution description (if applicable):
Contributor address; City; State; Zip Code: 13106 Lynn Haven Cypress, TX. 77429-4028		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions):		Employer (See Instructions):	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 7 of 10	
2 FILER NAME Say YES For CFISD Kids		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/28/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Houston Computer Center, Inc.	7 Amount of contribution (\$) 2500.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 10402 Harwin Drive Houston, TX. 77036		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See instructions) Computer Co.		10 Employer (See instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas Jackson	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 7811 Spruce Cove Dr. Houston, Tx. 77095-1613		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions) President		Employer (See instructions) Green River Oil	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brian Jenkins	Amount of contribution (\$) \$495.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2122 Royal Adelaide Dr. Katy, Texas 77450-8564		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hunter Kornegay	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4323 St. Michaels Ct. Sugarland, Tx. 77479		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 3/26/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Northwest Chrysler, Jeep, Dodge, Ram	Amount of contribution (\$) \$5000.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 19616 NW Freeway Houston, Tx. 77065		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See instructions) Auto Dealership		Employer (See instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 8 of 10	
2 FILER NAME Say YES For CFISD Kids		3 ACCOUNT # (Ethics Commission Filer)	
4 Date 3/28/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calvin Powitzky	7 Amount of contribution (\$) \$475.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 707 Hidden Woods Lane Friendswood, TX. 77546		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Pruitt	Amount of contribution (\$) \$495.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 16219 Pine Thorn Dr. Houston, Tx. 77095		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raba Kistner	Amount of contribution (\$) \$1500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12821 West Golden Lane San Antonio, Tx. 78249		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patrick Zadow	Amount of contribution (\$) \$475.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4943 Carrington Ct. Pearland, Tx. 77584		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlo Sechi	Amount of contribution (\$) \$495.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 19310 Foxtree Ln Houston, Tx. 77094		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages, Schedule A: 9 of 10	
2 FILER NAME Say YES For CFIST Kids		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/28/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alice Wimberly	7 Amount of contribution (\$) \$ 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 12411 Muller Sky Ct. Tomball, Tx. 77377		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peter Barnhart	Amount of contribution (\$) \$ 1500.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 14002 Blanco Falls Lane Cypress, Tx. 77429		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Exec. V.P. + Partner		Employer (See Instructions) Caldwell Companies	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph Beatty	Amount of contribution (\$) \$ 700.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 14222 Saddleband Houston, Tx. 77070		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) 3KCTPD-CHR	
Date 3/28/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cindy O'Brien	Amount of contribution (\$) \$ 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12123 Knobcrest Dr. Houston, Tx. 77070-2435		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 3/31/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Goodson	Amount of contribution (\$) \$ 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 18106 Darling Point Ct. Cypress, Tx. 77429		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 10 of 10	
2 FILER NAME Say YES For CFISD Kids		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/31/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Manning Family Trust	7 Amount of contribution (\$) \$ 200.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 58 Wincrest Falls Dr. Cypress, Tx. 77429		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 1	2 FILER NAME Say YES For CFISD Kids	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3/25/14	5 Payee name Airbrush Images, Inc.
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6 Amount (\$) \$4514.03	7 Payee address; City; State; Zip Code 850 N. FM 3083 Conroe, Texas 77303
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Signs - Yard + Road
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/26/2014	Payee name Southwest Precision Printers, L.P.
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Amount (\$) \$1136.63	Payee address; City; State; Zip Code 1055 Conrad Sauer Houston, Texas 77043
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Brochures & Push Cards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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