

Official Public Records of Harris County
Diane Trautman
County Clerk

Campaign Finance Report



IVI

COUNTY CLERK

FileNo:

2019298

**Received By Clerk:** 

7/18/2019

File Date:

July 15, 2019

Office:

Commissioner Pct. 3

Candidate:

Radack, Steve

Treasurer:

Not Available

Category:

**Contributions And Expenditures** 

Delivered By:

U.S. Mail

Type:

COR

**Harris County No Fee** 

#### FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST М **OFFICE USE ONLY OFFICEHOLDER** Steve NAME Date Received SUFFIX **NICKNAME** LAST Radack Date Hand-delivered or Date Postmarked ZIP CODE CANDIDATE / ADDRESS / PO BOX: APT / SUITE #: CITY: **OFFICEHOLDER** P. O. Box 841486 MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77084 Date Processed Date Imaged CAMPAIGN MS/MRS/MR **FIRST** MI **TREASURER** NAME **NICKNAME** LAST SUFFIX STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; **CAMPAIGN** CITY; STATE; ZIP CODE **TREASURER ADDRESS** (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER EXTENSION **TREASURER PHONE** REPORT TYPE Runoff 30th day before election 15th day after campaign treasurer January 15 appointment (officeholder only) Exceeded \$500 limit Final Report (Attach C/OH-FR) July 15 8th day before election **PERIOD** Day Month Day Year Year COVERED 01/01/2019 **THROUGH** 06/30/2019 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year **Primary** Runoff Other General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Commissioner, Precinct 3 Harris **GO TO PAGE 2**

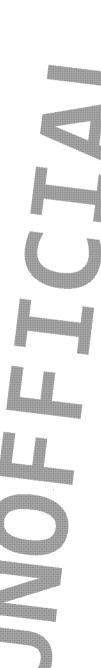
## **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

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

					2 of 49
13 C / OH NAME	Radack, Steve		14 Filer ID	7	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditur These expenditures may have been made without th d officeholders are required to report this information	he candidate's	or officeholder's	s knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
_	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC			• ,	
		COMMITTEE CAMPAIGN TREASURER NAME	***************************************	•	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	is		
16 CONTRIBUTION TOTALS	LOANS, OR GUA	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER TI ARANTEES OF LOANS), UNLESS ITEMIZED	HAN PLEDGE	<b>\$</b>	0.00
	(OTHER THAN F	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<u>.                                    </u>	\$	5,000.00
EXPENDITURE TOTALS		CAL EXPENDITURES OF \$100 OR LESS, UNLESS I	ITEMIZED	\$	3,541.68
		CAL EXPENDITURES	-	\$	96,250.78
CONTRIBUTION BALANCE	REPORTING PE			\$	1,634,106.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS C RTING PERIOD	OF THE LAST	S S	0.00
AFFIX NO	LYNN D BLUE 6815093  TARY PUBLIC, STATE OF TE MY COMMISSION EXPIRES OCTOBER 20, 202  CTARY STAMP / SEAL ABout the search of the	Signature of C		equired to be re	
Signature of office	cer administering	Printed name of officer administering	7 V U I	of officer admin	istering oath

## FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 49 **18 FILER NAME** 19 Filer ID Radack, Steve 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 5.000.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 46,438.27 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 50,012.51 SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ TO FILER

	MONET	Ά	RY POLITICAL CONTRIBUTIONS		SCHEDULE A1
	The Instru	cti	on Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/49
2	FILER NAME Radack, Ste	ve		3	Filer ID
4	Date 02/25/2019	5	Full name of contributor  uut-of-state PAC (ID#:)  Trepac/Texas Asso. of Realtors PAC	7	Amount of Contribution (\$) \$5,000.00
		6	Contributor address; City; State; Zip Code		
			P. O. Box 2246		
			Austin, TX 78768		
8	Principal occu	pai	ion / Job title (See Instructions)  9 Employer (See Instructions)	s)	



#### SCHEDULE F1

Advertising Expense	Event Expense	Lo
Accounting/Banking	Fees	0
Consulting Expense	Food/Beverage Expense	₿ P(
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Pı

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

oan Repayment/Reimbursement iffice Overhead/Rental Expense olling Expense rinting Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form,	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	
	Sch: 1/17 Rpt: 5/49	Radack, Steve	
4	Date	5 Payee name	
L	02/15/2019	Albritton, Terry	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$987.00	22035 Rivermead	
1			
1		Katy, TX 77449	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
l		Check if Austin, TX, officeholder living expense  Labor	
		Labor	
۴	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ľ	expenditure to benefit C/O		
⊨	Doto		_
	Date 04/02/2019	Payee name  Beck, Kirby	
L			
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$318.13	9538 Hanging Moss Trail	
L		Houston, TX 77064	
1	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
ŀ		Reimb. for Hockley Soap Box Derby supplies from	
İ		HEB - 243.47 and Sams Club 74.66	
⊦	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
F	Date	Payee name	_
	01/19/2019	Blue, Lynn	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$175.07	1034 Orchard Hill	
	<b>Q1</b> 10.01	2334 STORING THE	
ł		Houston, TX 77077	
-	BUDDOCE		
İ	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)    Description   Check if travel outside of Texas, Complete Schedule T.	
l	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
ł		Reimb. for employee retirement party at Los Cuco	s
I			
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
ı	expenditure to benefit C/O		

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Exp Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/17 Rpt: 6/49	Radack, Steve
4	Date	5 Payee name
L	03/14/2019	Blue, Lynn
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$65.00	1034 Orchard Hill
		Houston, TX 77077
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPERDITORE	Check if Austin, TX, officeholder living expense
l		Reimb. for postage stamps
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	02/04/2019	Chavez, Claudio
Γ	Amount (\$)	Payee address; City; State; Zip Code
	\$1,475.00	3807 Bear Creek Meadows
		Houston, TX 77043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor
ļ	EM EMBITORE	Check if Austin, TX, officeholder living expense
		Labor
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ĺ	expenditure to benefit C/O	H .
F	Date	Payee name
	01/31/2019	Comerica Bank
L		
	Amount (\$)	Payee address; City; State; Zip Code
l	\$27.42	P. O. Box 650282
İ		Dallas, TX 75265
Γ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
ł		Service charges
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
T		
l		

#### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	Committee Lega	Services Instruction Guide	Salaries/\	<b>Vages</b>	s/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID
L	Sch: 3/17 Rpt: 7/49	Radack, Steve				
4	Date	5 Payee name				
L	02/28/2019	Comerica Bank				
6	Amount (\$)	7 Payee address;	City;	State; Zip Co	de	
	\$28.24	P. O. Box 6502	82			
		- II				
L		Dallas, TX 752	)5			
8	PURPOSE	(a) Category (See Ca	tegories listed at the top	of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Bar	ıking			Check if travel outside of Texas. Complete Schedule T.
						Check if Austin, TX, officeholder living expense
l						Service charges
L			· · · · · · · · · · · · · · · · · · ·		<u> </u>	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeho	older name	Office sou	ıght	Office held
L	experientare to benefit oron					
	Date	Payee name				
l	03/31/2019	Comerica Bank				
┢	Amount (\$)	Payee address;	City;	State; Zip Co	ode	***************************************
	\$36.67	P. O. Box 6502	82			
	• • • • • • • • • • • • • • • • • • • •					
		Dallac TV 752	ec /////	***************************************		
L		Dallas, TX 752				
	PURPOSE OF	(a) Category (See Ca	***************************************	of this schedule)	(b)	Description
	EXPENDITURE	Accounting/Bar	nking			Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
ŀ						Service charges
┝	Complete ONLY if direct	Candidate/Officeh	older name	Office sou	l abt	Office held
Į	expenditure to benefit C/O		Diuei name	Office Soc	Jynt	Office field
L						
	Date	Payee name				
L	04/30/2019	Comerica Bank				
	Amount (\$)	Payee address;	City;	State; Zip Co	ode	
1	\$71.98	P. O. Box 6502	82			
l						
		Dallas, TX 752	65			
┝	PURPOSE				(b)	Description
Î	OF	(a) Category (See Ca Accounting/Bar	600000	of this schedule)	"	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Accounting/Dai	IKIIII		Į.	Check if Austin, TX, officeholder living expense
						Service charges
T	Complete ONLY if direct	Candidate/Officeh	older name	Office sou	ıght	Office held
1	expenditure to benefit C/O				-	
$\vdash$						

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorial Legal Services The Instruction G	·		ages/	Contract Labor	Travel Out of Dist OTHER (enter a		sted above)	
1	Total pages Schedule F1:	2 FILER	NAME	<del></del>			3	Filer ID			
	Sch: 4/17 Rpt: 8/49	Radad	ck, Steve								
4	Date	5 Payee	name								
	05/31/2019	Come	rica Bank					_			
6	Amount (\$)	7 Payee	address; City;	State	; Zip Cod	de		·			·
	\$32.84	P. O.	Box 650282								
		Dallas	s, TX 75265								
8	PURPOSE	(a) Catego	Dry (See Categories listed at	the top of this sch	redule)	(b)	Description				
	OF EXPENDITURE	Accou	ınting/Banking				Check if travel outside			: T.	
						į	Check if Austin, TX, Service charges	officeholder living	expense		
		į					Service charges				
Ļ	Complete ONLY if direct	Candida	te/Officeholder name		Office soug			Office he	la		
Ľ	expenditure to benefit C/O		te/Officerroller flame	,	Onice sout	Jiir		Office fie	iu		
Γ	Date	Payee	name								
	06/30/2019	Come	rica Bank								
	Amount (\$)	Payee	address; City;	State	; Zip Cod	de					
	\$30.17	P. O.	Box 650282								
		Dallas	s, TX 75265								
H	PURPOSE	<del></del>			1	/b)	Description	<del>-</del>	<del></del>		
	OF		OTY (See Categories listed at Inting/Banking	the top of this sch	redule)	(U) 	Description  Check if travel outside	de of Texas, Comp	lete Schedule	• Т.	
	EXPENDITURE	٨	intergreationing		l		Check if Austin, ⊤X,				
					i		Service charges				
Г	Complete ONLY if direct		ate/Officeholder name	(	Office sou	ght		Office he	ld		
L	expenditure to benefit C/O	Н						_			
	Date	Payee	name	· . • · · · · · · · · · · · · · · · · ·							
l	04/08/2019	Cy-Fa	ir Helping Hands								
Г	Amount (\$)	Payee	address; City;	State	; Zip Co	de					
	\$10,000.00	7520	Cherry Park Dr., Suit	e B							
		Houst	on, TX 77095								
Г	PURPOSE	(a) Catego	Ory (See Categories listed at	the top of this sch	nedule)	(b)	Description				
1	OF EXPENDITURE	Contri	butions/Donations M	ade By	1		Check if travel outside			: Т.	
l		Candi	date/Officeholder/Po	litical Comn	nittee		Check if Austin, "X,	officeholder living	expense		
					l		Donation				
$\vdash$	Complete ONLY if direct	Candida	ate/Officeholder name		Office co	mb+		O#== !	14	<del></del>	
	expenditure to benefit C/O		kerOmcenoider name	•	Office sou	ynt		Office he	iu		
<u> </u>											
								/			

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1? Sch: 5/17 Rpt: 9/49	Radack, Steve
4	Date 03/19/2019	5 Payee name Cypress Ranch TSA
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 10700 Fry Road  Cypress, TX 77433
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Descriptior:  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/25/2019	Payee name Dominican Mission in Kenya
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code  141 E. 65th  New York, NY
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense  Donation
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 04/01/2019	Payee name Dorman, Steve
	Amount (\$) \$1,200.00	Payee address; City; State; Zip Code 10023 Inwood  Houston, TX 77042
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description:  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder fiving expense  Labor
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		·

## SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Constituted Expense  Contributions/ Donations Made By  Candidate/Officeholder/Politica		Gift/Awards/Memorials Exp Legal Services	ense Printing	Expensi Expens s/Wages		T	ravel in District fravel Out of District DTHER (enter a category not listed :	above)
İ	Credit Card Payment		The Instruction Guide	explains how to	comple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAM	ME .				3 F	iler ID	
	Sch: 6/17 Rpt: 10/49	Radack, S	Steve			_			
4	Date	5 Payee nam	e						4
	05/31/2019	Dorman, S	Steve						
6	Amount (\$)	7 Payee add	ress; City;	State; Zip (	Code			4	
	\$850.00	10023 Inv	/ood						
							i		
		Houston,	TX 77042			,			
8	PURPOSE OF	(a) Category	(See Categories listed at the to	p of this schedule)	(b)	Description			
	EXPENDITURE	Salaries/V	Vages/Contract Labo	r				of Texas. Complete Schedule T. ficeholder living expense	
					1	Labor	,,	nocholder living expense	
9	Complete ONLY if direct		fficeholder name	Office s	ought		······································	Office held	<del>-</del>
1	expenditure to benefit C/OI	H							
	Date	Payee nam	e						
	04/25/2019	East Fort	Bend Co. Optimist C	lub					
	Amount (\$)	Payee add	ress; City;	State; Zip	Code				
	\$375.00	P. O. Box	17328			*			
ı				$\mathcal{A}^{\mathcal{A}}$					
ĺ		Sugar , T	K 77496						_
Г	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedule)	(b)	Description			
ļ	OF EXPENDITURE		ons/Donations Made			land.		of Texas. Complete Schedule T. fficeholder living expense	
Į		Carioloate	e/Officeholder/Politica	ai Committee		Donation	,,	meerioleer aving expense	
			>			•			
┢	Complete ONLY if direct		fficeholder name	Office s	ought			Office held .	······································
	expenditure to benefit C/O	H							
F	Date	Payee nam	ne						
	04/04/2019	FUMC St	uart Moore						
	Amount (\$)	Payee add	ress; City;	State; Zip	Code				<u> </u>
	\$2,000.00	411 W. Bı	oadway						
ł		Houston,	TX 10012						
Г	PURPOSE	(a) Category	(See Categories listed at the to	p of this schedule)	(b)	Description			······
	OF EXPENDITURE	Contributi	ons/Donations Made	Ву		느		of Texas. Complete Schedule T.	
ļ		Candidate	e/Officeholder/Politica	al Committee		Donation	ın, TX, o	fficeholder living expense	
						Donation			
$\vdash$	Complete ONLY if direct	Candidate/C	officeholder name	Office s	ought		<u></u>	Office held	
	expenditure to benefit C/O			±11100 5	~~5'''	*			
$\vdash$				<del></del>					
ĺ									

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	tommittee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 7/17 Rpt: 11/49	FILER NAME  Radack, Steve  3 Filer ID	
4	Date 03/19/2019	Payee name GSSJC	
6	Amount (\$) \$600.00	Payee address; City; State; Zip Code 3110 Southwest Freeway  Houston, TX 77098	
8	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 01/18/2019	Payee name Gee Family Asso. Education Fund	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 818 Town & Country Blvd. #106 Houston, TX 77024	
	PURPOSE OF EXPENDITURE	A) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if Vavel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation	
	Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 05/21/2019	Payee name Greg Travis Campaign	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 800 Wilcrest #350 Houston, TX 77042	
	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Donation	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
		•	

#### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 8/17 Rpt: 12/49	Radack, Steve
4	Date	5 Payee name
	03/19/2019	Harris County .
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1001 Preston
l		+C*
[		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if trave' outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Reimbursement
		Tremburgement
9		Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
Ε	Date	Payee name
İ	06/20/2019	Harris County
┌	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1001 Preston
		Houston, TX 77002
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
١	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austir, TX, officeholder fiving expense  Reimbursem∋nt
		Kembursensan
┢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	н
Γ	Date	Payee name
	02/13/2019	Holy Cross Chapel
Γ	Amount (\$)	Payee address; City; State; Zip Code
l	\$500.00	905 Main St.
l		
		Houston, TX 77002
Г	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
ļ	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
İ		Donation
•		
厂	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	н ,
Г		,
1		

## SCHEDULE F1

Advertising Evnense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Git/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Over Polling Ex Printing Ex Salaries	erhead opense expens Wages	e /Contract Labor	Transp Travel i Travel	n District Out of District	ment & Relate		
1	Total pages Schedule F1:	2	FILER NAME	***			3 Filer I	D			
	Sch: 9/17 Rpt: 13/49		Radack, Steve								
4	Date	5	Payee name						· · · · · · · · · · · · · · · · · · ·		
	01/31/2019		Holy Cross Chapel								
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	ode						
	\$150.00		905 Main St.								
						•					
			Houston, TX 77002	•							
8	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(b)	Description		<del></del>	<del></del>	···	
	OF EXPENDITURE		Contributions/Donations Made By			Check if travel					
	EXPENSITORE		Candidate/Officeholder/Political Comr	nittee		Check if Austin	, TX, officeho	lder living exp	ense		
						Donation					
Ļ	Complete ONLY & disper	<u> </u>	2 and day 1066 - hald	04		<del></del>		46 h - h -	··· · · · · · · · · · · · · · · · · ·		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ıgnt		C	office held			
⊨	D-4-	_							<del></del>		
١.	Date		Payee name								
	02/28/2019	_	Holy Cross Chapel								
	Amount (\$) \$150.00		Payee address; City; State 905 Main St.	e; Zip Co	ode		•		0	M	
			Houston, TX 77002					<u></u>			
	PURPOSE	(a)	Category (See Categories listed at the top of this so	hedule)	(p)	Description					
	OF EXPENDITURE		Contributions/Donations Made By	•		Check if travel					
			Candidate/Officeholder/Political Comr	niπee		Check if Austin	i, ix, oncend	ider living exp	ense		
							4				:
_	Complete ONLY if direct		Candidate/Officeholder name	Office sou	Jght		C	Office held			
	expenditure to benefit C/Ol	Н									
	Date	Г	Payee name	<del>::</del>			<del> </del>				
	02/08/2019		Houston Engineers Week								
	Amount (\$)		Payee address; City; State	e; Zip Co	ode						
	\$1,000.00		7215 New Territory Blvd, #100								
		1									
			Sugar Land, TX 77479								
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	chedule)	(b)	Description					
	OF EXPENDITURE	l	Contributions/Donations Made By			Check if travel					
			Candidate/Officeholder/Political Comr	nittee		Check if Austin	i, TX, officend	ider living exp	ense		
						J 5.14(10)1					
_	Complete ONLY if direct	<del>L (</del>	Candidate/Officeholder name	Office sou	<u>l</u> ught		C	Office held			
You and the second	expenditure to benefit C/O		-		J						
			· · · · · · · · · · · · · · · · · · ·								

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By-

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mense/Control

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 10/17 Rpt: 14/49	Radack, Steve
4	Date	5 Payee name
	04/04/2019	Hudson Folkerts Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10,000.00	7 Huntington Woods Estate Dr.
		Tomball, TX 77377
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
	Date	Payee name
ŀ	01/18/2019	Katy VFW Auxiliary
┝┈	Amount (\$)	Payee address; City; State; Zip Code
	\$375.00	P. O. Box 635
	40.0.0	
		Katy, TX 77492-0635
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPERDITORE	Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit C/O	
	Date	Payee name
	05/23/2019	Katy VFW Auxiliary
	Amount (\$)	Payee address; City; State; Zip Code
	\$375.00	P. O. Box 635
		Katy, TX 77492-0635
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	LAFENDITURE	Candidate/Officeholder/Political Committee
		Donation
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	<b>п</b>

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Gu	•		Vages	/Contract Labor		el Out of Dist ER (enter a l	inct category not lis	ted above)
1	Total pages Schedule F1:	2	FILER NAME					<del></del>	3 File	- 10		·
	Sch: 11/17 Rpt: 15/49	٢	Radack, Ste						3 FIIC	טוו		
4	Date	5	Payee name									
	01/18/2019		Knights of C									
_		_										
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de					,
	\$100.00		Rte1								,	
								- 0				
			Alleyton, TX	(								
8	PURPOSE	(a)	Category (c	ee Categories listed at the		odulo)	(b)	Description		***		
	OF	`		ns/Donations Ma		edule)	(-,	Check if travel or	utside of	Texas. Comp	lete Schedule	т.
	EXPENDITURE			Officeholder/Poli		ittee		Check if Austin,				
								Donation				
9	Complete ONLY if direct	٦	Candidate/Offi	ceholder name		Office sou	ght	·		Office he	ld	
L	expenditure to benefit C/OI	1							<del>                                      </del>			
	Date		Payee name									
	03/27/2019	l	Knights of C	Columbus								
	Amount (\$)		Payee addre	ss; City;	State	Zip Co	de					
	\$250.00		1 Columbus	s Place								
l		i	Now Lleven	CT OCE 10							•	
			New Haven	, CT 06510							<u>.</u>	
	PURPOSE	(a)	Category (S	ee Categories listed at t	ne top of this sch	edule)	(b)	Description				
	EXPENDITURE	İ		ns/Donations Ma		•••		Check if travel or				т.
			Candidate/	Officeholder/Poli	tical Comm	ittee		Check if Austin, Donation	тх, опісе	nolaer living	expense	
							l	Donation				
<u> </u>		L_	- 111			- 4-11	Ļ	<del></del>				
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	iceholder name	C	Office sou	ight			Office he	ld	
L												
Г	Date		Payee name									
l	03/20/2019	ļ	Knights of C	Columbus								
	Amount (\$)	_	Payee addre	ss; City;	State;	Zip Co	de	**************************************	***			
l	\$500.00		1 Columbus	s Place								
l												
l		l	Marrillaria	OT 00540								
L		L_		, CT 96510	· · · · · · · · · · · · · · · · · · ·			· ·-			<del>-</del>	
	PURPOSE OF	(a)		ee Categories listed at th		edule)	(b)	Description				
	EXPENDITURE			ns/Donations Ma		•••		Check if travel or				т.
			Carididate/0	Officeholder/Poli	ticai Comm	ee		Check if Austin, Donation	in, unice	nower living	exhelise	
	ı							Donation				
<b> </b>	Committee ON 1997 F	L_	n 1: 1 · · · · · · · · · · · ·	1		VC				or '		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	iceholder name	C	Office sou	gnt			Office he	Ia	
L	,										····	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a).

ng Expense Event Expense Loan Repayment/Relimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 12/17 Rpt: 16/49	Radack, Steve
4	Date	5 Payee name
	06/04/2019	Knox, Mike
6	Amount (\$)	7 Payee address; City; State; Zip Code
Ì	\$1,000.00	P. O. Box 158
		Houston, TX 77251
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	CONTAINTED MARE By Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Officeholder
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/26/2019	Rice, Lisa
	Amount (\$) \$325.74	Payee address; City; State, Zip Code 18118 Widcombe Dr.
	<u> </u>	Houston, TX 77084
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reimb, for supplies from HEB
		\$215.82 and Randalis 19.92
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
ĺ	05/01/2019	Rice, Lisa
Γ	Amount (\$)	Payee address; City; State; Zip Code
	\$43.14	18118 Widcombe Dr.
	·	Houston, TX 77084
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Reimb. for supplies from HEB for Glazier SEC
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
-		

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - រៀ Committee	Gift/Awards/Memorials Expe Legal Services  The Instruction Guide	Salaries/	Wages	s/Contract Labor	Travel Out of District OTHER (enter a categor	y not listed above)
┝	Total pages Schedule F1:	To EUED NAME				<del> </del>	Filer ID	
L	Sch: 13/17 Rpt; 17/49	Radack, Ste					FIICI IU	
4	Date 06/08/2019	5 Payee name Rice, Lisa					<del></del>	
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip C	ode			<del></del>
	\$63.95	18118 Wide	-					
		Houston, TX	X 77084			-		
8	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description		
	OF EXPENDITURE	Supplies					ide of Texas. Complete Sc	
		1				لبها	, officeholder living expens	
				<u></u>		Reimb. ioi suppi	lies from HEB for	Glazier SEC
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught		Office held	
	Date	Payee name						
	04/05/2019	Smith, Kay					_	
Γ	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode			<u> </u>
	\$500.00	2501 Centr	al Parkway, #a-11		>			
	!		V					
	!	Houston, T	צ 77092					
L	DUDDOOT.	<u> </u>			la,			
	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(0)	Description	** ****** Complete Co	
	EXPENDITURE	Fees					ide of Texas. Complete Sc , officeholder living expens	
	l	ļ			1	GOTV services	Officerouser string enpared	
	!					00,,, 50,,,50		
┡	Campleta ONLY if direct	Candidate/Off	iceholder name	Office so	Laht	<u></u>	Office held	<del></del>
1	Complete ONLY if direct expenditure to benefit C/O		cenoider name	Unice su	uyın		Office field	
<u></u>							<u> </u>	
	Date	Payee name		<u>-</u> _				
	04/01/2019	Spring Bran	nch Memorial Club					
	Amount (\$)	Payee addre	ss; City;	State; Zip C	ode			
	\$1,500.00	1200 Blaloo	:k, #378					
	!	Ì	·					
	l	Houston, T	¥ 77055					
L					145			
	PURPOSE OF		ee Categories listed at the to		(b)	Description		<u> </u>
	EXPENDITURE		ns/Donations Made				ide of Texas. Complete Sc , officeholder living expens	
	!	Canuldaten	Officeholder/Politica	M Committee	1	Donation	Officerolder aving expens	
	!	ļ				Donailo.		
-	Complete CANANA Street	2 54-4-104		055			05 - h-14	
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so	ught		Office held	

#### SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	i Co	mmittee	Legal Services The Instruction	on Guide explains			Contract Labor e this form.	Ċ	OTHER (enter a category not list	ted above)
1	Total pages Schedule F1: Sch: 14/17 Rpt: 18/49	2	FILER NAM						3 F	iler ID	
_									L		
4	Date 01/09/2019	5	Payee name Sprint	•							
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de				
	\$94.23		P. O. Box 6	-		•					
			Dallas, TX	75266							
8	PURPOSE	(a)	Category (S	See Categories liste	ed at the top of this scl	hedule)	(b) I	Description			
	OF EXPENDITURE		Office Ove	rhead/Renta	l Expense		<u> </u>	<u></u> t		of Texas. Complete Schedule	т.
							Ļ	<del></del>		fficeholder living expense	
							ı	Phone expens	ise		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	iceholder nam	ne (	Office sou	ght			Office held	
<b> </b> =		_			_						
	Date 02/15/2019		Payee name Sprint								
Г	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de				
l	\$98.43		P. O. Box 6	60075		/ /					
	·										
			Dallas, TX	75266							
Г	PURPOSE	(a)	Category (5	See Categories list	ed at the top of this sc	hedule)	(b) I	Description			
l	OF EXPENDITURE		Accounting		•		1	Check if travel of	outside	of Texas. Complete Schedule	т.
ļ	EXPENDITORE	1					[			fficeholder living expense	
l							;	Service charg	jes		
								*	4		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Of	liceholder nan	ne	Office sou	ght			Office held	1
П	Date		Payee name							47	
L	01/04/2019	L	St. Catheri	ne of Siena							
	Amount (\$)		Payee addre	•	State	e; Zip Co	de				
	\$400.00		10688 Sha	dow Wood							**
			Houston, T	X 77043							
	PURPOSE	(a	Category (5	See Categories list	ed at the top of this sc	hedule)	(b)	Description			
ŀ	OF EXPENDITURE			ns/Donation				Check if travel o	outside	of Texas. Complete Schedule	т.
	EXPERIENCE	l	Candidate/	Officeholder (1997)	/Political Comm	nittee		<del></del>	, TX, o	fficeholder living expense	
								Donation			
$\vdash$	Complete ONLY if direct	L_	Candidate/Of	Foobolder ===	<u> </u>	Office as:	abt			Office held	
	Complete ONLY if direct expenditure to benefit C/O		Canuluate/Of	ficeholder nan	IC	Office sou	ynt			Onice neio	
<u>L</u>											

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politics Credit Card Payment	l Co	mmittee Legal Services Salarie  The Instruction Guide explains how to	_	s/Contract Labor OTHER (enter a category not listed above) ete this form.
i	Total pages Schedule F1:	2	FILER NAME		3 Filer ID
	Sch: 15/17 Rpt: 19/49		Radack, Steve		
1	Date	5	Payee name		
	02/04/2019		St. Catherine of Siena		
;	Amount (\$)	7	Payee address; City; State; Zip	Code	
	\$400.00		10688 Shadow Wood		
			Houston, TX 77043		
3	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
d	OF EXPENDITURE		Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.
~			Candidate/Officeholder/Political Committee	1	Check if Austin, TX, officeholder living expense  Donation
				- {	Donation
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office :	Fought	Office held
,	expenditure to benefit C/O		Cardioate/Onicerioider haine Onice s	sougni	Office Held
=	Data				
	Date 06/02/2019		Payee name St. Theresa Catholic Church		
_	<del></del>	ļ.			
	Amount (\$)	Ì	Payee address; City; State; Zip	Code	
	\$1,000.00		6622 Haskell		
			Harrison TV 77007		
_		L	Houston, TX 77007		
	PURPOSE OF	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee	1	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		l	Canadate/Onicenology/ Cinical Committee	-	Donation
		ĺ		ļ	
_	Complete ONLY if direct		Candidate/Officeholder name Office	sought	Office held
	expenditure to benefit C/O	Н			- W// /
	Date		Payee name		7/
	05/13/2019	ļ	Strickland, Jeb		
_	Amount (\$)	İ	Payee address; City; State; Zip	Code	
	\$500.00	}	2501 Central Parkway #a-11		
		l			
			Houston, TX 77092		
_	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	l	Fees		Check if travel outside of Texas. Complete Schedule T.
		1		İ	Check if Austin, TX, officeholder living expense
					GOTV services
_	Complete ONLY if direct		Candidate/Officeholder name Office	souch.	Office held
	expenditure to benefit C/O		Candidate/Officeholder name Office :	svuynt	Onice neiu

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By-

**EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense** Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	J Committee	Legal Services The Instruction Gu	Salaries lide explains how to c	-	ontract Labor e this form.	OTHER (enter a category r	not listed above)
1	Total pages Schedule F1:					3	Filer ID	
	Sch: 16/17 Rpt: 20/49	Radack, S	teve					
_	Date 02/13/2019	5 Payee nam Tamayo, C	Cesar					
	Amount (\$) \$51.83	7 Payee addr 4303 Eagl Houston, 1	e Fork TX 77084	State; Zip C				
8	PURPOSE OF		See Categories listed at th	ne top of this schedule)	(p) [	Description		
	EXPENDITURE	Food/Beve	erage Expense		]	<b>=</b>	tside of Texas. Complete Sche X, officeholder living expense	edule F.
					F		plies from HEB for F	onteno SEC
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		ficeholder name	Office so	ught		Office held	
	Date	Payee nam	e //					
	03/06/2019	Tamayo, C	Cesar					
Γ	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode			
ĺ	\$52.90	4303 Eagl	e Fork					
		Houston, 1	TX 77084					
	PURPOSE	(a) Category	See Categories listed at the	ne top of this schedule)	(b) c	Description		· · · · · · · · · · · · · · · · · · ·
ĺ	OF EXPENDITURE	Supplies		·	1 <u>c</u>		tside of Texas. Complete Sche	dule T.
					<u>ا</u> ا		X, officeholder living expense	Fontono SEC
L					_	supplies ironi	Texas Art Supply for	Forterio SEC
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office so	ught ———		Office held	
	Date	Payee nam	е	•				
L	04/23/2019	Tamayo, (	Cesar			*		
	Amount (\$) \$52.43	Payee addr 4303 Eagl	·=	State; Zip C	ode			
		Houston,	TX 77084					
	PURPOSE OF EXPENDITURE	(a) Category ( Supplies	See Categories listed at th	ne top of this schedule)		Check if Austin, T	tside of Texas. Complete Sche X, officeholder living expense plies from Sam Club	
L					<u></u> t	or Fonteno SE	:C	
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office so	ught		Office held	
						• • • • • • • • • • • • • • • • • • • •		

#### SCHEDULE F1

Advertising Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel in District Travel Out of District OTHER (enter a category not listed above)			
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8	PURPOSE	(a) Category (S	ee Categories listed at the top of this so	hedule) (b)	Description				
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#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense **Event Expense** Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel in District Consulting Expense Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F4: 2 FILER NAME Sch: 1/28 Rpt: 22/49 Radack, Steve 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date 6 Payee name 01/02/2019 **B & B Butchers Steak House** 7 Amount (\$) Payee address; City; State; Zip Code \$98.65 1814 Washington Houston, TX 77018 TYPE OF Non-Political X Political **EXPENDITURE** PURPOSE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel cutside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Candidate/Officeholder name 11 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/08/2019 B & B Butchers Steak House Amount (\$) Payee address; City; State: Zip Code \$116.91 1814 Washington Houston, TX 77018 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission 20/1/9/29/9cs.s28je.tx.us Version V1.1.0ef01a4a

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Printing Expense Contributions/ Donations Made By Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 2/28 Rpt: 23/49 Radack, Steve \$ 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Pavee name 01/27/2019 **B & B Butchers Steak House** Amount (\$) Payee address: City; State; Zip Code \$62.02 1814 Washington Houston, TX 77018 TYPE OF Non-Political Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Candidate/Officeholder name 11 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Payee name Date 02/17/2019 Babin's Amount (\$) Payee address; City; State; Zip Code \$108.01 21851 Katy Freeway Katy, TX 77450 TYPE OF Non-Political X **Political EXPENDITURE** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel cutside of Texas. Complete Schedule T Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Lunch meeting** Candidate/Officeholder name Complete **ONLY** if direct Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense **Travel Out of District** Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 3/28 Rpt: 24/49 Radack, Steve \$ 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 03/22/2019 Babin's Amount (\$) Payee address; City: State: Zip Code \$107.93 21851 Katy Freeway Katy, TX 77450 TYPE OF Non-Political X Political EXPENDITURE **PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/19/2019 Babin's Amount (\$) Payee address; Citv: State; Zip Code \$188.01 21851 Katy Freeway Katy, TX 77450 TYPE OF X **Political** Non-Political **EXPENDITURE PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Food/Beverage Expense Travel in District Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gitt/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 4/28 Rpt: 25/49 Radack, Steve \$ 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 03/18/2019 **Best Buy** 7 Amount (\$) Payee address; City: State: Zip Code \$541.24 9670 Old Katy Rd Houston, TX 77055 TYPE OF Non-Political N Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Computer equipment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/10/2019 Brasserie 19 Amount (\$) Payee address; City; State; Zip Code \$119.59 1962 West Gray Houston, TX 77019 TYPE OF Non-Political X **Political EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission Version V1.1.0ef01a4a 20 your state.tx.us

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage 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) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 5/28 Rpt: 26/49 Radack, Steve S 1,745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 02/22/2019 Catholic Exchange Payee address; 7 Amount (\$) City; State; Zip Code \$5,000.00 P. O. Box 5284 Manchester, NH 03108 TYPE OF Political Non-Political X **EXPENDITURE** 10 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Donation** 11 Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 02/28/2019 **Catholic Relief Services** Amount (\$) Payee address; City: State: Zip Code \$250.00 228 W. Lexington Baltimore, MD 21201 **TYPE OF** Non-Political $\mathbf{x}$ **Political EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense **Travel Out of District Legal Services** OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 6/28 Rpt: 27/49 Radack, Steve 1.745.68 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 03/25/2019 Catholic Relief Services Payee address; Amount (\$) City; State; Zip Code \$250.00 228 W. Lexington Baltimore, MD 21201 TYPE OF Non-Political x Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Donation** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/04/2019 **Catholic Relief Services** Amount (\$) Payee address: City: State; Zip Code \$250.00 228 W. Lexington Baltimore, MD 21201 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Donation** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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#### **EXPENDITURES MADE BY CREDIT CARD** SCHEDULE F4 EXPENDITURE CATEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense **Event Expense** Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 7/28 Rpt: 28/49 Radack, Steve \$ 1,745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 02/01/2019 Ciros 7 Amount (\$) Payee address; City; State; Zip Code \$238.06 9755 Katy Freeway Houston, TX 77024 **TYPE OF** 9 Non-Political X Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/09/2019 Ciros Amount (\$) Payee address; City: State: Zip Code \$494.60 9755 Katy Freeway Houston, TX 77024 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Dinner meeting** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Accounting/Banking Food/Beverage Expense Polling Expense Travel in District Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 8/28 Rpt: 29/49 Radack, Steve \$ 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 02/10/2019 Costco Amount (\$) Payee address; City; State; Zip Code 1150 Bunker Hill \$177.77 Houston, TX 77055 TYPE OF Non-Political N Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Supplies EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/28/2019 Costco Amount (\$) Payee address; City; State: Zip Code \$181.73 1150 Bunker Hill Houston, TX 77055 TYPE OF Non-Political Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. **Supplies EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Renta) Expense Polling Expense Transportation Equipment & Related Expense Travel in District Accounting Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committée Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. FILER NAME Total pages Schedule F4: 2 3 Filer ID Sch: 9/28 Rpt: 30/49 Radack, Steve \$ 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 05/11/2019 Costco City; Amount (\$) Payee address; State; Zip Code 1150 Bunker Hill \$110.15 Houston, TX 77055 9 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. **Supplies EXPENDITURE** Check if Austin, TX, officeholder living expense **Supplies** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/13/2019 Damian's Amount (\$) Payee address; City; State; Zip Code \$135.00 3011 Smith St. Houston, TX 77006 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission 20//gy/29/gcs.state.tx.us Version V1.1.0ef01a4a

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Food/Beverage Expense Travel in District Consulting Expense Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 10/28 Rpt: 31/49 Radack, Steve 1,745.68 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Payee name 02/16/2019 **Emmaline Restaurant** Amount (\$) Payee address; City; State; Zip Code \$199.43 3210 W. Dallas Houston, TX 77019 9 TYPE OF Political Non-Political $\square$ **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/12/2019 Franks Americana Pavee address: Amount (\$) City: State: Zip Code \$106.23 3736 Westheimer Houston, TX 77027 TYPE OF Non-Political X **Political EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transponation Equipment & Related Expense Travel in District Advertising Expense **Event Expense** Loan Repayment/Reimbursement Accounting/Banking Consulting Expense Contributions/ Donations Made By Office Overhead/Rental Expense Polling Expense Food/Beverage Expense Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Legal Services The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule F4: 2 FILER NAME Sch: 11/28 Rpt: 32/49 Radack, Steve 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 01/22/2019 Franks Americana 7 Amount (\$) Payee address; City; State; Zip Code \$100.00 3736 Westheimer Houston, TX 77027 TYPE OF 9 Non-Political Political $\mathbf{x}$ **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Candidate/Officeholder name 11 Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/26/2019 Hotel Icon Payee address: State; Amount (\$) City; Zip Code \$100.67 220 Main St, Houston, TX 77002 TYPE OF Political Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH 20wg2ggcs.ggte.tx.us Forms provided by Texas Ethics Commission Version V1.1.0ef01a4a

EXPENDITURE	ES MADE BY CREDIT CARD	SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	A Committee Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME 3	Filer ID
Sch: 12/28 Rpt: 33/49	Radack, Steve	
TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CREDIT CARD \$	1,745.68
5 Date	6 Payee name	
01/05/2019	Houston Livestock Show	
7 Amount (\$) \$1,005.00	8 Payee address; City; State; Zip Code P. O. Box 20070	
9 TYPE OF	Houston, TX 77225	
EXPENDITURE	X Political Non-Political	
10 PURPOSE OF EXPENDITURE	Continuations bondies by	tside of Texas. Complete Schedule T. IX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OI  Date 02/10/2019	Candidate/Officeholder name Office sought H Payee name Houston Livestock Show	Office held
Amount (\$) \$2,250.00	Payee address; City; State; Zip Code P. O. Box 20070	
	Houston, TX 77225	
TYPE OF EXPENDITURE	X Political Non-Political	
PURPOSE OF EXPENDITURE	Contributions made by	ntside of Texas. Complete Schedule T. 'X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Accounting/Banking Food/Beverage Expense Polling Expense Travel in District Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 13/28 Rpt: 34/49 Radack, Steve 1,745,68 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5, Date Payee name 04/02/2019 **Hunt for Congress** Payee address; Amount (\$) City; State: Zip Code \$2,800.00 1707 1/2 Post Oak Blvd., #525 Houston, TX 77056 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense **Donation** 11 Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Payee name Date 05/06/2019 Ichibon Grill Amount (\$) Pavee address: City: State; Zip Code \$109.42 12120 Greenspoint Houston, TX 77060 TYPE OF **Political** Non-Political X **EXPENDITURE PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission Version V1.1.0ef01a4a 201792936cs.535e.tx.us

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense **Event Expense** Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Travel in District Polling Expense Food/Beverage Expense Consulting Expense Contributions/ Donations Made By Gitt/Awards/Memorials Expense Printing Expens Travel Out of District Candidate/Officeholder/Political Committee **Legal Services** Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 14/28 Rpt: 35/49 Radack, Steve 1,745.68 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 01/10/2019 Kroger Amount (\$) Payee address; City; State; Zip Code \$700.00 1505 Wirt Road Houston, TX 77055 TYPE OF X Political Non-Political EXPENDITURE **PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Gift cards 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/16/2019 La Griglia Amount (\$) Payee address; City; State; Zip Code \$206.67 2002 W. Gray Houston, TX 77019 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Scho Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH 20w925bics.stete.tx.us Forms provided by Texas Ethics Commission Version V1.1.0ef01a4a

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense Accounting/Banking Consulting Expense Food/Beverage Expense Travel Out of District Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Salaries/Wanes/Contract Labor Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule F4: 2 FILER NAME Sch: 16/28 Rpt: 37/49 Radack, Steve 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 01/21/2019 Le Mistral Payee address; 7 Amount (\$) City: State: Zip Code \$278.00 1400 Eldridge Houston, TX 77077 TYPE OF Non-Political X Political EXPENDITURE PURPOSE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Dinner meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/12/2019 Little Pappas Amount (\$) Pavee address: City: State: Zip Code \$257.93 3001 S. Shepherd Houston, TX 77098 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Dinner meeting** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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Version V1.1.0ef01a4a

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### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 17/28 Rpt: 38/49 Radack, Steve 1,745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 6 Payee name 03/20/2019 Living Water International Amount (\$) Payee address; City; State; Zip Code \$250.00 4001 Greenbriar, #200 Stafford, TX 77477 TYPE OF 9 X Political Non-Political **EXPENDITURE** PURPOSE 10 (a) Category (See Categories listed at the top of this schedule) **OF** Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense **Donation** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/02/2019 **NFL Holdings** Amount (\$) Payee address; City; State: Zip Code \$2,305.00 2 Reliant Park Houston, TX 77054 TYPE OF Non-Political **Political** X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Tickets** Candidate/Officeholder name Office held Complete ONLY if direct Office sought expenditure to benefit C/OH Forms provided by Texas Ethics Commission 20//9/29/8cs.state.tx.us Version V1.1.0ef01a4a

EXPENDITURE	S MADE BY CRE	DIT CARD	SCHEDULE F4						
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TOTAL OF UNITEMIZ	ZED EXPENDITURES CHA	ARGED TO A CREDIT	CARD \$ 1,745.68						
5 Date 06/04/2019	6 Payee name NFL Holdings								
7 Amount (\$)	8 Payee address; City;	State; Zip Code							
\$3,961.25	2 Reliant Park	State, Zip Code							
	Houston, TX 77054								
9 TYPE OF EXPENDITURE	X Political	Non-Political							
10 PURPOSE	(a) Category (See Categories listed a	t the top of this schedule) (b) [	Description						
OF EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T.						
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			Tionsio						
11 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held						
expenditure to benefit C/Oł									
Date 03/18/2019	Payee name National MS Society								
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\$2,000.00	P. O. Box 4527	State, Zip Code							
Ψ2,000.00	1 . O. Bux 4021								
	New York, NY 10163								
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EXPENDITURI	ES MADE BY CRE	DIT CARD	SCHEDULE F4
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Sch: 19/28 Rpt: 40/49	Radack, Steve		
4	ZED EXPENDITURES CHA	RGED TO A CREDIT CAP	\$ 1,745.68
5 Date 06/01/2019	6 Payee name OnStar		
7 Amount (\$) \$222.52	8 Payee address; City;	State; Zip Code	
	Detroit, MI	4	
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at Transportation Equipment Expense	& Related Cr	ption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense ar service
<b>11</b> Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 01/04/2019	Payee name Pappas Seafood		
Amount (\$) \$200.00	Payee address; City; 3001 S. Shepherd Houston, TX 77098	State; Zip Code	•
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at Food/Beverage Expense		ption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense h meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Forms provided by Texas E	Ethics Commission	Managadiacs.state.tx.us	Version V1.1.0ef01a4a

### **EXPENDITURES MADE BY CREDIT CARD** SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Consulting Expense Travel in District Contributions/ Donations Made By Candidate/Officeholder/Political Committee Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 20/28 Rpt: 41/49 Radack, Steve 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD S 5 Date 6 Payee name 06/01/2019 Seven Acres Senior Care Services City; Amount (\$) Payee address; State: Zip Code \$15,000.00 6200 N. Braeswood Houston, TX 77074 TYPE OF Non-Political X Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense **Donation** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/17/2019 Sorrento Ristorante Amount (\$) Pavee address: City: State; Zip Code \$101.85 415 Westheimer, Ste 106 Houston, TX 77006 TYPE OF Non-Political Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not fisted above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME 3 Filer ID Sch: 21/28 Rpt: 42/49 Radack, Steve S 1,745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Pavee name 04/07/2019 Sorrento Ristorante Payee address; Amount (\$) City; State: Zip Code \$114.18 415 Westheimer, Ste 106 Houston, TX 77006 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Candidate/Officeholder name Office held 11 Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 03/16/2019 Sorrento Ristorante Amount (\$) Payee address; City; State; Zip Code \$898.01 415 Westheimer, Ste 106 Houston, TX 77006 TYPE OF X Political Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense EXPENDITURE Check if Austin, TX, officeholder living expense Dinner meeting Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Forms provided by Texas Ethics Commission 20/49/29 gcs. stage.tx.us Version V1.1.0ef01a4a

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 22/28 Rpt: 43/49 Radack, Steve 1,745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Payee name 02/22/2019 **Sprint Store** Amount (\$) Payee address; City; State; Zip Code \$292.28 10255 North Freeway Houston, TX 77037 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone expense Candidate/Officeholder name Office sought 11 Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 02/26/2019 **Sprint Store** State; Zip Code Amount (\$) Payee address; City; 10255 North Freeway \$53.18 Houston, TX 77037 TYPE OF **Political** Non-Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH 204925 Jics. #gte.tx.us Forms provided by Texas Ethics Commission Version V1.1.0ef01a4a

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 23/28 Rpt: 44/49 Radack, Steve 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name 5 Date 02/25/2019 Sprint 7 Amount (\$) Payee address; City; State; Zip Code \$87.03 P. O. Box 660075 Dallas, TX 75266 TYPE OF Non-Political X Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone expense 11 Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Payee name Date 03/18/2019 **Sprint** Amount (\$) Payee address: City State; Zip Code \$106.16 P. O. Box 660075 Dallas, TX 75266 TYPE OF Non-Political Political **EXPENDITURE** PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Phone expense Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

### **EXPENDITURES MADE BY CREDIT CARD** SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 24/28 Rpt: 45/49 Radack, Steve TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 1.745.68 Payee name 5 Date 04/15/2019 Sprint Amount (\$) Payee address; State: Zip Code City; \$80.97 P. O. Box 660075 Dallas, TX 75266 TYPE OF $\mathbf{X}$ Political 🏽 Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/16/2019 Sprint Amount (\$) Pavee address; State: Zip Code \$79.10 P. O. Box 660075 Dallas, TX 75266 TYPE OF **Political** Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Travel in District Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 25/28 Rpt: 46/49 Radack, Steve \$ 1,745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Payee name 5 06/15/2019 **Sprint** Payee address; Amount (\$) State; Zip Code \$78.08 P. O. Box 660075 Dallas, TX 75266 TYPE OF Non-Political Political X **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Phone expense 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/15/2019 St. Cecilia's Church Amount (\$) Payee address; City: State; Zip Code \$200.00 11720 Joan of Arc Drive Houston, TX 77024 TYPE OF **Political** Non-Political **EXPENDITURE PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission Version V1.1.0ef01a4a 20/49/29/bics.atate.tx.us

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Advertising Expense Event Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 26/28 Rpt: 47/49 Radack, Steve \$ 1.745.68 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 01/16/2019 Taste of Texas Pavee address: Amount (\$) City: State: Zip Code \$80.00 10505 Katy Freeway Houston, TX 77024 TYPE OF N Political Non-Political **EXPENDITURE** 10 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/11/2019 Taste of Texas Payee address: Amount (\$) City: State: Zip Code \$100.00 10505 Katy Freeway Houston, TX 77024 TYPE OF Non-Political **Political** Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Forms provided by Texas Ethics Commission 204929 Bcs.47te.tx.us Version V1.1.0ef01a4a

EXPENDITURE	ES MADE	BY CREDIT (	CARD			SCHEDULE F4
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CATEGORIES FOR BOX 10(a)  Event Expense Fees Food/Beverage Expense Giff/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 ex	plains how to co	mplete this form.		
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5 Date	6 Payee name					•
04/25/2019	Taste of Te					
7 Amount (\$) \$400.99	8 Payee addre	y Freeway	State; Zip Co	ode		
·	Houston, T	X 77024				
9 TYPE OF EXPENDITURE	X	Political	Non-Pol	itical		
10 PURPOSE OF EXPENDITURE		See Categories listed at the top of Prage Expense	this schedule)	1	vel outside of Texas. C stin, TX, officeholder live	
11 Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ught	Office	held
05/15/2019	Taste of Te					
Amount (\$) \$198.94	Payee addre		State; Zip Co	ode		
	Houston, T	X 77024				
TYPE OF EXPENDITURE	X	Political	Non-Pol	itical		
PURPOSE OF EXPENDITURE		See Categories listed at the top of rage Expense	this schedule)	. <u>–</u>	vel outside of Texas. C stin, TX, officeholder liv tting	
Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	<u>l</u> ught	Office	held
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#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel in District Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID Sch: 28/28 Rpt: 49/49 Radack, Steve 1,745.68 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date 6 Payee name 04/16/2019 **Texans** Amount (\$) Payee address; City; State: Zip Code \$3,961.25 **NRG Stadium** Houston, TX 77054 TYPE OF Non-Political X Political EXPENDITURE PURPOSE 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Tickets** 11 Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Payee name Date 01/09/2019 Willie G's Amount (\$) Pavee address: City: State: Zip Code \$200.00 1640 W. Loop S. Houston, TX 77027 TYPE OF **Political** Non-Political X **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Sched Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Lunch** meeting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH RECORDER'S MEMORANDUM: At the time of resociation, this instrument was found to be readentially for the best photographic reproduction because of illegibility, carbon or photo copy, discolared napor, etc. All blockouts, additions and chaand prospert as the time the instrument was med and respreed.

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