

Official Public Records of **Harris County** Diane Trautman **County Clerk** 

Campaign Finance Report

Received By Clerk:

1/15/2020

File Date:

January 15, 2020

Office:

FileNo:

**County Attorney** 

Candidate:

Rose, Benjamin

Treasurer:

Helfman, Alan

Category:

Contributions And Expenditures

COUNTY CLERK HARRIS COUNTY, TEXAS

Delivered By:

Common or Contract Carrier

Type:

COR

**Harris County No Fee** 

#### FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 67 CANDIDATE / MS/MRS/MR **FIRST** MI OFFICE USE ONLY **OFFICEHOLDER** Benjamin NAME Date Received NICKNAME LAST SUFFIX Rose CANDIDATE / ADDRESS / PO BOX: APT / SUITE #; ZIP CODE Date Hand-delivered or Date Postmarked OFFICEHOLDER 5900 Memorial Drive MAILING Receipt # Amount Suite 216-D **ADDRESS** Houston, TX 77007 Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST М **TREASURER** Alan NAME **NICKNAME** LAST **SUFFIX** Helfman STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4807 Kirby Drive **ADDRESS** Houston, TX 77098 (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER EXTENSION **TREASURER** (713) 524-3801 PHONE REPORT **TYPE** 15th day after campaign treasurer January 15 30th day before election Runoff appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) PERIOD Month Day Year Month Day Year COVERED 07/01/2019 **THROUGH** 12/31/2019 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year X Primary Other Runoff 03/03/2020 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Harris County Attorney **GO TO PAGE 2** Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.3a6aaf7d

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

					2 of 67
13 C / OH NAME	Rose, Benjamin		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder. consent. Candidates and	political contributions accepted or politica These expenditures may have been mad d officeholders are required to report this	de without the candidate's or office	eholder's kno	owledge or
Additional Pages	COMMITTEE TYPE  GENERAL	COMMITTEE NAME			
	SPECIFIC	COMMITTEE ADDRESS			
			····		
		COMMITTEE CAMPAIGN TREASURE	R NAME		
		COMMITTEE CAMPAIGN TREASURE	R ADDRESS		
16 CONTRIBUTION TOTALS		CAL CONTRIBUTIONS OF \$50 OR LESS ARANTEES OF LOANS), UNLESS ITEM		\$	526.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$	89,476.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	CAL EXPENDITURES OF \$100 OR LESS	S, UNLESS ITEMIZED	\$	598.77
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	80,932.99
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS	OF THE LAST DAY OF THE	\$	53,341.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING L RTING PERIOD	LOANS AS OF THE LAST DAY	\$	20,000.00
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.					
			signature of Candidate or Officehol	der	<del></del>
	TARY STAMP / SEAL AB		, this the		day
	· · · · · · · · · · · · · · · · · · ·	certify which, witness my hand and seal o	,		uu,
Signature of offi	cer administering	Printed name of officer administeri	ing Title of officer	r administer	ing oath
Forms provided by Te	exas Ethics Commission	n www.ethics.state.tx.us	<del></del>	Version	V1.1.3a6aaf7

SI	JBT	OTALS - C/OH		cov	FORM C/OH ER SHEET PG 3
18 FILI	ED NAA			19 Filer ID	3 of 67
	se, Ber			119 Filer ID	·
		E SUBTOTALS			CURTOTAL AMOUNT
NAI	ME QF	SCHEDULE			SUBTOTAL AMOUNT
1,	X	SCHEDULE A1: MONETARY POLITICAL	CONTRIBUTIONS	\$	89,476.00
2.		SCHEDULE A2: NON-MONETARY (IN-K	IND) POLITICAL CONTRIBUTIONS	\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTION	ONS	\$	
4.	X	SCHEDULE E: LOANS		\$	20,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITU	URES FROM POLITICAL CONTRIBUT	ions \$	80,932.99
6.		SCHEDULE F2: UNPAID INCURRED OF	BLIGATIONS	\$	
7.		SCHEDULE F3: PURCHASE OF INVEST	TMENTS FROM POLITICAL CONTRIE	SUTIONS \$	
8.		SCHEDULE F4: EXPENDITURES MADE	BY CREDIT CARD	\$	
9.		SCHEDULE G: POLITICAL EXPENDITU	RES FROM PERSONAL FUNDS	\$	
10.		SCHEDULE H: PAYMENT FROM POLIT	ICAL CONTRIBUTIONS TO A BUSINE	ESS OF C/OH \$	
11.		SCHEDULE I: NON-POLITICAL EXPEND	DITURES FROM POLITICAL CONTRIE	BUTIONS \$	
12.		SCHEDULE K: INTEREST, CREDITS, GA TO FILER	AINS, REFUNDS, AND CONTRIBUTIO	ONS RETURNED \$	
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Forms	provid	ed by Texas Ethics Commission	www.ethics.state.tx.us	<del></del>	Version V1.1.3a6aaf7d

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### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/30 Rpt: 4/67 2 FILER NAME 3 Filer ID Rose, Benjamin Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 09/09/2019 Adams, Robert Larry \$100.00 6 Contributor address; City; State; Zip Code 22026 Briarcliff Dr Spicewood, TX 78669-2013 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/22/2019 \$500.00 Axelrad, Jonathan Contributor address; City; State; Zip Code 3401 Allen Pkwy Ste 100 Houston, TX 77019-1857 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#) Amount of Contribution (\$) Full name of contributor Date 09/09/2019 \$250.00 Bale-Kushner, Jennifer Contributor address; City; State; Zip Code 3143 Fairhope St Houston, TX 77025-3228 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/09/2019 Barvin, Martha Contributor address; City; State; Zip Code 6202 Newcastle St Bellaire, TX 77401-3814 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/31/2019 \$250.00 Barvin, Martha Contributor address; City; State; Zip Code 6202 Newcastle St Bellaire, TX 77401-3814 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/30 Rpt: 5/67 3 Filer ID 2 FILER NAME Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/27/2019 \$100.00 Bischoff, Mike 6 Contributor address; City; State; Zip Code 5 Hilshire Oaks Ct Houston, TX 77055-7500 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/03/2019 Black, John Milton \$2,500.00 Contributor address; City; State; Zip Code 4039 Meadow Lake Ln Houston, TX 77027-3912 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 12/30/2019 \$250.00 Bloom, Kerry Contributor address; City; State; Zip Code 2631 Amherst St Houston, TX 77005-3105 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/18/2019 Boggio, Dan \$1,000.00 Contributor address; City; State; Zip Code 11 Greenway Piz Ste 2200 Houston, TX 77046-1162 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/31/2019 Borus, Justin \$500.00 Contributor address; City; State; Zip Code 140 Dahlia St Denver, CO 80220-6310 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/30 Rpt: 6/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: \$500.00 12/20/2019 Breit, Jeffrey A. 6 Contributor address; City; State; Zip Code 600 22nd St Virginia Beach, VA 23451-4088 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/23/2019 \$500.00 Brodsky, Lee Contributor address; City; State; Zip Code 8 Old House Ln Sands Point, NY 11050-1915 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#:\_ Amount of Contribution (\$) Date Full name of contributor 09/04/2019 Brownstein, Lauren \$250.00 Contributor address; City; State; Zip Code 95 S Bellaire St Denver, CO 80246-1010 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/07/2019 Brumfield, William \$100.00 Contributor address; City; State; Zip Code 5800 Woodway Dr Apt 320 Houston, TX 77057-1510 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) ut-of-state PAC (ID#: 10/25/2019 Bryan, Christopher D. \$100.00 Contributor address; City; State; Zip Code 625 E Hyman Ave Ste 201 Aspen, CO 81611-1922 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 'Sch: 4/30 Rpt: 7/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/04/2019 Bryant, Elizabeth \$250.00 6 Contributor address; City; State; Zip Code 5201 Memorial Dr Unit 520 Houston, TX 77007-8404 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/15/2019 Bryant, Terry \$250.00 Contributor address; City; State; Zip Code 8584 Katy Fwy Ste 100 Houston, TX 77024-1808 Employer (See Instructions) Principal occupation / Job title (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 08/29/2019 Burger, Zachary \$250.00 Contributor address; City; State; Zip Code 5219 Braeburn Dr Bellaire, TX 77401-4814 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/15/2019 Burnett Jr., Riley L \$2,500.00 Contributor address; City; State; Zip Code 3607 Tangley Rd Houston, TX 77005-2251 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/27/2019 Buryakovsky, Larry \$1,000.00 Contributor address; City; State; Zip Code 8723 Crescent Gate Ln Houston, TX 77024-7029 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 5/30 Rpt: 8/67
2 FILER NAME			3 Filer ID
Rose, Benjar	min	Į	
4 Date	5 Full name of contributor  ut-of-state PAC (ID#:_		7 Amount of Contribution (\$)
11/20/2019	Buryakovsky, Larry		\$1,000.00
	6 Contributor address; City; State; Zip Code		
1	8723 Crescent Gate Ln		
	Houston, TX 77024-7029		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Date	Full name of contributor  ut-of-state PAC (ID#:_		Amount of Contribution (\$)
10/03/2019	Busher, Peter L.		\$100.00
	Contributor address; City; State; Zip Code		
	10000 Memorial Dr		·
	Ste 100		
	Houston, TX 77024-3415		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	CODY
Date	Full name of contributor Out-of-state PAC (ID#:	) [	Amount of Contribution (\$)
08/05/2019	Camp, Kevin Michael Contributor address; City; State; Zip Code 9210 Olathe St		\$500.00
	Houston, TX 77055-4509		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)
07/23/2019	Capps, Jared		\$200.00
	Contributor address; City; State; Zip Code		
	440 Louisiana St		
	Ste 1400		
	Houston, TX 77002-1057		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (4)
12/05/2019	Full name of contributor out-of-state PAC (ID#:_ Carter, Dakota		Amount of Contribution (\$) \$250.00
12/03/2013			φ230.00
	Contributor address; City; State; Zip Code 1605 Rock Prairie Rd		
	Ste 210	:	
	College Station, TX 77845-8358		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	·	Employer (Geo mandenons	,
		<u> </u>	· · · · · · · · · · · · · · · · · · ·
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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/30 Rpt: 9/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 12/04/2019 \$250.00 Castoriano, Ben 6 Contributor address; City; State; Zip Code 1100 Poydras St Ste 3700 New Orleans, LA 70163-3600 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/22/2019 Cavnar, Robert \$500.00 Contributor address; City; State; Zip Code PO Box 56445 Houston, TX 77256-6445 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/04/2019 Cobos, Andrew \$150.00 Contributor address; City; State; Zip Code 4371 Faculty Ln Houston, TX 77004-6641 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/15/2019 \$5,000.00 Cobos, Andrew Contributor address; City; State; Zip Code 4371 Faculty Ln Houston, TX 77004-6641 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/11/2019 Cook, Kelly E. \$500.00 Contributor address; City; State; Zip Code Suite 1000 Houston, TX 77008 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/30 Rpt: 10/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 10/21/2019 \$100.00 Cotlar, Bonny 6 Contributor address; City; State; Zip Code 7606 Claridge Dr Houston, TX 77071-1815 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/02/2019 \$100.00 Cotlar, Daniel Contributor address; City; State; Zip Code 7907 Candle Ln Houston, TX 77071-2010 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Full name of contributor Amount of Contribution (\$) Date 10/16/2019 \$1,500.00 Davis, Joshua P. Contributor address; City; State; Zip Code 4210 Markham St Houston, TX 77027-6325 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 08/20/2019 De Cora, Edwin \$250.00 Contributor address, City; State; Zip Code 6061 Thomas Rd Houston, TX 77041-4906 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date Amount of Contribution (\$) out-of-state PAC (ID# 09/30/2019 Domnick, Sean \$100.00 Contributor address; City; State; Zip Code 2401 Pga Blvd Ste 140 Palm Beach Gardens, FL 33410-3515 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/30 Rpt: 11/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 5 Full name of contributor 08/20/2019 Dow, Sanford \$500.00 6 Contributor address; City; State; Zip Code 2700 Post Oak Blvd Ste 1750 Houston, TX 77056-5715 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/17/2019 \$500.00 Eckert, Darah Contributor address; City; State; Zip Code 6628 Merry Ln Houston, TX 77023-4815 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 10/11/2019 Edwards, John \$250.00 Contributor address; City; State; Zip Code 340 Arcadia PI San Antonio, TX 78209-5902 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/15/2019 \$100.00 Fabela, Lauren Contributor address; City; State; Zip Code 4709 Libbey Ln Houston, TX 77092-5308 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Date Amount of Contribution (\$) 08/23/2019 \$500.00 Farah, George K. Contributor address; City; State; Zip Code 1211 Hyde Park Blvd Houston, TX 77006-1207 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Forms provided by Texas Ethics Commission www.ethics.state.tx.us

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/30 Rpt: 12/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/17/2019 \$500.00 Farb, Jonathan 6 Contributor address; City; State; Zip Code 306 Mcgowen St Apt 1117 Houston, TX 77006-2246 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/28/2019 \$500.00 Fein, Harrison Contributor address; City; State; Zip Code 600 Montgomery St San Francisco, CA 94111-2702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/22/2019 \$500.00 Fertitta, Lucas Contributor address; City; State; Zip Code 1514 Bevis St Houston, TX 77008-4481 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/29/2019 \$500.00 Fertitta, Zachary Contributor address; City; State; Zip Code 815 Walker St Ste 1553 Houston, TX 77002-5721 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 09/20/2019 Fisher, Lauren Contributor address; City; State; Zip Code 3815 Eastside St Apt 4002 Houston, TX 77098-3835 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 10/30 Rpt: 13/67 2 FILER NAME 3 Filer ID Rose, Benjamin 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$250.00 08/21/2019 Fletcher, Jordan 6 Contributor address; City; State; Zip Code 55 Bethune St Apt 609 New York, NY 10014-2034 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 10/02/2019 \$250.00 Fomby, Adam Contributor address; City; State; Zip Code 440 Louisiana St Ste 900 Houston, TX 77002-1062 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 12/31/2019 Foty, Don \$250.00 Contributor address; City; State; Zip Code 5625 Cohn Mdws Houston, TX 77007-1197 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/20/2019 Freedman, Karen & Buster \$1,500.00 Contributor address; City; State; Zip Code 2929 Weslayan St Apt 3403 Houston, TX 77027-2007 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/30/2019 Gaille, Scott \$1,000.00 Contributor address; City; State; Zip Code 10 Greyton Ln Houston, TX 77024-6435 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.3a6aaf7d

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 11/30 Rpt: 14/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/18/2019 Gallagher, Michael Murphy \$1,000.00 6 Contributor address; City; State; Zip Code 6200 Savoy Dr Ste 150 Houston, TX 77036-3320 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 12/10/2019 Garcia, David \$1,000.00 Contributor address; City; State; Zip Code 440 Louisiana St Ste 1200 Houston, TX 77002-1063 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/04/2019 Gatewood, E Michael \$5,000.00 Contributor address; City; State; Zip Code 5506 Tilbury Dr Houston, TX 77056-2018 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/27/2019 \$250.00 Gerber, Daniel Contributor address; City; State; Zip Code 5238 Braesvalley Dr Houston, TX 77096-2545 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/18/2019 Gillespie, Karolyn \$100.00 Contributor address; City; State; Zip Code 1001 Louisiana St Houston, TX 77002-5089 Principal occupation / Job title (See Instructions) Employer (See Instructions

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/30 Rpt: 15/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/03/2019 \$2,500.00 Greenberg, David Contributor address; City; State; Zip Code 5959 Richmond Ave Ste 440 Houston, TX 77057-6325 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/10/2019 Greenberg, David \$2,500.00 Contributor address; City: State: Zip Code 5959 Richmond Ave Ste 440 Houston, TX 77057-6325 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) Date 08/26/2019 \$250.00 Halevy, Jacob Contributor address; City; State; Zip Code 3939 W Alabama St Apt 846 Houston, TX 77027-2021 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/26/2019 \$1,000.00 Ham, Jeremy L. Contributor address; City; State; Zip Code 12115 Double Tree Dr Houston, TX 77070-5226 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 12/04/2019 Harberg, Karen & Jay \$250.00 Contributor address; City; State; Zip Code 2100 West Loop S Ste 1100 Houston, TX 77027-3534 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/30 Rpt: 16/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 09/17/2019 \$100.00 Hausman-Weiss, Scott & Natalie 6 Contributor address; City; State; Zip Code 1652 Norfolk St Apt C Houston, TX 77006-5281 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/18/2019 \$750.00 Helfman, Alan Contributor address; City; State; Zip Code 8727 Crescent Gate Ln Houston, TX 77024-7029 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#\_ Amount of Contribution (\$) Date 12/10/2019 \$500.00 Helfman, Alan Contributor address; City; State; Zip Code 8727 Crescent Gate Ln Houston, TX 77024-7029 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/16/2019 \$500.00 Herring, Mason Contributor address; City; State; Zip Code 4640 Banning Dr Houston, TX 77027-4706 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/03/2019 Holland-Nelson, Leisa \$100.00 Contributor address; City; State; Zip Code 4899 Montrose Blvd Apt 1311 Houston, TX 77006-6169 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/30 Rpt: 17/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/18/2019 Holland-Nelson, Leisa \$100.00 6 Contributor address; City; State, Zip Code 4899 Montrose Blvd Apt 1311 Houston, TX 77006-6169 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 12/04/2019 \$100.00 Jacobson, Sue Contributor address; City; State; Zip Code 3350 Mccue Rd Apt 804 Houston, TX 77056-7121 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 07/15/2019 \$300.00 Joseph, Abraham M. Contributor address; City; State; Zip Code 10804 Roark Rd Houston, TX 77099-3500 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/04/2019 Joy, Jason J. \$500.00 Contributor address; City; State; Zip Code 909 Texas St Unit 1801 Houston, TX 77002-3192 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#; 10/04/2019 Kaplan, Michael \$2,000.00 Contributor address; City; State; Zip Code 4101 Greenbriar Dr Ste 320 Houston, TX 77098-5296 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/30 Rpt: 18/67 2 FILER NAME Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/27/2019 \$100.00 Karpas, Leslie Contributor address; City; State; Zip Code 4521 San Felipe St Houston, TX 77027-3383 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/17/2019 Kawaja, Dr. Essa \$500.00 Contributor address; City; State; Zip Code 1812 Durham Dr Ste 100 Houston, TX 77007-2291 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/06/2019 \$1,000.00 Kerensky, Michael Contributor address; City; State; Zip Code 440 Louisiana St Ste 2300 Houston, TX 77002-1061 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/26/2019 \$500.00 Kerensky, Michael Contributor address; City; State; Zip Code 440 Louisiana St Ste 2300 Houston, TX 77002-1061 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/05/2019 Kherkher, Thomas \$100.00 Contributor address; City, State; Zip Code 5909 West Loop S Ste 525 Bellaire, TX 77401-2508 Principal occupation / Job title (See Instructions) Employer (See Instructions)

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/30 Rpt: 19/67 FILER NAME 3 Filer ID Rose, Benjamin 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 12/28/2019 \$1,000.00 Kita, Matthew J. 6 Contributor address; City; State; Zip Code PO Box 5119 Dallas, TX 75208-9119 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 07/16/2019 \$250.00 Krohn, Nicholas Contributor address; City; State; Zip Code 4012 Gramercy St Houston, TX 77025-1109 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID# 09/09/2019 \$100.00 Kuniansky, Richard Contributor address; City; State; Zip Code 1402 Apsley Manor Trl Houston, TX 77055-1485 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 11/18/2019 \$150.00 Kuniansky, Richard Contributor address; City; State; Zip Code 1402 Apsley Manor Trl Houston, TX 77055-1485 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) 12/30/2019 Kushner, Jennifer \$100.00 Contributor address; City; State; Zip Code 3143 Fairhope St Houston, TX 77025-3228 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/30 Rpt: 20/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 07/08/2019 \$1,000.00 Levit, Max 6 Contributor address; City; State; Zip Code 20 River Hollow Ln Houston, TX 77027-9402 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/09/2019 \$1,000.00 Levit, Max Contributor address; City; State; Zip Code 20 River Hollow Ln Houston, TX 77027-9402 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 10/15/2019 \$500.00 Lewers, Ryan Contributor address; City; State; Zip Code 1907 Saint Louis Dr Honolulu, HI 96816-1934 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Date out-of-state PAC (ID#: Amount of Contribution (\$) 09/17/2019 Lewis, Gregory \$250.00 Contributor address; City; State; Zip Code 3773 Richmond Ave Ste 200 Houston, TX 77046-3724 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/31/2019 Lewis, Gregory \$250.00 Contributor address; City; State; Zip Code 3773 Richmond Ave Ste 200 Houston, TX 77046-3724 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 18/30 Rpt: 21/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of Contribution (\$) 10/02/2019 \$250.00 Luber, Aaron 6 Contributor address; City; State; Zip Code 508 Park St Montclair, NJ 07043-1944 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 11/22/2019 \$250.00 Madden, Joseph Contributor address; City; State; Zip Code 9870 Gaylord Dr Apt 1428 Houston, TX 77024-2674 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/29/2019 \$250.00 Mafrige, Rocky Contributor address; City; State; Zip Code 2 Pinewood Cir Houston, TX 77024-7610 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/04/2019 Maynard, Bill \$200.00 Contributor address; City; State; Zip Code 923 Wade Hampton Dr Houston, TX 77024-3138 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 10/15/2019 McCraw, John Lin \$250.00 Contributor address; City; State; Zip Code 1504 1st Ave Mckinney, TX 75069-3402 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 19/30 Rpt: 22/67 2 FILER NAME 3 Filer ID Rose, Benjamin 5 Full name of contributor 4 Date out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/05/2019 McElroy, Frank \$500.00 6 Contributor address; City; State; Zip Code 24 Greenway Plz Houston, TX 77046-2401 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 08/13/2019 \$1,000.00 McGehee, Jack E. Contributor address; City; State; Zip Code 10370 Richmond Ave Ste 1300 Houston, TX 77042-0002 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/04/2019 \$100.00 McLaughlin, Chris Contributor address; City; State; Zip Code 1070 Park Ave Apt 7D New York, NY 10128-1000 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/31/2019 McLaughlin, Chris \$150.00 Contributor address; City; State; Zip Code 1070 Park Ave Apt 7D New York, NY 10128-1000 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/31/2019 McNeal, Quinncy \$500.00 Contributor address; City; State; Zip Code 13926 Windwood Falls Ln Humble, TX 77396-1434 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 20/30 Rpt: 23/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 08/30/2019 Meadows, Scott \$1,000.00 6 Contributor address; City; State; Zip Code 175 Stevinstraat Montgomery, TX 77356-4571 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID# 07/18/2019 \$500.00 Monroe, James Contributor address; City; State; Zip Code 3002 San Felipe St Houston, TX 77019-5916 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 10/28/2019 \$250.00 Morris, Alex Contributor address; City; State; Zip Code 4764 E South Fork Dr Phoenix, AZ 85044-4973 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Date Full name of contributor Amount of Contribution (\$) 09/04/2019 \$100.00 Nast. Steven Contributor address; City; State; Zip Code 20808 167th Ave SE Monroe, WA 98272-8869 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/17/2019 Newgard, James Robert \$250.00 Contributor address; City; State; Zip Code 1506 Park St Houston, TX 77019-5324 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/30 Rpt: 24/67 2 FILER NAME Filer ID Rose, Benjamin 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 09/18/2019 \$100.00 Novy, Lester 6 Contributor address; City; State; Zip Code 5151 San Felipe St FI 24 Houston, TX 77056-3607 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/04/2019 Nowak, Robert John \$100.00 Contributor address; City; State; Zip Code 705 Algregg St Houston, TX 77008-4520 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 09/08/2019 \$100.00 Nussbaum, Lindsay Contributor address; City; State; Zip Code 1330 A Dian St Houston, TX 77008-3706 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/17/2019 Perrin, Leila \$100.00 Contributor address; City; State; Zip Code 1914 Augusta Dr Houston, TX 77057-3771 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID# Amount of Contribution (\$) Date Full name of contributor 09/17/2019 \$250.00 Porter, Sandra Contributor address; City; State; Zip Code 4207 W Alabama St Houston, TX 77027-4901 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 22/30 Rpt: 25/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 12/30/2019 \$500.00 Pozmantier, Irving 6 Contributor address; City; State; Zip Code 1000 Uptown Park Blvd Apt 242 Houston, TX 77056-3243 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) out-of-state PAC (ID# Date Full name of contributor Amount of Contribution (\$) 12/30/2019 Ptasinski, Christina \$100.00 Contributor address; City; State; Zip Code 4899 Montrose Blvd Apt 902 Houston, TX 77006-6166 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/31/2019 Rauch, Mark \$500.00 Contributor address; City; State; Zip Code 5441 Tupper Lake Dr Houston, TX 77056-1624 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) 08/06/2019 Riddle, Don \$1,000.00 Contributor address; City; State; Zip Code 5315 -B Cy Creek Pkwy # 524 Houston, TX 77069 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/06/2019 Robin, Ross \$1,000.00 Contributor address; City; State; Zip Code 1805 Park St Houston, TX 77019-5707 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 23/30 Rpt: 26/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of Contribution (\$) 12/28/2019 \$1,000.00 Rose, Cindi 6 Contributor address; City; State; Zip Code 803 Country Ln Houston, TX 77024-3106 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/30/2019 Rose, Franklin A. \$2,500.00 Contributor address; City; State; Zip Code 1121 Uptown Park Blvd Ste 16 Houston, TX 77056-3226 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/30/2019 Rose, Franklin A. \$4,000.00 Contributor address; City; State; Zip Code 1121 Uptown Park Blvd Ste 16 Houston, TX 77056-3226 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 09/13/2019 \$250.00 Rukab, Lutfi Contributor address; City; State; Zip Code 1009 Missouri St Houston, TX 77006-2839 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/07/2019 Saghian, Michael \$1,500.00 Contributor address; City; State; Zip Code 4914 Braesvalley Dr Houston, TX 77096-2730 Principal occupation / Job title (See Instructions) Employer (See Instructions) www.ethics.state.tx.us Forms provided by Texas Ethics Commission Version V1.1.3a6aaf7d

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 24/30 Rpt: 27/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/05/2019 \$1,500.00 Samuels, Benjamin 6 Contributor address; City; State; Zip Code 4533 Magnolia St Bellaire, TX 77401-4230 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/18/2019 Sarofim, Susan \$2,500.00 Contributor address; City; State; Zip Code PO Box 27129 Houston, TX 77227-7129 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/30/2019 \$100.00 Schwartz, Judy Contributor address; City; State; Zip Code 2350 N Braeswood Blvd Houston, TX 77030-4312 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 10/17/2019 \$500.00 Selber, Audrey & Peter Contributor address; City; State; Zip Code 2603 Augusta Dr Houston, TX 77057-5678 Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ 11/07/2019 Sickman, Stephen \$150.00 Contributor address; City; State; Zip Code 2535 Brinkman St Houston, TX 77008-1849 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.3a6aaf7d

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 25/30 Rpt: 28/67 3 Filer ID 2 FILER NAME Rose, Benjamin 4 Date 5 Full name of contributor out-pf-state PAC (ID#: 7 Amount of Contribution (\$) \$100.00 12/27/2019 Siegel, Brett David 6 Contributor address; City; State; Zip Code 30 E 9th St Apt 3E New York, NY 10003-6408 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/12/2019 Simon, Sandra & Paul \$250.00 Contributor address; City; State; Zip Code 40411 Remington Ln Magnolia, TX 77354-6194 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 09/05/2019 \$500.00 Simpson, Iain Contributor address; City; State; Zip Code 1005 Heights Blvd Houston, TX 77008-6913 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/16/2019 Small Independent Motel Association (see memo) \$500.00 Contributor address; City; State; Zip Code 1022 Wirt Rd Ste 302 Houston, TX 77055-6858 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 08/21/2019 Spomer, Elizabeth \$250.00 Contributor address; City; State; Zip Code 2219 Sunset Blvd Houston, TX 77005-1529 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.3a6aaf7d

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 26/30 Rpt: 29/67 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/20/2019 Springer, Dillon \$250.00 6 Contributor address; City; State; Zip Code 3906 Pacific Ave Apt 2 Marina Del Rey, CA 90292-5936 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 07/29/2019 \$250.00 Stogner, Brant Jeffrey Contributor address; City; State; Zip Code 1625 Monarch Oaks St Houston, TX 77055-3437 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 10/11/2019 \$100.00 Strupp, Karen R. Contributor address; City; State; Zip Code 2217 Sunset Blvd Houston, TX 77005-1529 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: ... Amount of Contribution (\$) 09/09/2019 \$500.00 Tabrizi, Matt Contributor address; City; State; Zip Code 4310 Garth Rd Baytown, TX 77521-3114 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/30/2019 Tapick, Betty \$500.00 Contributor address; City; State; Zip Code 7 Long Timbers Trl Houston, TX 77024-5450 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission

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#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 27/30 Rpt: 30/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 12/31/2019 Taylor, Larry \$100.00 6 Contributor address; City; State; Zip Code 1303 Shields Ave Cedar Hill, TX 75104-1413 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/16/2019 \$600.00 Taylor Jr., Armon Paul Contributor address; City; State; Zip Code 2816 W Wildwind Cir The Woodlands, TX 77380-1344 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor 10/21/2019 \$2,500.00 The Pinkerton Law Firm Contributor address; City; State; Zip Code 550 Westcott St Ste 590 Houston, TX 77007-9015 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/30/2019 Tillis, Joshua 250.00 Contributor address; City; State; Zip Code 2475 Underwood St Apt 179 Houston, TX 77030-3519 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 09/10/2019 Travis, Jeffrey \$250.00 Contributor address; City; State; Zip Code 2400 Mountain Oak Rd Bakersfield, CA 93311-1678 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.3a6aaf7d

	MONET	ARY POLITICAL CONTRIBUTIO	ONS	SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 28/30 Rpt: 31/67
2	FILER NAME Rose, Benjar	min		3 Filer ID
4	Date 10/16/2019	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Tunitsky, Eugene</li> <li>6 Contributor address; City; State; Zip Code 711 Louisiana St Ste 1500 Houston, TX 77002-2821</li> </ul>		7 Amount of Contribution (\$) \$100.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)
	Date 12/27/2019	Full name of contributor out-of-state PAC (ID#:_ Twyford, Stefani Contributor address; City; State; Zip Code 17 Exbury Way Houston, TX 77056-2193		Amount of Contribution (\$) \$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)
	Date 12/27/2019 Principal occu	Full name of contributor out-of-state PAC (ID#:_Waldman, Steve  Contributor address; City; State; Zip Code 1549 Nevada St  Houston, TX 77006-1023	Employer (See Instructions	Amount of Contribution (\$) \$100.00
=	Date	Full name of contributor	)	Amount of Contribution (\$)
	12/10/2019	Waldman, Sydney  Contributor address; City; State; Zip Code 5447 Carew St  Houston, TX 77096-1229	,	\$100.00
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
	Date 10/17/2019	Full name of contributor out-of-state PAC (ID#:_ Walker & Hunger P.C.  Contributor address; City; State; Zip Code 3100 Timmons Ln Ste 401 Houston, TX 77027-5904		Amount of Contribution (\$) \$1,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)
Fo	rms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V1.1.3a6aaf

### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 29/30 Rpt: 32/67 2 FILER NAME 3 Filer ID Rose, Benjamin 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of Contribution (\$) 08/26/2019 White, Andrew \$100.00 6 Contributor address; City; State; Zip Code 2911 Ella Lee Ln Houston, TX 77019-5907 8 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/28/2019 \$100.00 White, Luke Graham Contributor address; City; State; Zip Code 110 1/2 Galleon St Marina Del Rey, CA 90292-5904 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/10/2019 Wright, Michael L. \$250.00 Contributor address; City; State; Zip Code 5009 Rolling Woods Trl Dayton, OH 45429-1110 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/05/2019 Yarborough, Charity \$200.00 Contributor address; City; State; Zip Code 2603 Sutton Ct Houston, TX 77027-5246 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/26/2019 Yarborough, Patrick \$250.00 Contributor address; City; State; Zip Code 1432 Vassar St Houston, TX 77006-6032 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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MONET	ARY POLITICAL CONTRIE	BUTIONS	SCHEDULE A1
The Instruc	ction Guide explains how to comple	te this form.	1 Total pages Schedule A1: Sch: 30/30 Rpt: 33/67
FILER NAME Rose, Benjar	min		3 Filer ID
12/17/2019	<ul> <li>Full name of contributor</li></ul>	PAC (ID#:	7 Amount of Contribution (\$) \$250.00
	Houston, TX 77005-1521		
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date 12/14/2019	Full name of contributor out-of-state Zanotti, Stefania And Luca Contributor address; City; State; Zip Code 2033 Claremont Ln	PAC (ID#:	Amount of Contribution (\$) \$1,500.0
	Houston, TX 77019-5803		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruc	tions)
	by Texas Ethics Commission w	ww.ethics.state.tx.us	

LOANS				SCHEDULE E	
The Instruction	on Guide explains how to o	complete this form.	i i	ges Schedule E: 1 Rpt: 34/67	
2 FILER NAME Rose, Benjamin			3 Filer ID		
<sup>4</sup> TOTAL OF UN	IITEMIZED LOANS			\$	
5 Date of loan 12/31/2019	7 Name of lender Rose, Benjamin	out-of-state RAC (ID#:	)	9 Loan Amount (\$) \$20,000.00	
6 Is lender a financial institution?	8 Lender address; City; 5900 Memorial Drive Suite 216-D	State; Zip Code		10 Interest Rate  11 Maturity Date	
12 Principal occupation	Houston, TX 77007 on / Job title (See Instructions)	13 Employer (See In			
attorney	•	Harwood Rose	PLLC	_	
14 Description of Coll  X None	lateral	15 Check if persona	funds were deposited	l into political account (See Instructions)	
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)	
X not applicable	18 Guarantor address; City;	State; Zip Code			
20 Principal occupation	on	21 Employer (See Ir	estructions)		
				,	
1					

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

	CONTRIBUTION	VS Schiebele 1.2
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 1/31 Rpt: 35/67	2 FILER NAME Rose, Benjamin 3 Filer ID
4	Date 07/02/2019	5 Payee name 5900 Interests/Greenburg
6	Amount (\$) \$854.00	7 Payee address; City; State; Zip Code 5900 Memorial Dr  Houston, TX 77007-8004
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Rent
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 08/05/2019	Payee name 5900 Interests/Greenburg
	Amount (\$) \$854.00	Payee address; City; State; Zip Code 5900 Memorial Dr  Houston, TX 77007-8004
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office Rent
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/02/2019	Payee name 5900 Interests/Greenburg
	Amount (\$) \$854.00	Payee address; City; State; Zip Code 5900 Memorial Dr  Houston, TX 77007-8004
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office Rent
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 2/31 Rpt: 36/67	Rose, Benjamin
4	Date	5 Payee name
	09/02/2019	5900 Interests/Greenburg
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	5900 Memorial Dr
		Houston, TX 77007-8004
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense Office Rent
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/07/2019	5900 Interests/Greenburg
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$854.00	5900 Memorial Dr
		Houston, TX 77007-8004
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office Rent
	Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Γ	Date	Payee name
L	11/01/2019	5900 Interests/Greenburg
	Amount (\$) \$854.00	Payee address; City; State; Zip Code 5900 Memorial Dr  Houston, TX 77007-8004
Γ	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office Rent
l		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

Forms provided by Texas Ethics Commission

### SCHEDULE F1

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

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 3/31 Rpt: 37/67	Rose, Benjamin
4	Date	5 Payee name
	12/01/2019	5900 Interests/Greenburg
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$854.00	5900 Memorial Dr
		Houston, TX 77007-8004
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Office Rent
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/15/2019	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$139.49	208 S Akard St
		Dallas, TX 75202-4206
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		telephone
	Complete <u>QNLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name
	Date	Payee name
L	08/15/2019	AT&T Inc
	Amount (\$)	Payee address; City; State; Zip Code
1	\$134.23	208 S Akard St
		Dallas, TX 75202-4206
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		telephone
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	pense Printing Salarie:	-	e /Contract Labor	Travel in Dist Travel Out of OTHER (ente	
		The Instruction Guide	e explains now to	combie			<del></del>
Total pages Schedule F1: Sch: 4/31 Rpt: 38/67	2 FILER NAM Rose, Benj					3 Filer ID	
4 Date	5 Payee name	,	<del></del>				<del></del>
09/14/2019	AT&T Inc						
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip (	Code			
\$134.23	208 S Aka Dallas, TX	rd St 75202-4206					
8 PURPOSE	(a) Category (	See Categories listed at the t	op of this schedule)	(b)	Description		-
OF EXPENDITURE	Office Ove	rhead/Rental Expe	nse		<u></u>		Complete Schedule T.
,					telephone	, TX, officeholder liv	iving expense
<ol> <li>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</li> </ol>		fficeholder name	Office s	ought	<u> </u>	Office	e held
Date	Payee name	e					
10/14/2019	AT&T Inc						
Amount (\$)	Payee addr	ess; City;	State; Žip	Code			
\$134.23	208 S Aka	rd St		<b>(</b>			
ļ							
	Dallas, TX	75202-4206					
PURPOSE		See Categories listed at the t	op of this schedule	(b)	Description		
OF		erhead/Rental Expe	***************************************	7	Check if travel of		Complete Schedule T.
EXPENDITURE		f» -				, TX, officeholder fi	iving expense
					telephone		
						<u> </u>	
Complete ONLY if direct expenditure to benefit C/OH		fficeholder name	Office s	ought		Office	e held
oxpenditure to benefit C/Or							
Date	Payee nam	e					
11/18/2019	AT&T Inc						
Amount (\$)	Payee addr		State; Zip	Code			
\$135.32	208 S Aka	rd St					
	Dallas, TX	75202-4206				-	
PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description		
OF EXPENDITURE		erhead/Rental Expe			Check if travel		Complete Schedule T
LAI LINDITURE		•				, TX, officeholder li	iving expense
					telephone		
Canada Canada	L	Ef: la - 1.1		ــــــــــــــــــــــــــــــــــــــ			
Complete ONLY if direct expenditure to benefit C/OF		fficeholder name	Office s	ought		Office	e held
		<del></del>					

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### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By Travel in District
Travel Out of District Polling Expense Printing Expense
Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee 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: 5/31 Rpt: 39/67 Rose, Benjamin Payee name 12/14/2019 AT&T Inc 6 Amount (\$) Payee address; City; State; Zip Code \$135.32 208 S Akard St Dallas, TX 75202-4206 **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 telephone Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/31/2019 ActBlue Payee address; Amount (\$) City State; Zip Code \$2.134.25 PO Box 441146 West Somerville, MA 02144-0031 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense credit card processing fees Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 07/09/2019 American Airlines Inc City; Payee address; State; Zip Code Amount (\$) \$569.60 4333 Amon Carter Blvd Fort Worth, TX 76155-2605 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense General Consultant Travel Complete ONLY if direct Office held Candidate/Officeholder name Office sought expenditure to benefit C/OH

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### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Food/Beverage Expense Gift/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 Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 6/31 Rpt: 40/67 Rose, Benjamin 4 Date Payee name 09/12/2019 Ammerman Experience 6 Amount (\$) Pavee address: City: State: Zip Code \$2,500.00 12335 Kingsride Ln Houston, TX 77024-4116 Я **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/22/2019 **Best Buy** Zip Code Amount (\$) Pavee address: / City; State: \$242.41 5133 Richmond Ave Houston, TX 77056-6701 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office supplies Candidate/Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH Date Payee name 07/17/2019 Brent Kidwell Amount (\$) Payee address; City; State; Zip Code \$250.00 4803 Kings Way Houston, TX 77069-2129 **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 Office set up Complete ONLY if direct Office sought Candidate/Officeholder name Office held expenditure to benefit C/OH

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### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event 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/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Ĺ	Sch: 7/31 Rpt: 41/67	Rose, Benjamin
4	Date	5 Payee name
	08/01/2019	CFC Consulting LLC
6	Amount (\$)	7 Payee address; City, State; Zip Code
	\$677.72	PO Box 301074
		Austin, TX 78703-0018
8	PURPOSE	the state of the s
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense
١	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Compliance Consultant
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1
	Date	Payee name
	09/13/2019	CFC Consulting LLC
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$677.72	PO Box 301074
		Austin, TX 78703-0018
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Compliance Consultant
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
Г	Date	Payee name
	10/25/2019	CFC Consulting LLC
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$677.72	PO Box 301074
		Austin, TX 78703-0018
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Compliance Consultant
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
L		

### POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 **CONTRIBUTIONS EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Consulting Expense Contributions/ Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Travel in District Travel Out of District Candidate/Officeholder/Political Committee Legal Services alaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 8/31 Rpt: 42/67 Rose, Benjamin 4 Date Payee name 11/14/2019 **CFC Consulting LLC** 6 Amount (\$) Payee address; City; State; Zip Code \$677.72 PO Box 301074 Austin, TX 78703-0018 8 **PURPOSE** (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 Compliance Consultant Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/13/2019 CFC Consulting LLC Amount (\$) Payee address; State: Zip Code \$677.72 PO Box 301074 Austin, TX 78703-0018 **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 Compliance Consultant Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 07/09/2019 **CKO Digital** Amount (\$) Payee address; City; State, Zip Code \$2,000.00 2426 Bartlett St # A1 Houston, TX 77098-5119 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Media Branding Complete ONLY if direct Candidate/Officeholder name Office held Office sought

Forms provided by Texas Ethics Commission

expenditure to benefit C/OH

## SCHEDULE F1

# EXPENDITURE CATEGORIES FOR BOX 8(a) Expense Event Expense Loan Repayment/Reimbu

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services 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 Lenter a category not listed above)

Candidate/Officeholder/Political Commit Credit Card Payment	ttee Legal Services Salaries/M  The Instruction Guide explains how to co	Ages/Contract Labor OTHER (enter a category not listed above)  mplete this form.
1 Total pages Schedule F1: 2 FII	LER NAME	3 Filer ID
Sch: 9/31 Rpt: 43/67 Ro	ose, Benjamin	
i i	ayee name	
10/10/2019 CI	KO Digital	
	ayee address; City; State; Zip Co	de
72,000	426 Bartlett St	
	A1	
	ouston, TX 77098-5119	(1)
OF A	ategory (See Categories listed at the top of this schedule) dvertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	svertising Expense	Check if Austin, TX, officeholder living expense
		Media Branding
C. Consoler Call Vitation	alidate (Office halder and	Office held
Complete ONLY if direct Car expenditure to benefit C/OH	ndidate/Officeholder name Office sou	ght Office held
Date Pa	ayee name	<del></del>
l ' '	arroll Printing & Promotions	
Amount (\$)	ayee address; City; State; Zip Co	de
\$308.51 29	907 Canal St	
l H	ouston, TX 77003-1624	
PURPOSE (a) Ca	ategory (See Categories listed at the top of this schedule)	(b) Description
OF PI	rinting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Printing
		<b>G</b>
Complete ONLY if direct Car expenditure to benefit C/OH	ndidate/Officeholder name Office sou	ght Office held
Date Pa	ayee name	
1 '	arroll Printing & Promotions	
<del> </del>	ayee address; City; State; Zip Co	ode
\$643.01 29	907 Canal St	
н	ouston, TX 77003-1624	
PURPOSE (a) C	ategory (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	rinting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Printing / letterhead
Complete ONLY if direct Car expenditure to benefit C/OH	ndidate/Officeholder name Office sou	ght Office held
		·
L		

Forms provided by Texas Ethics Commission

### SCHEDULE F1

Advertising Expense

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment	Gitt/Awards/Memorials Expense	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District  Travel Out of District  OTHER (enter a category not listed above)
orean card rayment	The Instruction Guide explains h	ow to complete this form.	
1 Total pages Schedule F1: 2	FILER NAME		3 Filer ID
Sch: 10/31 Rpt: 44/67	Rose, Benjamin		
4 Date 5	Payee name	<del></del>	
07/02/2019	Copy.com		
6 Amount (\$) 7	Payee address; City; State;	Zip Code	<del></del>
\$168.55	1201 Westheimer Rd	<b>,</b>	
	Ste F		
	Houston, TX 77006-2701		
a puppage (a	<del></del>	[/h) a	
8 PURPOSE (a	Category (See Categories listed at the top of this sche		outside of Texas. Complete Schedule T.
EXPENDITURE	Printing Expense		n, TX, officeholder living expense
		Printing	
	Candidate/Officeholder name O	ffice sought	Office held
expenditure to benefit C/OH			i
Date	Payee name		
09/16/2019	Copy.com		
Amount (\$)	Payee address; City; State	Zip Code	
\$83.43	1201 Westheimer Rd	<u>.</u>	
[	Ste F		
	Houston, TX 77006-2701		
PURPOSE (a		dule) (b) Description	<del> </del>
OF	<ul> <li>A) Category (See Categories listed at the top of this sche Printing Expense</li> </ul>		outside of Texas. Complete Schedule T.
EXPENDITURE			n, TX, officeholder living expense
		Printing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	ffice sought	Office held
		<del></del>	
Date	Payee name		
10/18/2019	Copy.com		
Amount (\$)	Payee address; City; State;	Zip Code	
\$167.25	1201 Westheimer Rd		
	Ste F		
1	Houston, TX 77006-2701		•
PURPOSE (a	a) Category (See Categories listed at the top of this sche	dule) (b) Description	
OF EXPENDITURE	Printing Expense	Check if travel	outside of Texas. Complete Schedule T.
LAN ENGINANCE			n, TX, officeholder living expense
		Printing / bus	siness carus
Complete ONLY if direct	Candidate/Officeholder name O	effice sought	Office held
expenditure to benefit C/OH	Candidate/Onicendider name O	ffice sought	Office field
1			

### SCHEDULE F1

Advertising Expense Accounting/Banking

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Conditions	Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services		xpense			Travel in District Travel Out of District OTHER (enter a category not listed above)
Credit Card Payment		The Instruction Guide exp	plains how to co	mple	te this form.		
Total pages Schedule F1: 2 Sch: 11/31 Rpt: 45/67	PILER NAM Rose, Benj					3	Filer ID
	Payee name						<del></del>
10/21/2019	Copy.com	,					
Amount (\$) 7	Payee addre	ess; City;	State; Zip Co	ode			
\$60.43	1201 West	heimer Rd					
	Ste F						
		X 77006-2701					
PURPOSE OF		See Categories listed at the top of	this schedule)	(b)	Description		
EXPENDITURE	Printing Ex	pense			<u></u>		de of Texas. Complete Schedule T. officeholder living expense
		**			Printing / butt		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Of	ficeholder name	Office sou	ught			Office held
Date	Payee name	e ///					
07/26/2019	Expedia G	roup Inc					
Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode	, <u></u>		
\$1,486.77	333 108th	Ave NE					
	Bellevue, \	WA 98004-5703					
PURPOSE (		See Categories listed at the top of		(b)	Description		
EXPENDITURE	Office Ove	rhead/Rental Expense	:				de of Texas. Complete Schedule T. officeholder living expense
					Consultant tra	ave	
							<b>"</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Of	fficeholder name	Office sou	ught			Office held
experialitate to belief 6/6/1					<del></del> -		
Date	Payee name				<b>(</b>		
10/01/2019	Facebook						<u> </u>
Amount (\$)	Payee addr		State; Zip Co	ode	•		
\$12.80	1101 Wes	tlake Ave N					
	Coottle M	W 09100 2527					
	<del> </del>	'A 98109-3527		Tax			
OF	(a) Category (Advertising	See Categories listed at the top of	f this schedule)	(D)	Description Check if travel	outsid	de of Texas, Complete Schedule T.
EXPENDITURE	Advertising	3 Expense					officeholder living expense
				l	Digital Advert	tisir	ng
					<del></del>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		fficeholder name	Office so	ught			Office held
-			·				

### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Polling Expense Travel in District Printing Expense Travel Out of District Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 12/31 Rpt: 46/67 Rose, Benjamin Payee name 10/09/2019 Facebook Inc 6 Amount (\$) Payee address; City; State; Zip Code \$25.00 1101 Westlake Ave N Seattle, WA 98109-3527 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Digital Advertising Candidate/Officeholder name Complete ONLY if direct Office held Office sought expenditure to benefit C/OH Date Payee name 10/09/2019 Facebook Inc Amount (\$) Payee address; City; State: Zip Code \$25.00 1101 Westlake Ave N Seattle, WA 98109-3527 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Digital Advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/10/2019 Facebook Inc Amount (\$) Payee address; City; State; Zip Code \$25.00 1101 Westlake Ave N Seattle, WA 98109-3527 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Digital Advertising Complete **ONLY** if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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### SCHEDULE F1

Advertising Expense

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expen Printing Expe		Transportation Equipment & Related Ex Travel in District Travel Out of District OTHER (enter a category not listed abo	
Credit Card Payment		The Instruction Guide exp	lains how to comp	lete this form.		
1 Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	
Sch: 13/31 Rpt: 47/67	Rose, Ben	jamin				
4 Date	5 Payee nam	e				
10/10/2019	Facebook	Inc				
6 Amount (\$)	7 Payee addr	ess; City;	State; Zip Code			
\$35.00	1101 Wes	tlake Ave N				
	Seattle, W	A 98109-3527				
8 PURPOSE	(a) Category	See Categories listed at the top of t	this schedule) (b	) Description		
OF EXPENDITURE		g Expense	ľ		utside of Texas, Complete Schedule T.	
				Digital Adverti	TX, officeholder living expense	
				Digital / tavort	Jg	
9 Complete ONLY if direct	Candidate/O	fficeholder name	Office sough	t	Office held	
expenditure to benefit C/OI					<del></del>	
Date	Payee nam	e				<del></del>
10/11/2019	Facebook	Inc				
Amount (\$)	Payee addr	ess; City;	State, Zip Code	!	<del></del>	
\$50.00	1101 Wes	tlake Ave N				
					Mo	
	Seattle, W	/A 98109-3527				
PURPOSE	(a) Category	See Categories listed at the top of	this schedule) (b	) Description		
OF EXPENDITURE		g Expense			utside of Texas. Complete Schedule T.	
				Digital Advert	TX, officeholder living expense	
	,	•		Digital Advert	ising	
Complete ONLY if direct	Candidate/O	fficeholder name	Office sough	t	Office held	
expenditure to benefit C/O			<b>.</b>			4
Date	Payee nam	e	<del></del>			
10/13/2019	Facebook	Inc				
Amount (\$)	Payee add	ress; City;	State; Zip Code	;	<del>,</del>	
\$75.00	1101 Wes	tlake Ave N				
	Seattle, W	/A 98109-3527				
PURPOSE	(a) Category	(See Categories listed at the top of	this schedule) (t	) Description		
OF EXPENDITURE	Advertisin	g Expense			outside of Texas. Complete Schedule T.	
			}	Digital Advert	TX, officeholder living expense	
				2.5	·-····	
Complete ONLY if direct	Candidate/O	fficeholder name	Office sough	nt	Office held	
expenditure to benefit C/O						
	<del></del>					· · · · · · · · · · · · · · · · · · ·

### 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

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

	Candidate/Officeholder/Politica Credit Card Payment	al 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: 14/31 Rpt: 48/67	Rose, Benjamin	
4	<b>Date</b>	5 Payee name	
	10/14/2019	Facebook Inc	>
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$75.00	1101 Westlake Ave N	
			1
		Seattle, WA 98109-3527	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
1	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Digital Advertising	
		Digital Advertising	
L			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit 6/6		
	Date	Payee name	
	10/16/2019	Facebook Inc	
-	Amount (\$)	Payee address, City; State; Zip Code	
	\$125.00	1101 Westlake Ave N	
1			
		Seattle, WA 98109-3527	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
l		Check if Austin, TX, officeholder living expense Digital Advertising	
l		Digital Advertising	
L	O terro Cana Vitaliana		
1	Complete ONLY if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held	
L			
l	<b>Date</b>	Payee name	
	10/23/2019	Facebook Inc	
Γ	Amount (\$)	Payee address; City; State; Zip Code	
١	\$175.00	1101 Westlake Ave N	
		Seattle, WA 98109-3527	
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ł	OF	Advertising Expense  Advertising Expense  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
l		Digital Advertising	
一	Complete ONLY if direct	Candidate/Officeholder name - Office sought Office held	
1	expenditure to benefit C/O		
$\vdash$	<del></del>		
1			
L			

# POLITICAL EXPENDITURES FROM POLITICAL

	CONTRIBUTION	NS	SCHEDULE F1
<b>'</b>		40	
-		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Frinting Expense	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 F1:	2 FILER NAME	3 Filer ID
L	Sch: 15/31 Rpt: 49/67	Rose, Benjamin	
4	Date 10/25/2019	5 Payee name Facebook Inc	·
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	1101 Westlake Ave N Seattle, WA 98109-3527	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense ertising
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Г	Date	Payee name	
	10/18/2019	Google	
一	Amount (\$)	Payee address; City; State; Zip Code	
	\$350.00	20954 Spence Rd	
		Salinas, CA 93908-9720	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	al avaida of Tours Consultan Cabadal =
	EXPENDITURE	Advertising Expense	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense ertising
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Γ	Date	Payee name	
1	11/25/2019	Google	
一	Amount (\$)	Payee address; City; State; Zip Code	<del></del>
	\$25.89	20954 Spence Rd	
L		Salinas, CA 93908-9720	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF . EXPENDITURE	Advertising Expense Check if trav	rel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
		Digital Adve	=:using
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

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### SCHEDULE F1

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explain	Office Overhe Polling Exper Printing Expe Salaries/Wag	ense ges/Contract Labor		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 F1:	2	FILER NAME	<del></del>		3	Filer ID
	Sch: 16/31 Rpt: 50/67	1	Rose, Benjamin				
4	Date	5	Payee name		· · · · · · · · · · · · · · · · · · ·		<u> </u>
	12/19/2019	1	Google				
6	Amount (\$) \$1,657.59	7	Payee address; City; State 20954 Spence Rd	ite; Zip Code	9		4
			Salinas, CA 93908-9720				
8	PURPOSE OF EXPENDITURE	(a,	Category (see Categories listed at the top of this s Advertising Expense	schedule) (I		n, TX	side of Texas, Complete Schedule T. K, officeholder living expense ng
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sough	nt		Office held
٢	Date	Γ	Payee name				
L	12/13/2019		Google				
ſ	Amount (\$)			ate; Zip Code	e		
	\$38.38		20954 Spence Rd Salinas, CA 93908-9720				
	PURPOSE OF	(a,	Category (See Categories listed at the top of this	schedule) (l	b) Description	٠	ide of Toyac Complete Sabadata T
1	EXPENDITURE		Office Overhead/Rental Expense	1	<u> </u>		side of Texas. Complete Schedule T. K, officeholder living expense
L	101				Email		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sough	ht		Office held
	Date		Payee name				
L	10/28/2019	L	Grigsby, Courtney				
	Amount (\$) \$4,000.00		Payee address; City; Sta 123 No Address	ate; Zip Code	e	- <b>-</b>	
		L	Houston, TX 77777				
	PURPOSE OF EXPENDITURE	(a	Category (See Categories listed at the top of this Consulting Expense	schedule)		n, TX	side of Texas. Complete Schedule T. K, officeholder living expense Itant
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	Office sough	ht		Office held
		_					

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### SCHEDULE F1

	EXPENDITURE CATEGO	PRIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor s 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 F1:	2 FILER NAME	3	Filer ID
Sch: 17/31 Rpt: 51/67	Rose, Benjamin		•
1 Date	5 Payee name		
11/20/2019	Grigsby, Courtney		
6 Amount (\$) \$4,000.00	123 No Address	e; Zip Code	
	Houston, TX 77777		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Consulting Expense	Check if travel ou	ntside of Texas. Complete Schedule T. 'X, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
07/02/2019	Hansen, Renee		
Amount (\$) \$4,000.00	Payee address; City; Stat 1529 Ebony Ln Houston, TX 77018-5816	e; Zip Code	
PURPOSE	(a) Category (See Categories listed at the top of this se	chedule) (b) Description	
OF EXPENDITURE	Consulting Expense	Check if travel ou	rtside of Texas. Complete Schedule T. FX, officeholder living expense ONSultant
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
07/31/2019	Hansen, Renee		
Amount (\$) \$4,000.00	Payee address; City; Stat 1529 Ebony Ln	e; Zip Code	
	Houston, TX 77018-5816		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Consulting Expense	Check if travel or	utside of Texas. Complete Schedule T. TX, officeholder living expense ONSu <b>l</b> tant
	1		

### SCHEDULE F1

Advertising Expense Accounting/Banking

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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 18/31 Rpt: 52/67	Rose, Benjamin
4	Date	5 Payee name
	08/30/2019	Hansen, Renee
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,000.00	1529 Ebony Ln
		·
l		Houston, TX 77018-5816
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Fundraising Consultant
Ļ		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Γ	Date	Payee name
	10/02/2019	Hansen, Renee
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	1529 Ebony Ln
ŀ		Houston, TX 77018-5816
厂	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
l		Fundraising Consultant
L	Complete ONLY if direct	Condidate (Office helder agent)
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
L	11/05/2019	Hansen, Renee
	Amount (\$)	Payee address; City; State, Zip Code
١	\$4,000.00	1529 Ebony Ln
l		
		Houston, TX 77018-5816
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Fundraising Consultant
l		, diditability consultant
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
$\vdash$		

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### SCHEDULE F1

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

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

Event Expense
Fees
Food/Beverage Expense
Gitt/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
OTHED (expense a category not listed above)

	Candidate/Officeholder/Political Credit Card Payment		Legal Services  The Instruction Guide 6	Salaries/M	/ages/	Contract Labor	OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM		<del></del>		[3	Filer ID	
_	Sch: 19/31 Rpt: 53/67	Rose, Benj				ا	· · · · · · ·	
4	Date			<del></del>		L		$\dashv$
7	11/11/2019	5 Payee name Hansen, R						
_				C1-1 7!- C				
6	Amount (\$)	7 Payee addre	•	State; Zip Co	ae			
	\$3,000.00	1529 Ebon	y Ln				. (*	
		l						N
_		Houston, T	X 77018-5816					
8	PURPOSE OF		See Categories listed at the top	of this schedule)	(b)	Description		
	EXPENDITURE	Consulting	Expense				ide of Texas. Complete Schedule T. , officeholder living expense	
						Fundraising Cor		
9	Complete ONLY if direct		ficeholder name	Office sou	ght		Office held	
L	expenditure to benefit C/OI	<del></del>						
	Date	Payee name						
L	10/14/2019	Harris Cou	nty Democratic Lawy	ers Association	1			
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de	,		
	\$500.00	3402 Allen	Pkwy		Mar.			
		Ste 100						
		Houston, T	X 77019-1808					
Г	PURPOSE	(a) Category (	See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE		ns/Donations Made			$\sqsubseteq$	ide of Texas. Complete Schedule T.	
		Candidate	Officeholder/Politica	I Committee		Donation	, officeholder living expense	
1						Sonation		
┝	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	L		Office held	
1	expenditure to benefit C/O			Jinec 300	A		Since field	
	Date	Davisans		<del></del>				
	Date 12/06/2019	Payee name		v.			•	
Ш			inty Democratic Party					
	Amount (\$)	Payee addr	•	State; Zip Co	ode			
	\$1,250.00	1445 North	Loop W					
		Ste 110						
L		Houston, 7	X 77008-1654					
	PURPOSE	(a) Category (	See Categories listed at the top	of this schedule)	(b)	Description		
l	OF EXPENDITURE	Fees					ide of Texas. Complete Schedule T.	
						Filing fee	, officeholder living expense	
$\vdash$	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ight		Office held	
	expenditure to benefit C/O				<b>J</b>			
<u> </u>		<del>-</del>					· · · · · · · · · · · · · · · · · · ·	
L		~						

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### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense

Advertising Expense Accounting/Banking Transportation Equipment & Related Expense Polling Expense
Printing Expense
Salaries/Wages/Contract Labor Consulting Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 20/31 Rpt: 54/67 Rose, Benjamin 4 Date Payee name 07/31/2019 Hilton-San Diego Bayfront 6 Amount (\$) Payee address; City; State; Zip Code \$261.03 1 Park Blvd San Diego, CA 92101-7897 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. Travel Out of District **EXPENDITURE** Check it Austin, TX, officeholder living expense Hotel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/01/2019 Hilton-San Diego Bayfront Amount (\$) Payee address; State; \$366.35 1 Park Blvd San Diego, CA 92101-7897 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Hotel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/01/2019 IAH Parking Amount (\$) Payee address: City: State: Zip Code \$110.00 2800 N Terminal Rd Houston, TX 77032-5569 **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 Parking Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Forms provided by Texas Ethics Commission

## SCHEDULE F1

CONTRIBUTION	N.J							
		EXPENDITURE	CATEGORIES F	OR BO	X 8(a)	<del></del>		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Exp Legal Services The Instruction Guide	Loan I Office Polling Printir Salari	Repaymen Overhead g Expense ng Expense ies/Wages/	nt/Reimbursement d/Rental Expense e e /Contract Labor	Transportation E Travel in District Travel Out of Dis		
1 Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID		
Sch: 21/31 Rpt: 55/67	Rose, Benj	amin			}			
4 Date 07/11/2019	5 Payee name	· · · · · · · · · · · · · · · · · · ·	<del></del>					
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip	Code			<del> </del>	
\$450.00	PO Box 39							
8 PURPOSE	<del></del>	See Categories listed at the t	op of this schedule)	(b)	Description	<del></del>		
OF EXPENDITURE		rhead/Rental Expe			Check if travel of	outside of Texas. Com , TX, officeholder living tware		
Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office	sought		Office h	eld	
Date	Payee name							
09/17/2019	NGP VAN					_	_	
Amount (\$)	Payee addre	ess; City;	State, Zip	Code				
\$450.00	PO Box 39 Pittsburgh,	2264 PA 15251-9264	<b>\</b>		<b>&gt;</b>		_	
PURPOSE	(a) Category (	See Categories listed at the	top of this schedule)	(b)	Description			
OF EXPENDITURE		rhead/Rental Expe				outside of Texas. Com i, TX, officeholder living tware		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Office	sought		Office h	eld	
Date	Payee name	<del></del>	<del> </del>					
10/09/2019	Office Dep	ot						
Amount (\$) \$39.36	Payee addr 1401 N Lo		State; Zíp	Code			4	
	Houston, 1	<del> </del>		<del></del>				
PURPOSE OF EXPENDITURE		See Categories listed at the rhead/Rental Expe		(b)		outside of Texas. Con n, TX, officeholder livin CS		
Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office	sought		Office h	neld	
	,					<del> </del>		

### SCHEDULE F1

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

**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)

The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Rose, Benjamin Sch: 22/31 Rpt: 56/67 Payee name 10/31/2019 Office Depot 6 Amount (\$) Payee address; State; Zip Code City; \$26.80 1401 N Loop W, Houston, TX 77008 **PURPOSE** 8 (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 Office supplies Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/26/2019 Office Depot Amount (\$) Payee address; City; State; Zip Code \$43.95 1401 N Loop W, Houston, TX 77008 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Printing Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 07/30/2019 Office Depot Amount (\$) Payee address; City; State; Zip Code \$22.73 1401 N Loop W. Houston, TX 77008

PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name

Office sought

Office held

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### SCHEDULE F1

Advertising Expense Accounting/Banking

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political		Food/Beverage Expens Gift/Awards/Memorials Legal Services	Expense 5	Polling Expense Printing Expense Salaries/Wages/	e	Travel in District Travel Out of District OTHER (enter a category n	ot listed above)
Credit Card Payment		The Instruction Gu		_		2 (cinc) a oalegoly n	
1 Total pages Schedule F1:	2 FILER NAM	E	······································	,		3 Filer ID	· · · · · · · · · · · · · · · · · · ·
Sch: 23/31 Rpt: 57/67	Rose, Benj	amin					
4 Date	5 Payee name	1					
08/02/2019	Sixt Rent-A	\-Car					
6 Amount (\$)	7 Payee addre	ess; City;	State;	Zip Code	· · ·		· · · · · · · · · · · · · · · · · · ·
\$477.93	3355 Admi	ral Boland Way					
	·						
	San Diego	, CA 92101-1100	)			•	
8 PURPOSE	(a) Category	See Categories listed at t	he top of this sched	ule) (b)	Description		
OF EXPENDITURE	Travel Out				Check if travel	outside of Texas. Complete Sche	dule T.
		<b>V</b>			Check if Austin	n, TX, officeholder living expense	
		·			remai cai		
9 Complete ONLY if direct	Candidate/Of	ficeholder name		fice sought	<del></del>	Office held	
expenditure to benefit C/Oh		Stronger Harne	OI			Onice field	
Date	Payee name						
09/17/2019	Sprint 2 Pr	int				·	
Amount (\$)	Payee addre	•	State;	Zip Code			
\$963.63	8748 Clay	Rd					
	Ste 300						
	Houston, T	X 77080-8106			<u> </u>		
PURPOSE	(a) Category (s	See Categories listed at t	he top of this sched	iule) (b)	Description		
OF EXPENDITURE	Advertising	j Expense			<u></u>	outside of Texas, Complete Sche	dule T.
					Yard signs	n, TX, officeholder living expense	
Complete ONLY if direct		ficeholder name	Of	fice sought	·	Office held	
expenditure to benefit C/OI	H 						
Date	Payee name	<b>3</b>			,		
09/03/2019	Squarespa						
Amount (\$)	Payee addr	ess; City;	State;	Zip Code			
\$124.70	268 89th S	St					
			•				
	Brooklyn, I	NY 11209-5612	_				
PURPOSE	(a) Category (	See Categories listed at t	the top of this sched	(b) (slut	Description		
OF EXPENDITURE	Advertising				<u> </u>	I outside of Texas. Complete Sche	edule T.
					Web domain	n, TX, officeholder living expense	
					uviilaii.	-	
Complete ONLY if direct	Candidate/Of	fficeholder name	Of	ffice sought		Office held	
expenditure to benefit C/OI			J.	<b>5</b> '''			
					·	<u> </u>	
	7	<del>,</del>					

### 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/Political		Gift/Awards/Memorial Legal Services		Printing Exp Salaries/Wa	ense ges/Contract Labor	Travel Out of District OTHER (enter a catego	ry not listed above)
Credit Card Payment		The Instruction G	iuide explains ho	ow to com	plete this form.		
1 Total pages Schedule F1:	2 FILER NAM	E				3 Filer ID	
Sch: 24/31 Rpt: 58/67	Rose, Ben	amin					
4 Date	5 Payee name		· <del>- · · · ·</del>				
09/03/2019	Squarespa						
6 Amount (\$)	7 Payee addre	ess; City;	State;	Zip Cod	e	· · · · · · · · · · · · · · · · · · ·	
\$108.81	268 89th S	•	·	•			
	Brooklyn, i	NY 11209-5612					
8 PURPOSE				1	b) Description		
OF	Advertising	See Categories listed at	the top of this sched	iule)		vel outside of Texas. Complete S	chedule T.
EXPENDITURE	7.0.1011119	LAPONOC		İ	Check if Au	stin, TX, officeholder living expen	se
					Web doma	in	
9 Complete ONLY if direct		ficeholder name	Of	fice soug	ht	Office held	
expenditure to benefit C/O	H		<u>}</u>				
Date	Payee name				<del></del>		
07/11/2019	Texas Der	nocratic Party					
Amount (\$)	Payee addr	ess; City;	State;	Zip Cod	le		
\$775.00	1106 Lava	ca St		× _/>			
	Austin, TX	78701-2169					
PURPOSE	(a) Category	See Categories listed at	the top of this sched	dule) (	(b) Description		
OF EXPENDITURE	Fees		•		A0000 000	vel outside of Texas. Complete S	
EXI ENDITORE				1		stin, TX, officeholder living expen	se
					Voter file		
Consolinto CNII V if discont	04-4-4-4-4	e - h - l d				0/5-21-14	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ficeholder name	Of	fice soug	ınt	Office held	
	<del></del>	<del></del>					
Date	Payee nam						
09/19/2019	Tony's Re						
Amount (\$)		ess; City;	State;	Zip Coo	le		
\$1,000.00	3755 Rich	mond Ave					
	l 					4	
	Houston, 7	X 77046-3703					
PURPOSE	(a) Category (	See Categories listed a	the top of this sche	dule)	(b) Description		
OF EXPENDITURE	Solicitation	/Fundraising Ex	pense	- 1		ivel outside of Texas. Complete S	
				1	·	ustin, TX, officeholder living expen Ig event expense	ise
					ranarasin	ig event expense	
Complete ONLY if direct	Candidate/O	ficeholder name	OI	ffice soug	ıht	Office held	
expenditure to benefit C/O			0		,- ·•	Since field	
	<u>-</u>			····			
	<u> </u>						

Forms provided by Texas Ethics Commission

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		nmittee	Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	ense	Polling Ex Printing Ex Salaries/M	kpense			Trave	l in District Out of Distri R (enter a ca	ict ategory not liste	d above)	
	Credit Card Payment			The Instruction Guide	explains t	now to co	mple	te this form.						
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer	ID			
	Sch: 25/31 Rpt: 59/67		Rose, Benj	amin					1					
4	Date	5	Payee name	)		· · · · · · · · · · · · · · · · · · ·								
	07/10/2019		Tony's Res	staurant										
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de							
	\$73.54		3755 Richr	mond Ave										
			Houston, T	X 77046-3703										
8	PURPOSE	(a)	Category (s	See Categories listed at the to	op of this sche	edule)	(b)	Description						
	OF EXPENDITURE		Food/Beve	rage Expense				<u> </u>				ete Schedule T.		
						İ	l	Check if Austing			ioluer living e	xpense		
								r unununung		••				
┢	Complete ONLY if direct	۲	`andidate/Of	ficeholder name		Office sou	L				Office held	ď		
Ľ	expenditure to benefit C/OI		Sandidate/Of	meenolder name		7111CE 300	yıı.					<u> </u>		
	Date	Г	Payee name	=										
	09/12/2019		Tony's Res	staurant										
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	ode							
ļ	\$170.31		3755 Richr	mond Ave										
				•										
			Houston, T	X 77046-3703										
۲	PURPOSE	(a)		See Categories listed at the to		- 4. 4-3	(h)	Description						
	OF	<b> </b> ```		rage Expense	op or mis sem	edule)	'	`	l outsi	ide of 1	rexas. Compt	lete Schedule T.		
ļ	EXPENDITURE	1	1 000,000	nago Enponso				Check if Austi	n, TX	office	holder living e	expense		
								Meeting exp	ens	е				
									_					
	Complete ONLY if direct		Candidate/Of	ficeholder name	C	Office sou	ıght				Office hel	d		
L	expenditure to benefit C/O													
Γ	Date	Γ	Payee name	e										
l	07/26/2019		Tony's Res	staurant										
┢	Amount (\$)	Г	Payee addr	ess; City;	State;	Zip Co	ode	<del></del>				<del> </del>		
1	\$66.13		3755 Rich	mond Ave										
l		ĺ												
ĺ			Houston, 1	TX 77046-3703										
┝	PURPOSE	(a		See Categories listed at the t			(b)	Description		-				
	OF	```		see Categories listed at the ti grage Expense	op of this sch	edule)	`"	_	el outsi	ide of '	Texas. Compl	lete Schedule T.		
1	EXPENDITURE	Ì	1 000/000	rage Expense				Check if Aust						
							ļ	Fundraising	mea	al				
							[							
Г	Complete ONLY if direct		Candidate/Of	ficeholder name	-	Office sou	ught				Office hel	ld		<u></u>
	expenditure to benefit C/O	H												
Г	<del></del>										,,, <u>,,,</u>			

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### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	- Gitt/Awards/Memorials Expense Printing Expense Travel In Ustroit - Gitt/Awards/Memorials Expense Printing Expense Travel Out of District - 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: 26/31 Rpt: 60/67	Rose, Benjamin
4	Date	5 Payee name
	12/11/2019	Traci Ling Photography
6	· ·	7 Payee address; City; State; Zip Code
	\$250.00	123 No Address  Houston, TX 77777
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder fiving expense  Photography
_ 9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/OF	
	Date	Payee name
	08/30/2019	Traci Ling Photography
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	123 No Address
		Houston, TX 77777
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	4	Website Photography
_	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 08/09/2019	Payee name US Post Office
<u> </u>	Amount (\$) \$12.60	Payee address; City; State; Zip Code 2499 Judiway St
		Houston, TX 77018-5840
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Office postage
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Consulting Expense Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment  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 F1: 2 FILER NAME Sch: 27/31 Rpt: 61/67 Rose, Benjamin 3 Filer ID
4 Date
6 Amount (\$)  7 Payee address; City; State; Zip Code  \$7.35  499 Judiway St  Houston, TX 77018-5840
8 PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Office Postage  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office postage
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH
Date Payee name 10/25/2019 US Post Office
Amount (\$) Payee address; City; State; Zip Code \$55.00 \$499 Judiway St  Houston, TX 77018-5840
PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Office postage
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH
Date Payee name 11/05/2019 US Post Office
Amount (\$) Payee address; City; State; Zip Code \$55.00 2499 Judiway St  Houston, TX 77018-5840
PURPOSE OF EXPENDITURE  (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office postage
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District Committee Legal Services Printing Expense Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 28/31 Rpt: 62/67	2 FILER NAME Rose, Benjamin
4	Date 07/26/2019	5 Payee name US Post Office
6	Amount (\$) \$55.00	7 Payee address; City; State; Zip Code 2499 Judiway St  Houston, TX 77018-5840
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Postage
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date 08/13/2019	Payee name US Post Office
	Amount (\$) \$11.00	Payee address; City; State: Zip Code 2499 Judiway St
		Houston, TX 77018-5840
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Postage
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/04/2019	Payee name US Post Office
	Amount (\$) \$55.00	Payee address; City; State; Zip Code 2499 Judiway St  Houston, TX 77018-5840
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense postage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	

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### SCHEDULE F1

•	CONTRIBUTION	
		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense
	Consulting Expense	Food/Beverage Expense Polling Expense Travel in District
	Contributions/ Donations Made By Candidate/Officeholder/Political	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 29/31 Rpt: 63/67	Rose, Benjamin
4	Date	5 Payee name
·	07/29/2019	United Airlines Inc
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$801.60	233 S Wacker Dr
		Chicago, IL 60606-7147
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   X Check if travel outside of Texas. Complete Schedule T.
		Campaign trip to attend conference to fundraise for
		campaign
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/29/2019	United Airlines Inc
_	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	233 S Wacker Dr
	4200.00	
		Chicago, IL 60606-7147
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Airline fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
=	Date	
	07/24/2019	Payee name United Airlines Inc
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$545.60	233 S Wacker Dr
		Chicago, IL 60606-7147
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		General Consultant travel
L	Computer Other Wilder	Condition (Office holder and
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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### SCHEDULE F1

Advertising Exp	
Accounting/Ban	king
Consulting Expe	ense
Contributions/ D	onations Made By -
Candidate/O	fficeholder/Political Committee
Credit Card Pay	ment

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

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

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

The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 30/31 Rpt: 64/67 Rose, Benjamin Payee name 07/25/2019 **United Airlines Inc** Payee address: 6 Amount (\$) Citv: State: Zip Code \$200.00 233 S Wacker Dr Chicago, IL 60606-7147 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense General Consultant travel Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/10/2019 Wayfair Amount (\$) Payee address; City; State: Zip Code \$324.72 4 Copley PI FI7 Boston, MA 02116-6504 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Office furniture Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/26/2019 Wayfair Amount (\$) Payee address; City; State; Zip Code \$246.79 4 Copley Pl FI 7 Boston, MA 02116-6504

expenditure to benefit C/OH

Complete ONLY if direct

**PURPOSE** 

OF

**EXPENDITURE** 

Candidate/Officeholder name

(a) Category (See Categories listed at the top of this schedule)

Office Overhead/Rental Expense

Office sought

(b) Description

Office furniture

Office held

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

### SCHEDULE F1

Advertising Expense

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Exp

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Ex Legal Services Salaries/M		lling Expense inting Expens laries/Wages	e /Contract Labor	Travel in District Travel Out of Di	Travel in District Travel Out of District OTHER (enter a category not listed above)		
	· · · · · · · · · · · · · · · · · · ·	The Instruction Guid	e explains how	to comple					
1 Total pages Schedule F1:	2 FILER NAME					3 Filer ID			
Sch: 31/31 Rpt: 65/67	Rose, Benja	amin							
4 Date	5 Payee name								
08/15/2019	Wolf, Josep	h							
6 Amount (\$)	7 Payee addre	ss; City;	State; Z	ip Code					_
\$5,000.00	810 E Palm	•	·	•					
	Phoenix, Az	2 85006-2113	····						
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Consulting Expense  Check if Austin, TX, officeholder living expense  General Consultant								
9 Complete ONLY if direct expenditure to benefit C/O		ceholder name	Offic	e sought		Office h	eld		
Date 09/17/2019	Payee name Wolf, Josep	A				•			
Amount (\$) \$2,500.00	Payee addre 810 E Palm Phoenix, A		State; Z	Cip Code		C	0		
PURPOSE				. (b)	Description				
OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  General Consultant								
Complete ONLY if direct expenditure to benefit C/C		ceholder name	Offic	ce sought		Office h	eld		
Date 07/15/2019	Payee name Wolf, Josep		· · · · · · · · · · · · · · · · · · ·						
Amount (\$) \$5,000.00	Payee addre 810 E Palm		State; Z	Zip Code					
	Phoenix, A	Z 85006-2113							
PURPOSE OF EXPENDITURE	(a) Category (s Consulting	ee Categories listed at the Expense	top of this schedu	(b)		outside of Texas. Cor n, TX, officeholder livin sulting			
Complete ONLY if direct expenditure to benefit C/C		iceholder name	Offic	ce sought		Office h	neld	··· <u>·</u>	
	····		<del></del>		, , , , , , , , , , , , , , , , , , ,				

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# IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

FOR TRAVEL OUTSIDE OF TEXAS									
The Instruction Guide explains how to complete th	s form.  1 Total pages Schedule T: Sch: 1/1 Rpt: 66/67								
2 FILER NAME	3 Filer ID								
Rose, Benjamin									
4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee United Airlines Inc									
5 Contribution / Expenditure reported on:									
Schedule A2 Schedule B Schedule B(J)	Schedule C2 Schedule D X Schedule F1								
Schedule F2 Schedule F4 Schedule G	Schedule H Schedule COH-UC								
6 Dates of Travel 7 Name of person(s) traveling Rose, Ben									
8 Departure city or name of departure location	<del>,</del>								
07/26/2019 Houston									
9 Destination city or name of destination location 07/30/2019 San Diego									
10 Means of transportation	erence, seminar, or other event)								
Commercial Airplane Campaign trip to attend conference to fundraise for campaign.									

### **TEXT ANNOTATION** Sch: 1/1 Rpt: 67/67 FILER NAME Filer ID Rose, Benjamin Schedule Α1

Information entered by filer as a memo:

The contribution received from Small Independent Motel Association was inadvertently deposited and returned on January 14, 2020.

# WOFFICIAL

### RECORDER'S MEMORANDUM:

At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction hecause of illegibility, carbon or photography, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded. the instrument was filed and recorded.

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