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Official Public Records of  
Harris County  
Diane Trautman  
County Clerk

## Campaign Finance Report



*Diane Trautman*

COUNTY CLERK  
HARRIS COUNTY, TEXAS

FileNo: 2019243  
Received By Clerk: 7/15/2019  
File Date: July 15, 2019  
Office: County Tax Assessor-Collector  
Candidate: Bennett, Ann Harris  
Treasurer: Thurlow, Thomas N.  
Category: Contributions And Expenditures  
Delivered By: Courier  
Type: COR

Harris County No Fee

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID		2 Total pages filed: 32	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI		OFFICE USE ONLY
	NICKNAME	LAST	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;			ZIP CODE	Date Hand-delivered or Date Postmarked
	4900 Woodway Dr				Receipt #
	Ste 1040				Amount
	Houston, TX 77056				Date Processed
5 CAMPAIGN TREASURER NAME	MS / MRS (MR)	FIRST	MI		Date Imaged
	NICKNAME	LAST	SUFFIX		
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
	4900 Woodway Dr #1040 Houston TX 77056				
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	Month	Day
10 ELECTION	ELECTION DATE			ELECTION TYPE	
	Month	Day	Year		
	03/03/2020				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)	
	Tax Assessor/Collector & Voter Registrar Harris			Harris Co Tax Assessor/Collector & Voter Registrar	
GO TO PAGE 2					

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 32

13 C / OH NAME	Bennett, Ann Harris	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)  
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

☐ Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
COMMITTEE ADDRESS	
COMMITTEE CAMPAIGN TREASURER NAME	
COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 21,925.51
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 2,108.79
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,205.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 37,313.93
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

## 17 AFFIDAVIT

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

Ann Harris Bennett  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ann Harris Bennett, this the 15 day of July, 20 19, to certify which, witness my hand and seal of office.

Leigh Gaskin  
Signature of officer administering

Leigh Gaskin  
Printed name of officer administering



**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

3 of 32

**18 FILER NAME**

Bennett, Ann Harris

**19 Filer ID****20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,059.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,866.51
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 10,063.98
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 9,142.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 10.76

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 1/11 Rpt: 4/32

2 FILER NAME

Bennett, Ann Harris

3 Filer ID

4 Date  
06/22/2019

5 Full name of contributor  
Adjei, Denise (Ms.)

☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of Contribution (\$)

\$150.00

6 Contributor address; City; State; Zip Code  
PO Box 24662

Houston, TX 77229

8 Principal occupation / Job title (See Instructions)  
Retired

9 Employer (See Instructions)  
Retired

Date  
05/31/2019

Full name of contributor  
Banyai, Jacob (Mr.)

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$1.00

Contributor address; City; State; Zip Code  
1977 E Vinedo Ln

Tempe, AZ 85284

Principal occupation / Job title (See Instructions)  
N/A

Employer (See Instructions)  
N/A

Date  
06/04/2019

Full name of contributor  
Behrman, John (Mr.)

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code  
1302 Waugh Dr  
Ste 298  
Houston, TX 77019

Principal occupation / Job title (See Instructions)  
Economist

Employer (See Instructions)  
Retired

Date  
06/12/2019

Full name of contributor  
Bennett, Ann Harris (The Honorable)

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$20.00

Contributor address; City; State; Zip Code  
1001 Preston St

Houston, TX 77002

Principal occupation / Job title (See Instructions)  
Tax Assessor-Collector & Voter Registrar

Employer (See Instructions)  
Harris Co

Date  
06/04/2019

Full name of contributor  
Berg, Tom (Mr.)

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$100.00

Contributor address; City; State; Zip Code  
926 Knox S

Houston, TX 77007

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/11 Rpt: 5/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/12/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Darryl (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 306 W Pierce  Houston, TX 77019	<b>7</b> Amount of Contribution (\$)  \$2,500.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self-Employed
Date 06/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bobbie (Ms.) <hr/> Contributor address; City; State; Zip Code 7622 Coachwood Dr  Houston, TX 77071	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 04/26/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Deniza (Ms.) <hr/> Contributor address; City; State; Zip Code 15014 Moss Boulder Ct  Houston, TX 77084	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) State Farm Ins
Date 04/28/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cones, Marian (Ms.) <hr/> Contributor address; City; State; Zip Code 1326 Moorhead Dr  Houston, TX 77055	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) CourthouseDirect.com
Date 06/11/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conwell, Tracey (Ms.) <hr/> Contributor address; City; State; Zip Code 1203 Heights Blvd  Houston, TX 77008	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/11 Rpt: 6/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/12/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Roosevelt (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code PO Box 88094 Houston, TX 77288	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Houston Citizens Chamber of Commerce, Inc.
Date 06/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrani, Afaq (Mr.) <hr/> Contributor address; City; State; Zip Code 1818 Parklake Village Dr Katy, TX 77450	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Asian Am Dems of TX
Date 06/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farenthold, Emilie (Ms.) <hr/> Contributor address; City; State; Zip Code 2929 Buffalo Spdwy Ste 1853 Houston, TX 77098	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/13/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foney, Eugene (Mr.) <hr/> Contributor address; City; State; Zip Code PO Box 131914 Houston, TX 77219	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) Artcetera
Date 06/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklin, Dionne <hr/> Contributor address; City; State; Zip Code 16907 Langham Heights Ln Houston, TX 77084	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/11 Rpt: 7/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/19/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodrich Sr., Earnest (Mr.)  <b>6</b> Contributor address; City; State; Zip Code 19935 Mountain Dale Dr  Cypress, TX 77433	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) N/A		<b>9</b> Employer (See Instructions) N/A
<b>Date</b> 06/11/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Guttman, Alan (Mr.)  <b>Contributor address; City; State; Zip Code</b> 5839 Wigton  Houston, TX 77096	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Self-Employed
<b>Date</b> 05/06/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hagans, William (Mr.)  <b>Contributor address; City; State; Zip Code</b> 3200 Travis St 4th Fl Houston, TX 77006	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Principal		<b>Employer (See Instructions)</b> Hagans Montgomery & Rustay
<b>Date</b> 06/12/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Ursula (The Honorable)  <b>Contributor address; City; State; Zip Code</b> PO Box 233  Houston, TX 77001	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Assoc Muni Judge		<b>Employer (See Instructions)</b> City of Houston
<b>Date</b> 06/12/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Marcus (Mr.)  <b>Contributor address; City; State; Zip Code</b> 11901 Chisel Rdg  Pearland, TX 77584	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> N/A		<b>Employer (See Instructions)</b> N/A



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/11 Rpt: 8/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/04/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatlen, Leif (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 13527 N Tracewood Bnd Houston, TX 77077	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 06/17/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfman, Alan (Mr.) <hr/> Contributor address; City; State; Zip Code 8727 Crescent Gate Ln Houston, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Helfman Dodge Chrysler Jeep Ram
Date 01/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helfman, Alan (Mr.) <hr/> Contributor address; City; State; Zip Code 8727 Crescent Gate Ln Houston, TX 77024	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Helfman Dodge Chrysler Jeep Ram
Date 06/10/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hrabar, Stephanie (Ms.) <hr/> Contributor address; City; State; Zip Code 5005 Georgi Ln Ste 63 Houston, TX 77092	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Barbara (Ms.) <hr/> Contributor address; City; State; Zip Code 16127 Diamond Rdg Dr Houston, TX 77053	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Exec Asst		Employer (See Instructions) Harris Co. Tax Assessor/Collector & Voter Registrar

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/11 Rpt: 9/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/12/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Barbara (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 16127 Diamond Rdg Dr  Houston, TX 77053	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Exec Asst		<b>9</b> Employer (See Instructions) Harris Co. Tax Assessor/Collector & Voter Registrar
<b>Date</b> 05/27/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Barbara (Ms.) <hr/> <b>Contributor address; City; State; Zip Code</b> 16127 Diamond Rdg Dr  Houston, TX 77053	<b>Amount of Contribution (\$)</b>  \$150.00
<b>Principal occupation / Job title (See Instructions)</b> Exec Asst		<b>Employer (See Instructions)</b> Harris Co. Tax Assessor/Collector & Voter Registrar
<b>Date</b> 06/22/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Khatami, Sharareh (Ms.) <hr/> <b>Contributor address; City; State; Zip Code</b> 12303 Longworth Ln  Houston, TX 77024	<b>Amount of Contribution (\$)</b>  \$200.00
<b>Principal occupation / Job title (See Instructions)</b> Self-Employed		<b>Employer (See Instructions)</b> Self-Employed
<b>Date</b> 06/12/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyles, Dianne (Ms.) <hr/> <b>Contributor address; City; State; Zip Code</b> 18618 Copano Ln  Spring, TX 77379	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> N/A		<b>Employer (See Instructions)</b> N/A
<b>Date</b> 06/13/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Matula, Sherrie (The Honorable) <hr/> <b>Contributor address; City; State; Zip Code</b> 15918 Cavendish Dr  Houston, TX 77259-4615	<b>Amount of Contribution (\$)</b>  \$250.00
<b>Principal occupation / Job title (See Instructions)</b> Educator		<b>Employer (See Instructions)</b> Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/11 Rpt: 10/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/12/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mauzy, Olga (Ms.)</b> <hr/> <b>6</b> Contributor address; City; State; Zip Code 2211 Tannehill Dr Houston, TX 77008-3046	<b>7</b> Amount of Contribution (\$)  \$575.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 06/06/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Morin, Thomas (Mr.)</b> <hr/> Contributor address; City; State; Zip Code 3743 Purdue St Houston, TX 77005	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Daily Ct Review, Inc.
Date 06/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Moroney, Muffie (Ms.)</b> <hr/> Contributor address; City; State; Zip Code 4010 Whitman St Houston, TX 77027	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed
Date 06/05/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Morrison, Mary (Ms.)</b> <hr/> Contributor address; City; State; Zip Code 5823 Doliver Houston, TX 77057	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) HR Mgr		Employer (See Instructions) American bureau of shipping
Date 05/20/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Odam, John (Mr.)</b> <hr/> Contributor address; City; State; Zip Code 3960 W Alabama St Houston, TX 77027	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/11 Rpt: 11/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/12/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pando, Robert (Mr.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 1423 W Alabama St Houston, TX 77008-4103	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) N/A		<b>9</b> Employer (See Instructions) N/A
Date 06/12/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pando, Robert (Mr.) <hr/> Contributor address; City; State; Zip Code 1423 W Alabama St Houston, TX 77008-4103	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 05/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pittman, Shaunda (Ms.) <hr/> Contributor address; City; State; Zip Code 8544 W Bellfort Houston, TX 77071	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Creative Body Image
Date 06/07/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reese, Barry (Mr.) <hr/> Contributor address; City; State; Zip Code 100 La Salle NY, NY 10027	Amount of Contribution (\$)  \$23.00
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A
Date 06/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowan, Trenea (Ms.) <hr/> Contributor address; City; State; Zip Code 1915 Millhouse Rd Houston, TX 77073-1527	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/11 Rpt: 12/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID
<b>4</b> Date 06/06/2019	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samandari, Sudy (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code 2425 Southgate Blvd  Houston, TX 77030	<b>7</b> Amount of Contribution (\$)  \$125.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) On Sunset Boulevard, Inc.
Date 06/22/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Penny (Ms.) <hr/> Contributor address; City; State; Zip Code PO Box 925652  Houston, TX 77292-5652	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Law Office of Penny Shaw
Date 06/09/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snively, Judith (Ms.) <hr/> Contributor address; City; State; Zip Code 1966 W Mckinney #C  Houston, TX 77019	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris Co
Date 05/31/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Kenneth (Mr.) <hr/> Contributor address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed
Date 04/15/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stewart, Kenneth (Mr.) <hr/> Contributor address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Self-Employed		Employer (See Instructions) Self-Employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

**The Instruction Guide explains how to complete this form.**

1 Total pages Schedule A1:  
Sch: 10/11 Rpt: 13/32

2 FILER NAME

Bennett, Ann Harris

3 Filer ID

4 Date  
06/12/2019

5 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Texans for Fairness

7 Amount of Contribution (\$)  
\$1,500.00

6 Contributor address; City; State; Zip Code  
16335 Lasting Light Ln  
Houston, TX 77095

8 Principal occupation / Job title (See Instructions)  
Taxpayer Advocates

9 Employer (See Instructions)  
Texans for Fairness

Date  
06/01/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Thomas, Lavon

Amount of Contribution (\$)  
\$250.00

Contributor address; City; State; Zip Code  
15422 Mauna Loa Ln  
Jersey Village, TX 77040

Principal occupation / Job title (See Instructions)  
Designer

Employer (See Instructions)  
Self-Employed

Date  
06/12/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Thurlow, Thomas (Mr.)

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
4900 Woodway Dr  
Ste 1040  
Houston, TX 77056

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
Retired

Date  
01/22/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Trinity Gardens Church of Christ

Amount of Contribution (\$)  
\$50.00

Contributor address; City; State; Zip Code  
7728 Sandra St  
Houston, TX 77016

Principal occupation / Job title (See Instructions)  
N/A

Employer (See Instructions)  
N/A

Date  
06/08/2019

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Veselka, Larry (Mr.)

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
3305 Robinhood St  
Houston, TX 77005

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Smyser Kaplan & Veselka LLP

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/32
2 FILER NAME Bennett, Ann Harris		3 Filer ID
4 Date 06/11/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Veleta (Ms.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 20 Barcelona Ct  Missouri City, TX 77459	
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A

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# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 15/32	
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 06/30/2019	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter Law Firm, The <hr/> <b>7</b> Contributor address; City; State; Zip Code 4900 Fournace Pl Ste 560 Bellaire, TX 77401	<b>8</b> Amount of contribution (\$) \$1,500.00 <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<b>9</b> In-kind contribution description Event Dcor, F & B and Staff
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorneys-at-Law		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) Carter Law Firm, The	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
<b>Date</b> 06/30/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Domestic Mgmt Svcs <hr/> <b>Contributor address; City; State; Zip Code</b> 3510 Ruth St Houston, TX 77004	<b>Amount of contribution (\$)</b> \$266.51 <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<b>In-kind contribution description</b> Communication & Outreach
<b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b> Consultants		<b>Employer (FOR NON-JUDICIAL) (See instructions)</b> Domestic Mgmt Svcs	
<b>Contributor's principal occupation (FOR JUDICIAL)</b>		<b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>	
<b>Contributor's employer/law firm (FOR JUDICIAL)</b>		<b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>	
<b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>			
<b>Date</b> 06/30/2019	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) UPMC LLC <hr/> <b>Contributor address; City; State; Zip Code</b> 2310 Richton Ste B Houston, TX 77098	<b>Amount of contribution (\$)</b> \$2,100.00 <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<b>In-kind contribution description</b> Meeting Space
<b>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</b> Meeting Venue		<b>Employer (FOR NON-JUDICIAL) (See instructions)</b> UPMC LLC	
<b>Contributor's principal occupation (FOR JUDICIAL)</b>		<b>Contributor's job title (FOR JUDICIAL) (See instructions)</b>	
<b>Contributor's employer/law firm (FOR JUDICIAL)</b>		<b>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</b>	
<b>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</b>			



## SCHEDULE F1

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

Version V1.1.0ef01a4a

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/6 Rpt: 17/32	<b>2</b> FILER NAME Bennett, Ann Harris	<b>3</b> Filer ID
<b>4</b> Date 04/02/2019	<b>5</b> Payee name Acres of Angels	
<b>6</b> Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; Zip Code PO Box 38027  Houston, TX 77238	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/20/2019	Candidate/Officeholder name Payee name Domestic Mgmt Svcs	Office sought Office held
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance & Finance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/31/2019	Candidate/Officeholder name Payee name Fletcher, Shaunda (Ms.)	Office sought Office held
Amount (\$) \$275.00	Payee address; City; State; Zip Code 8544 W Bellfort  Houston, TX 77071	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer Svcs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/6 Rpt: 18/32	<b>2</b> FILER NAME Bennett, Ann Harris	<b>3</b> Filer ID
<b>4</b> Date 04/30/2019	<b>5</b> Payee name Hanging Tough Garden Cottage, Inc.	
<b>6</b> Amount (\$) \$200.00	<b>7</b> Payee address; City; State; Zip Code 6642 Heron Dr  Houston, TX 77087-6532	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/12/2019	Payee name Harris Co Dem Party	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1445 N Loop W Ste 110 Houston, TX 77008	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2019	Payee name Mata, Norma (Ms.)	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 10959 Ella Blvd  Houston, TX 77067	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Labor
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/6 Rpt: 19/32	<b>2</b> FILER NAME Bennett, Ann Harris	<b>3</b> Filer ID
<b>4</b> Date 05/06/2019	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) \$470.31	<b>7</b> Payee address; City; State; Zip Code 3443 Kirby Dr  Pearland, TX 77098-3210	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/18/2019	Candidate/Officeholder name Planned Parenthood of Houston SE TX	
Amount (\$) \$450.00	Office sought Office held	
Purpose of Expenditure	Payee name Planned Parenthood of Houston SE TX	
Purpose of Expenditure	Payee address; City; State; Zip Code 3601 Fannin St  Houston, TX 77004	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 04/05/2019	Candidate/Officeholder name Shanghai River Restaurant	
Amount (\$) \$120.32	Office sought Office held	
Purpose of Expenditure	Payee name Shanghai River Restaurant	
Purpose of Expenditure	Payee address; City; State; Zip Code 2407 Westheimer Rd  Houston, TX 77098	
Purpose of Expenditure	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name Office sought Office held		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 20/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 04/12/2019		5 Payee name Shanghai River Restaurant			
6 Amount (\$) \$138.13		7 Payee address; City; State; Zip Code 2407 Westheimer Rd  Houston, TX 77098			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/03/2019		Payee name Shanghai River Restaurant			
Amount (\$) \$118.70		Payee address; City; State; Zip Code 2407 Westheimer Rd  Houston, TX 77098			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/20/2019		Payee name Subway			
Amount (\$) \$313.85		Payee address; City; State; Zip Code 12829 Aldine Westfield Rd  Houston, TX 77039			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Food	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 21/32	2 FILER NAME Bennett, Ann Harris	3 Filer ID
4 Date 03/12/2019	5 Payee name TX Dem Women of the Harris Co Metro Area	
6 Amount (\$) \$600.00	7 Payee address; City; State; Zip Code 4814 Evening Moon Ln  Katy, TX 77449	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/9 Rpt: 22/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 01/06/2019		5 Payee name AT&T Mobility			
6 Amount (\$) \$118.03  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 92045  Arlington, TX 76004			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/29/2019		Payee name AT&T Mobility			
Amount (\$) \$112.41  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 92045  Arlington, TX 76004			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/06/2019		Payee name AT&T Mobility			
Amount (\$) \$109.58  <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 92045  Arlington, TX 76004			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services  
Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 2/9 Rpt: 23/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 04/09/2019		5 Payee name AT&T Mobility			
6 Amount (\$) \$109.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 92045  Arlington, TX 76004			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Phone	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/07/2019		Payee name Acres Homes Chamber of Commerce			
Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 6112 Wheatley St  Houston, TX 77091			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/02/2019		Payee name Annie's List			
Amount (\$) \$1,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 303227  Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	



# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 3/9 Rpt: 24/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 04/18/2019		5 Payee name Area 5 Dems			
6 Amount (\$) \$15.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 3800 Spencer Hwy Ste L Pasadena, TX 77504			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Membership <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/08/2019		Payee name Barnaby's Cafe			
Amount (\$) \$53.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 1701 S Shepherd Houston, TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Staff Meet <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/13/2019		Payee name Castillo, Juan (Mr.)			
Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 802 Cleveland St Ste 4312 Houston, TX 77019			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description Artwork & Graphic Design <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/9 Rpt: 25/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 03/27/2019		5 Payee name Daddy Duncan BBQ			
6 Amount (\$) \$177.16 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 4992 Hwy 6 N  Houston, TX 77984			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event F & B	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/15/2019		Payee name Domestic Mgmt Svcs			
Amount (\$) \$2,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance & Finance	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/29/2019		Payee name Domestic Mgmt Svcs			
Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 3510 Ruth St  Houston, TX 77004			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance & Finance	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 5/9 Rpt: 26/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 05/14/2019		5 Payee name Domestic Mgmt Svcs			
6 Amount (\$) \$1,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 3510 Ruth St Houston, TX 77004			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance & Finance	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/14/2019		Payee name Hanging Tough Garden Cottage, Inc.			
Amount (\$) \$60.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 6642 Heron Dr Houston, TX 77087-6532			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Attendance	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/26/2019		Payee name Harris Co Toll Rd Authority			
Amount (\$) \$7.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 7701 Wilshire Pl Dr Houston, TX 77040-5326			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense In-District Travel	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 6/9 Rpt: 27/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 06/21/2019		5 Payee name Line & Lariat			
6 Amount (\$) \$42.89 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 220 Main St  Houston, TX 77002			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meet	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/18/2019		Payee name ROADWomen			
Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 22678  Houston, TX 77227			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/18/2019		Payee name ROADWomen			
Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code PO Box 22678  Houston, TX 77227			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Admission	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services  
Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 7/9 Rpt: 28/32		2 FILER NAME Bennett, Ann Harris		3 Filer ID	
4 Date 05/30/2019		5 Payee name ROADWomen			
6 Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code PO Box 22678  Houston, TX 77227			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Sponsorship	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/21/2019		Payee name Sam's Club			
Amount (\$) \$206.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 11101 Fuqua St  Houston, TX 77089			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Beverages	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/07/2019		Payee name Shanghai River Restaurant			
Amount (\$) \$132.12 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 2407 Westheimer Rd  Houston, TX 77098			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 8/9 Rpt: 29/32	2 FILER NAME Bennett, Ann Harris	3 Filer ID
4 Date 04/07/2019	5 Payee name Sisters United	
6 Amount (\$) \$600.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 15918 Cavendish Dr Houston, TX 77059	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Group Sponsorship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/15/2019	Payee name Subway	
Amount (\$) \$28.60 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 3518 S Shepherd Houston, TX 77098	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/05/2019	Payee name Treebeards on Market Sq	
Amount (\$) \$27.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 315 Travis Street Houston, TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 9/9 Rpt: 30/32	2 FILER NAME Bennett, Ann Harris	3 Filer ID
4 Date 04/02/2019	5 Payee name Whole Foods	
6 Amount (\$) \$42.15  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 2955 Kirby Dr  Houston, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Meet
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

**SCHEDULE K**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule K: Sch: 1/2 Rpt: 31/32
<b>2</b> FILER NAME Bennett, Ann Harris		<b>3</b> Filer ID

  

<b>4</b> Date 04/08/2019	<b>5</b> Name of person from whom amount is received Wells Fargo	<b>8</b> Amount (\$) \$10.00
	<b>6</b> Address of person from whom amount is received; City; State; Zip Code 1301 McKinney St  Houston, TX 77010-3018	
	<b>7</b> Purpose for which amount is received Banking Fee Discount Not Recvd <input type="checkbox"/> Check if political contribution returned to filer	

  

Date 01/31/2019	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.12
	Address of person from whom amount is received; City; State; Zip Code 1301 McKinney St  Houston, TX 77010-3018	
	Purpose for which amount is received Earned Interest <input type="checkbox"/> Check if political contribution returned to filer	

  

Date 02/28/2019	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.11
	Address of person from whom amount is received; City; State; Zip Code 1301 McKinney St  Houston, TX 77010-3018	
	Purpose for which amount is received Earned Interest <input type="checkbox"/> Check if political contribution returned to filer	

  

Date 03/29/2019	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.13
	Address of person from whom amount is received; City; State; Zip Code 1301 McKinney St  Houston, TX 77010-3018	
	Purpose for which amount is received Earned Interest <input type="checkbox"/> Check if political contribution returned to filer	

  

Date 04/30/2019	Name of person from whom amount is received Wells Fargo	Amount (\$) \$0.13
	Address of person from whom amount is received; City; State; Zip Code 1301 McKinney St  Houston, TX 77010-3018	
	Purpose for which amount is received Earned Interest <input type="checkbox"/> Check if political contribution returned to filer	



# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 2/2 Rpt: 32/32

2 FILER NAME

Bennett, Ann Harris

3 Filer ID

4 Date  
05/31/2019

5 Name of person from whom amount is received

Wells Fargo

8 Amount (\$)

\$0.13

6 Address of person from whom amount is received; City; State; Zip Code

1301 McKinney St

Houston, TX 77010-3018

7 Purpose for which amount is received

Earned Interest

☐ Check if political contribution returned to filer

Date  
06/28/2019

Name of person from whom amount is received

Wells Fargo

Amount (\$)

\$0.14

Address of person from whom amount is received; City; State; Zip Code

1301 McKinney St

Houston, TX 77010-3018

Purpose for which amount is received

Earned Interest

☐ Check if political contribution returned to filer

## RECORDER'S MEMORANDUM:

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