CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Form C/OH Cover Sheet PG 1

The C/OH instruction	Guide explains how to complet	e this form.	Filer ID (Eth	ic Commis	ssion Filers	Total pages fi	led:
CANDIDATE /	Title Firs	Gregory		[MI:		FICE USE ONLY
OFFICEHOLDER NAME	NickName Las			- (Suffix	Date Received	ECEIVED TO
CANDIDATE / OFFICEHOLDER ADDRESS	Address/PO Box Apt/St 2226 Oak Rise Dri	•	State	Zip(Code	CNITGOMER)	ELLIVED EB 2 6 2018 EB 19 Pases
Change of Addres	Conroe		TX	77:	304		19 pages \$
CANDIDATE / OFFICEHOLDER	Area Code Ph	one Number		Extens	sion	Date Hand-d	lelivered or Date Postmarked
PHONE		(830) 221-{	5220				and of Date Contained
CAMPAIGN TREASURER	Title Fir	st			MI:	Receipt#	Amount
ADDRESS	Mrs. T	asha 		. 		Date Processed	
		ast Parker			Suffix	Date Imaged	
CAMPAIGN TREASURER	Street Address	Apt/Suite#		City		State	Zip Code
ADDRESS	2226 Oak Rise Dr	ive	•	Conroe		T	X 77304
CAMPAIGN TREASURER PHONE	Area Code P	hone Number (830) 660-	9289	Exten	sion		
REPORT TYPE	January 15	30th day b	pefore election	R	unoff	M	15th day after campaign treasurer appointment
	July 15	▼ 8th day be	efore election		xceeded \$500) limit	Final report
PERIOD COVERED	Month Day 1/26/2		THR	OUGH	Мс		Day Year 24/2018
ELECTION	Election Date	Election Type					
	3/6/2018	Primary	₩ Ru	noff	**	General	Special
OFFICE	Office Held (if any)	<u> </u>	O	ffice Soug	ht (if known		
			N	/lontgon	nery Cou	inty Comm	issioner PCT #2
GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

Form C/OH Cover Sheet PG 2

		·					
C/OH NAME		Gregory	Parker		Filer ID (Et	nics Commission Filers)	
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.						
	COMMITTE TYPE	Committee Name	Freedon	n and Liberty Cons	ervatives PAC		
	X GENERAL	Committee Address	s P.O. Box 3	, Montgomery, Tex	kas 77356		
additional	SPECIFIC	Committee Campa	ign Treasurer Name	Maureen Ball			
pages		Committee Compa	ign Treasurer Address	P.0. Box 3, I	Montgomery. T	exas 77356	
CONTRIBUTION TOTALS			ONS OF \$50 OR LESS OANS). UNLESS ITER		EDGES,	\$0.00	
:		LITICAL CONTRI N PLEDGES, LOANS	I BUTIONS S, OR GUARANTEES	OF LOANS)		\$7,052.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED					\$0.00	
	4. TOTAL PO	4. TOTAL POLITICAL EXPENDITURES				\$16,340.55	
CONTRIBUTION BALANCE	5. TOTAL PRINCIPAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				OF	\$5,888.43	
OUTSTANDING LOAN TOTALS		CIPAL AMOUNT OF A	ALL OUTSTANDING PERIOD	_OANS AS OF THE		\$15,000.00	
AFFIDAVIT	AMBER LEE HOLM Notary ID #1263577 My Commission Expi January 20, 2020	ES 07	report is true an be reported by r	id correct and in	ncludes all i		
AFFIX NOT	ARY STAMP / SEAL A		_	~ //			
Sworn to and su	ubscribed before me,	by the said	Gregory	Parker	, this	s the 20th	
day of Febru	ang 20 18	, to certify which	h, witness my ha De Lle Hij	nd and seal of of	ffice.	tang Public state of 18	
Signature of off	icer administering oath	Prin	nt name of officer a	dministering oath	Title	e of officer administering oath	

SUBTOTALS - C/OH

Form C/OH Cover Sheet PG 3

R NAM Gregory Parker	Filer ID (Ethics Commission Filers)
CHEDULE SUBTOTALS AME OF SCHEDULE	SUBTOTALS AMOUNTS
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$3,052.00
SCHEDULE A2: NON-MONETARY(IN-KIND) POLITICAL CONTRIBUTIONS	\$4,000.00
SCHEDULE B: PLEDGED CONTRIBUTIONS	\$0.00
SCHEDULE E: LOANS	\$0.00
SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	JTIONS \$16,340.55
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$0.00
SCHEDULE F3; PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTR	RIBUTIONS \$0.00
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$0.00
SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$0.00
SCHEDULE H: PAYMENTS MADE FROM POLITICAL CONTRIBUTIONS TO BUSIN	NESS OF C/OH \$0.00
SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTR	RIBUTIONS \$0.00
SCHEDULE K: INTREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILIER	\$0.00

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total Pages this schedule A1 The Instruction Guide explains how to complete this form. Page 1 of 5 FILER NAME Filer ID (Ethics Commission Filers Gregory Parker DATE Full name of contributor out-of-state PAC (ID# ___ Amount of contribution (\$) Maureen Ball 1/27/2018 Contributor address: City: State: Zip Code \$100.00 18626 Limber Pines Ct, Magnolia, TX, 77355 Principal occupation / Job Title (See Instructions) Employer (See Instructions) DATE Full name of contributor Amount of contribution (\$) out-of-state PAC (ID# Jim & Kathleen Oats 1/27/2018 Contributor address: Zip Code City: State: \$100.00 817 Tall Pines Dr, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) DATE Full name of contributor out-of-state PAC (ID# _ Amount of contribution (\$) Bill O'Sullivan Jr 1/27/2018 Contributor address: City: State: Zip Code \$100.00 14 Petalcup Place, The Woodlands, TX, 77381 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Retired Retired DATE Full name of contributor out-of-state PAC (ID#_ Amount of contribution (\$) Roxie Tijerina 1/27/2018 Contributor address: City: State: Zip Code \$25.00 803 Tammy, San Antonio, TX, 78216 Principal occupation / Job Title (See Instructions) Employer (See Instructions) **Executive Assistant** Kaler Energy Corp

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

(Revised 9/8/2015)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total Pages this schedule A1 The Instruction Guide explains how to complete this form. Page 2 of 5 FILER NAME Filer ID (Ethics Commission Filers **Gregory Parker** DATE Full name of contributor out-of-state PAC (ID# ___ Amount of contribution (\$) Jake Gabriel 1/27/2018 Contributor address: City: Zip Code State: \$100.00 9011 Sendera Dr, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Medline Sales DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Richard Bunch 1/27/2018 Contributor address: Zip Code City: State: \$507.00 39 Legato Way, The Woodlands, TX, 77382 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Insurance DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Angie Carraway 1/27/2018 Contributor address: City: State: Zip Code \$50.00 27207 FM 2978, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Self-Employed Construction DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Pam Berg 1/27/2018 Contributor address: Zip Code City: State: \$25.00 142 Mimosa Silk CT, Montgomery, TX, 77316 Principal occupation / Job Title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS **SCHEDULE A1** Total Pages this schedule A1 The Instruction Guide explains how to complete this form. Page 3 of 5 FILER NAME Filer ID (Ethics Commission Filers **Gregory Parker** DATE Full name of contributor out-of-state PAC (ID#_ Amount of contribution (\$) Mark Turnball 1/27/2018 Contributor address: City: State: Zip Code \$25.00 11 Haversham CT, Conroe, TX, 77384 Principal occupation / Job Title (See Instructions) Employer (See Instructions) DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Wade & Tracey Jones 1/27/2018 Contributor address: City: State: Zip Code \$50.00 22771 Magnolia Hills Dr. Magnolia, TX, 77354 Employer (See Instructions) Principal occupation / Job Title (See Instructions) Full name of contributor out-of-state PAC (ID# DATE Amount of contribution (\$) **Buck Carraway** 1/27/2018 City: Contributor address: State: Zip Code \$320.00 27207 FM 2978, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Construction Self-Employed DATE Full name of contributor out-of-state PAC (ID# ____ Amount of contribution (\$) Tim Turner 1/28/2018 Contributor address: City: State: Zip Code \$200.00 31102 Becky Ln, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Nexen Petroleum USA Engineer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total Pages this schedule A1 The Instruction Guide explains how to complete this form. Page 4 of 5 FILER NAME Filer ID (Ethics Commission Filers **Gregory Parker** DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Eric Yollick 1/28/2018 Contributor address: City: State: Zip Code \$600.00 P.O. Box 7571, The Woodlands, TX, 77387 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Yollick Law Firm, PC Lawyer DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Mark Keough 1/28/2018 Contributor address: City: State: Zip Code \$250.00 26 Woodmere Place, The Woodlands, TX, 77381 Principal occupation / Job Title (See Instructions) Employer (See Instructions) DATE Full name of contributor out-of-state PAC (ID#_ Amount of contribution (\$) Ricky Staggs 2/7/2018 Contributor address: City: Zip Code State: \$500.00 7223 Nickaburr Creek, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Self-Employed Specialty Products DATE Full name of contributor out-of-state PAC (ID#_ Amount of contribution (\$) Ronney Edwards 2/13/2018 Contributor address: City: State: Zip Code \$50.00 11718 Water Oak Drive, Magnolia, TX, 77354 Principal occupation / Job Title (See Instructions) Employer (See Instructions) Sales Engineer Retired

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

MONETARY POLITICAL CONTRIBUTIONS **SCHEDULE A1** Total Pages this schedule A1 The Instruction Guide explains how to complete this form. Page 5 of 5 FILER NAME Filer ID (Ethics Commission Filers **Gregory Parker** DATE Full name of contributor out-of-state PAC (ID# Amount of contribution (\$) Terry & Debra Ann Cox 2/13/2018 Contributor address: City. State: Zip Code \$50.00 82 W. 500 N, Vernal, UT, 84078 Principal occupation / Job Title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction	n Guide explains how to complete this form.		Total Pages this schedule A2: Page 1 of 1		
FILER NAME			Filer ID (Ethics Comm	ission Filers	
G	regory Parker				
TOTAL OF U	UNITEMIZED IN-KIND POLITICAL CONTR	\$4,000.00			
DATE 2/1/2018	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-Kind contribution Description Technology Services	
	Contributor address: City: State: Zip Code 4631 Englewood Dr., Indianapolis, IN, 46226		\$4,000.00	Retainer	
Principal occupation	n / Job Title (FOR NON-JUDICIAL) (See Instructions)	Employer (FOR NO)	DN-JUDICIAL) (See Instructions)		
Technology Cons	ultant	Self Employed			
Contributor's princip	eal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)			
Contributor's employ	yer/law firm (FOR JUDICIAL)	Law firm of contribut	or's spouse (if any) (FOR JU	JDIÇIAL)	
If contributor is a ch	ild, law firm of parent(s) (if any) (FOR JUDICIAL)				

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

		EXPENDITUE	RE CATEGORIES FOR BO)X 8(a)		
Advertising Expense		Event Expense	Loan Repayment/Reimbursement	, .	on/Fundraising Expense	
Accounting/Banking		Fees	Office Overhead/Rental Expense	Transpo	rtation Equipment Related Expense	
Consulting Expense		Food/Beverage Expense	Polling Expense	Travel Ir	District	
Contributions/Donations Made	Ву	Gift/Awards/Memorials Expens	Printing Expense	Travel O	ut Of District	
Candidate/Officeholder/Poli	tical Commi	tte Legal Services	Salaries/Wages/Contract Labor	Other (e	nter a category not listed above)	
Credit Card Payment		The Instruction	Guide explains how to complete		,	
Total Pages this sched	lule F:	FILER NAME			Filer ID (Ethics Commission filers	
Page 1 of 10		. Gregory Parker			,	
DATE	Payee r	name				
1/27/2018	Facebo	ook				
Amount (\$)	Payee a	address: City:	State: Zip Code			
\$156.22	1 Had	cker Way Menlo Park, CA 94	025			
PURPOSE	(a) Cate	gory (See Categories listed	at the top of this schedule	(a) Description		
OF				Li	outside of Texas. Complete Schedule T.	
EXPENDITURE		Advertising Expense		Check if tAustin	, TX officeholder living expense	
					Advertising	
	Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
	D					
DATE 1/27/2018	Payee r					
1/2//2016	Eden C					
Amount (\$)	Payee a	iddress: City:	State: Zip Code			
\$414.94	33418	Egypt Lane Magnolia, TX 77	7354			
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description		
OF				Check if travel of	outside of Texas. Complete Schedule T.	
EXPENDITURE		Solicitation/Fundraisin	g Expense	Check if tAustin	, TX officeholder living expense	
				Fund	raising Event Fee	
Complete ONLY if dire	ect	Candidate / Officeholder name	Office s	sought	Office held	
expenditure to benefit						
- A	Payee n	ame				
DATE 1/27/2018	Piryx					
Amount (\$)	Payee a	ddress: City:	State: Zip Code			
\$4.50	995 M	arket Street, 2nd Floor San F	Francisco, CA 94103			
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description		
OF				Check if travel of	outside of Texas. Complete Schedule T.	
EXPENDITURE		Solicitation/Fundraisin	g Expense	Check if tAustin	TX officeholder living expense	
				F	andraising Fee	
Complete ONLY if dire		Candidate / Officeholder name	Office s	sought	Office held	
Oxponuntie to penelit	0/011					

		EXPENDITUR	RE CATEGORIES FOR BO	X 8(a)	
Advertising Expense		Event Expense	Loan Repayment/Reimbursement	Solicitati	on/Fundraising Expense
Accounting/Banking		Fees	Office Overhead/Rental Expense	Transpoi	rtation Equipment Related Expense
Consulting Expense		Food/Beverage Expense	Polling Expense	Travel In	District
Contributions/Donations Made	Ву	Gift/Awards/Memorials Expens	Printing Expense	Travel O	ut Of District
Candidate/Officeholder/Poli	tical Commit	te Legal Services	Salaries/Wages/Contract Labor	Other (er	nter a category not listed above)
Credit Card Payment		The Instruction	Guide explains how to complete	this form.	
Total Pages this sched	ule F:	FILER NAME			Filer ID (Ethics Commission filers
Page 2 of 10		. Gregory Parker			,
DATE	Payee n	ame			
1/28/2018	UZ Mar	keting			
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
\$838.00	5200 N	/litchelldate St Houston, TX 7	77092		
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF				Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Printing Expense		Check if tAustin	, TX officeholder living expense
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office s	sought	Office held
DATE	Payee n	ame			
1/28/2018	Montgo	mery County Tea Party Pac			
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
\$600.00	9268 F	lwy 242 Conroe, TX 77304			
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF				Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Event Expense		Check if tAustin	, TX officeholder living expense
					Tabie Fee
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office s	l. sought	Office held
DATE	Payee n	ame			
1/28/2018	Super 0	Cheap Signs			
Amount (\$)	Payee a	ddress: City:	State: Zip Code	·	
\$1,076.00	9200 V	Vaterford Centre Blvd., Suite	#100 Austin, TX 78758		
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF				Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Printing Expense		Check if tAustin	, TX officeholder living expense
				Camp	aign Signs Printing
Complete ONLY if dire		Candidate / Officeholder name	Office s	ought	Office held

		EXPENDITU	RE CATEGORIES FOR BO	OX 8(a)	
Advertising Expense		Event Expense	Loan Repayment/Reimbursemen		on/Fundraising Expense
Accounting/Banking		Fees	Office Overhead/Rental Expense	Transpo	rtation Equipment Related Expense
Consulting Expense		Food/Beverage Expense	Polling Expense	Travel !r	District
Contributions/Donations Made	э Ву	Gift/Awards/Memorials Expens	Printing Expense	Travel C	ut Of District
Candidate/Officeholder/Poli	tical Commi	tte Legal Services	Salaries/Wages/Contract Labor	Other (e	nter a category not listed above)
Credit Card Payment		The Instruction	n Guide explains how to complete	this form.	
Total Pages this sched	lule F:	FILER NAME			Filer ID (Ethics Commission filers
Page 3 of 10		. Gregory Parker			
DATE 1/28/2018	Payee i Piryx	name	-		
Amount (\$)	Pavee a	address: City:	State: Zip Code		
\$9.00	-	larket Street, 2nd Floor San I	•		
PURPOSE	(a) Cate	egory (See Categories listed	at the top of this schedule	(a) Description	edaida ef Tanas Constitut Constitut T
OF EXPENDITURE		8 - P. St. P # 1 5 - 5	. =	L	outside of Texas. Complete Schedule T.
EXPENDITORE		Solicitation/Fundraisin	g Expense	ļ L	, TX officeholder living expense
				F	undraising Fee
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held
DATE	Payee r	name			
1/29/2018	Comm	unity Impact Newspaper			
Amount (\$)	Payee a	address: City:	State: Zip Code		
\$1,920.00	8400 (N. Sam Houston Parkway W	Houston, TX 77064		
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF EXPENDITURE				L	outside of Texas. Complete Schedule T.
EXPENDITORE		Advertising Expense		IJ	, TX officeholder living expense
				News	spaper Advertising
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held
DATE	Payee r	ame			
1/29/2018	JGI Ou	tdoor Advertising			
Amount (\$)	Payee a	iddress: City:	State: Zip Code		
\$1,650.00	525 P	ark Grove Katy, TX 77450			
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF				Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Advertising Expense		Check if tAustin	TX officeholder living expense
				Oı	utdoor Billboard
Complete ONLY if dire	ect	Candidate / Officeholder name	Office :	sought	Office held
expenditure to benefit	C/OH				
				-	

	·	EVDENDITUE	RE CATEGORIES FOR BC	V P/a\	
Advertising Expense		EXPENDITURE Event Expense	Loan Repayment/Reimbursement		ion/Fundraising Expense
Accounting/Banking		Fees	Office Overhead/Rental Expense		ertation Equipment Related Expense
Consulting Expense		Food/Beverage Expense	Polling Expense	-	n District
Contributions/Donations Made	≥ Rv	Gift/Awards/Memorials Expens	Printing Expense		Out Of District
Candidate/Officeholder/Poli	-	Legal Services	Salaries/Wages/Contract Labor		nter a category not listed above)
Credit Card Payment		•	-		
		i ne instruction	Guide explains how to complete	unis iorni.	
Total Pages this sched	dule F: FI	LER NAME			Filer ID (Ethics Commission filers
Page 4 of 10	<u>i</u> :	Gregory Parker			
DATE	Payee nar	ne		1	
1/30/2018	Facebook	ζ			
Amount (\$)	Payee add	lress: City:	State: Zip Code		
\$100.00	1 Hacke	r Way Menlo Park, CA 940	025		
PURPOSE	(a) Catego	ry (See Categories listed a	at the top of this schedule	(a) Description	
OF				Check if travel	outside of Texas. Complete Schedule T.
EXPENDITURE		Advertising Expense		Check if tAustin	n, TX officeholder living expense
					Advertising
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office :	sought	Office held
DATE	Payee nar	ne			
1/30/2018	Gravis Ma	arketing			
Amount (\$)	Payee add	lress: City:	State: Zip Code		
\$450.00	910 Belle	e Ave Winter Springs, FL 3	2708		
PURPOSE	(a) Catego	ory (See Categories listed a	at the top of this schedule	(a) Description	
OF				Check if travel	outside of Texas. Complete Schedule T.
EXPENDITURE		Advertising Expense		Check if tAustii	n, TX officeholder living expense
					Robo Calls
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held
DATE	Payee nar	ne			
1/31/2018	Vistaprint				
Amount (\$)	Payee add	fress: City:	State: Zip Code		
\$297.99	95 Hayd	en Ave Lexington, MA 024	21		
PURPOSE	(a) Catego	ry (See Categories listed a	at the top of this schedule	(a) Description	
OF				į <u> </u>	outside of Texas. Complete Schedule T.
EXPENDITURE		Printing Expense		Check if tAustin	n, TX officeholder living expense
				Pu	sh Card Printing
Complete ONLY if dire	ect	Candidate / Officeholder name	Office	sought	Office held
expenditure to benefit			-	<u>-</u>	

		EXPENDITUR	RE CATEGORIES FOR BO	OX 8(a)	
Advertising Expense		Event Expense	Loan Repayment/Reimbursemer	it Solicitati	on/Fundraising Expense
Accounting/Banking		Fees	Office Overhead/Rental Expense	Transpo	rtation Equipment Related Expense
Consulting Expense		Food/Beverage Expense	Polling Expense	Travel Ir	District
Contributions/Donations Made	в Ву	Gift/Awards/Memorials Expens	Printing Expense	Travel C	ut Of District
Candidate/Officeholder/Poli	tical Commit	te Legal Services	Salaries/Wages/Contract Labor	Other (e	nter a category not listed above)
Credit Card Payment		The Instruction	Guide explains how to complete	e this form.	
Total Pages this sched	lule F:	FILER NAME			Filer ID (Ethics Commission filers
Page 5 of 10		. Gregory Parker			
DATE 2/2/2018	Payee n The Wo	ame oodlands Area Chamber of C	ommerce		
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
\$75.00	9320 L	akeside Blvd #200 The Wo	odlands, TX 77381		
PURPOSE OF EXPENDITURE	(a) Cate	gory (See Categories listed a Advertising Expense	at the top of this schedule	<u> </u>	outside of Texas. Complete Schedule T.
				E	vent Entry Fee
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held
DATE	Payee n	ame	······································		
2/2/2018	Tayloriz	ed PR			
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
\$500.00	122 Mi	mosa Silk Court Montgomer	y, TX 77316		
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF					outside of Texas. Complete Schedule T.
EXPENDITURE		Consulting Expense			, TX officeholder living expense
				-	PR Consulting
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	· Office held
DATE	Payee na	ame			
2/3/2018	Home D	Depot			
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
\$138.99	1341 V	V Davis St Conroe, TX 77304	4		
PURPOSE OF	(a) Cate	gory (See Categories listed a	it the top of this schedule	(a) Description Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Advertising Expense		ا ا	, TX officeholder living expense n Post Supplies
Complete ONLY if dire	ert .	Candidate / Officeholder name	Office	sought	Office held
expenditure to benefit		CENTRAL CHIOCHOLOGIC HELLIS	Omice	~~~g,,,,	Onido Itala
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		EXPENDITUR	RE CATEGORIES FOR BO	X 8(a)	
Advertising Expense		Event Expense	Loan Repayment/Reimbursement	Solicitati	on/Fundraising Expense
Accounting/Banking		Fees	Office Overhead/Rental Expense	Transpo	rtation Equipment Related Expense
Consulting Expense		Food/Beverage Expense	Polling Expense	Travei Ir	District
Contributions/Donations Made	э Ву	Gift/Awards/Memorials Expens	Printing Expense	Travel O	ut Of District
Candidate/Officeholder/Poli	itical Committ	e Legal Services	Salaries/Wages/Contract Labor	Other (e	nter a category not listed above)
Credit Card Payment		The Instruction	Guide explains how to complete	this form.	
Total Pages this sched	lule F:	FILER NAME			Filer ID (Ethics Commission filers
Page 6 of 10	<u> </u>	. Gregory Parker			
DATE	Рауее па	ame			
2/3/2018	UZ Mari	keting			
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
	i	litchelldate St Houston, TX 7	•		
\$60.00	OZOO IV	interioridate of Froductors, TX 7	-1002		
PURPOSE	(a) Cateo	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF]				outside of Texas. Complete Schedule T.
EXPENDITURE		Printing Expense		ا ا	ı, TX officeholder living expense
				Camp	paign Signs Printing
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held
DATE	Payee na	ame			
2/5/2018	Alphagr	aphics The Woodlands			
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
\$3,608.95	2319 T	imberloch Pl. The Woodland	ds, TX 77380		
PURPOSE	(a) Categ	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF				LJ	outside of Texas. Complete Schedule T.
EXPENDITURE		Printing Expense		Check if tAustin	, TX officeholder living expense
				Prin	ting and Postage
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office :	sought	Office held
DATE	Payee na	ame			
2/7/2018	Piryx				
Amount (\$)	Payee a	ddress: City:	State: Zip Code		
` *	_	arket Street, 2nd Floor San F	•		
\$22.50					
PURPOSE	(a) Categ	gory (See Categories listed a	at the top of this schedule	(a) Description	
OF					outside of Texas, Complete Schedule T.
EXPENDITURE		Solicitation/Fundraising	g Expense		, TX officeholder living expense
				F	undraising Fee
Complete ONLY if dire		Candidate / Officeholder name	Office :	sought	Office held
expenditure to benefit	C/OH				

		EXPENDITU	RE CATEGORIES FOR BO	X 8(a)	
Advertising Expense		Event Expense	Loan Repayment/Reimbursement	Solicitati	on/Fundraising Expense
Accounting/Banking		Fees	Office Overhead/Rental Expense	Transpo	rtation Equipment Related Expense
Consulting Expense		Food/Beverage Expense	Polling Expense	Travel In	District
Contributions/Donations Made	В у	Gift/Awards/Memorials Expens	Printing Expense	Travel O	out Of District
Candidate/Officeholder/Poli	tical Commi	tte Legal Services	Salaries/Wages/Contract Labor	Other (ex	nter a category not listed above)
Credit Card Payment		The Instruction	n Guide explains how to complete	this form.	
Total Pages this sched	lule F:	FILER NAME			Filer ID (Ethics Commission filers
Page 7 of 10		. Gregory Parker			
DATE	Payee r	name			
2/8/2018	Hearst	Media Group			
Amount (\$)	Payee a	address: City:	State: Zip Code		
\$346.50	100 A	venue A Conroe, TX 77301			
PURPOSE	(a) Cate	gory (See Categories listed	at the top of this schedule	(a) Description	
, OF				L	outside of Texas. Complete Schedule T.
EXPENDITURE		Advertising Expense		Check if tAustin	n, TX officeholder living expense
				News	spaper Advertising
Complete ONLY if dire	ect	Candidate / Officeholder name	e Office s	sought	Office held
expenditure to benefit	C/OH				
	Payee n	name		······································	
DATE 2/10/2018	. •	Marketing			
Amount (\$)	•	eddress: City:	State: Zip Code		
\$100.00	121 Ki	ing Street, Melbourne Victor	ia 3000 Australia,		
PURPOSE	(a) Cate	gory (See Categories listed	at the top of this schedule	(a) Description	
OF				Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Advertising Expense		Check if tAustin	n, TX officeholder living expense
				Stock Vio	leo Footage & Sounds
Complete ONLY if dire	ect	Candidate / Officeholder name	e Office s	sought	Office held
expenditure to benefit	C/OH				
DATE	Payee n	ame			
2/10/2018	-	emet Inc			
Amount (\$)	Person	address: City:	State: Zip Code		
Amount (\$)	Payee a	ee Road, Chesterbrook, PA	·		
\$15.96	701 E	ee Road, Chesterbrook, PA	19001		
PURPOSE	(a) Cate	gory (See Categories listed	at the top of this schedule	(a) Description	
OF			ı	Check if travel of	outside of Texas. Complete Schedule T.
EXPENDITURE		Other (Web & Email I	Hosting)	Check if tAustin	, TX officeholder living expense
				Web	& Email Hosting
Complete ONLY if dire	ect	Candidate / Officeholder name	e Office s	lsought	Office held
expenditure to benefit				•	

ATTACH ADDITIONAL	CODIES OF THIS	CODM AS	MEEDED
ALIACH ADDITIONAL	_		

		EXPENDITUR	RE CATEGORIES FOR	BOX 8(a)			
Advertising Expense		Event Expense	Loan Repayment/Reimburse	ment	Solicitation/Fundraising Expense		
Accounting/Banking	unting/Banking Fee		Office Overhead/Rental Exp	eńse -	Transportation Equipment Related Expense		
Consulting Expense	Expense Food/Bevera		Polling Expense	•	Travel In District		
Contributions/Donations Made) Ву	Gift/Awards/Memorials Expens	Printing Expense	•	Travel Out Of District		
Candidate/Officeholder/Polit	tical Committe	Legal Services	Salaries/Wages/Contract La	оог -	Other (enter a category not listed above)		
Credit Card Payment		The Instruction	Guide explains how to com	olete this form.			
Total Pages this sched	lule F: F	TILER NAME			Filer ID (Ethics Commission filers		
Page 8 of 10		. Gregory Parker					
DATE	Payee na	me					
2/12/2018	Adobe S	ystems Incorporated					
Amount (\$)	Payee ad	dress: City:	State: Zip Code				
\$60.00	345 Par	k Avenue San Jose, CA 95	110				
PURPOSE	(a) Catego	ory (See Categories listed a	at the top of this sched	ıle (a) Descriptio	on		
OF				Check	if travel outside of Texas. Complete Schedule T.		
EXPENDITURE		Other (Software Renta	i)	Check	if tAustin, TX officeholder living expense		
j					Application Rental		
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							
DATE	Payee na	me					
2/13/2018	Piryx						
Amount (\$)	Payee ad	dress: City:	State: Zip Code		 		
\$2.25	995 Mar	rket Street, 2nd Floor San F	rancisco, CA 94103				
PURPOSE	(a) Catego	ory (See Categories listed a	at the top of this sched	ıle (a) Descriptio	on		
OF				Check	if travel outside of Texas. Complete Schedule T.		
EXPENDITURE		Solicitation/Fundraising	g Expense	Check	Check if tAustin, TX officeholder living expense		
				G	Fundraising Fee		
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							
DATE	Payee na	me					
2/15/2018	Vistaprin	t					
Amount (\$)	Payee ad	dress: City:	State: Zip Code				
\$200.00	95 Hayd	len Ave Lexington, MA 0242	21				
PURPOSE	(a) Catego	ory (See Categories listed a	at the top of this sched	ıle (a) Descriptio	on		
OF				Check	if travel outside of Texas. Complete Schedule T.		
EXPENDITURE		Printing Expense		Check	if tAustin, TX officeholder living expense		
					Push Card Printing		
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							

EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense		Event Expense	Loan Repayment/Reimbursemer	nt Solicitat	ion/Fundraising Expense		
Accounting/Banking	Fees		Office Overhead/Rental Expense Transpo		ortation Equipment Related Expense		
Consulting Expense		Food/Beverage Expense	Polling Expense Travel In District		n District		
Contributions/Donations Made	Contributions/Donations Made By Gift/Awards/Memorials Expens		Printing Expense	Travel C	Out Of District		
Candidate/Officeholder/Poli	tical Commi	te Legal Services	Salaries/Wages/Contract Labor	Other (e	nter a category not listed above)		
Credit Card Payment		The Instruction	Guide explains how to complete	e this form.			
Total Pages this sched	lule F:	FILER NAME			Filer ID (Ethics Commission filers		
Page 9 of 10	ļ	. Gregory Parker					
DATE	Payee r	ame					
2/16/2018	Alphagraphics The Woodlands						
Amount (\$)	Payee a	ddress: City:	State: Zip Code				
\$2,536.44	2319	Fimberloch Pl. The Woodland	ds, TX 77380				
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description			
OF				Li	outside of Texas. Complete Schedule T.		
EXPENDITURE		Printing Expense			n, TX officeholder living expense		
				Prir	nting and Postage		
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held		
DATE	Payee n	ame					
2/20/2018	Home I	Depot					
Amount (\$)	Payee a	ddress: City:	State: Zip Code				
\$50.00	1341 \	V Davis St Conroe, TX 7730	4				
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description			
OF					outside of Texas. Complete Schedule T.		
EXPENDITURE		Advertising Expense			Check if tAustin, TX officeholder living expense		
				Sign	Post and Supplies		
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held		
DATE	Payee n	ame	· · · · · · · · · · · · · · · · · · ·				
2/21/2018	Facebo	ok					
Amount (\$)	Payee a	ddress: City:	State: Zip Code				
\$250.00	1 Had	ker Way Menlo Park, CA 94	025				
PURPOSE	(a) Cate	gory (See Categories listed a	at the top of this schedule	(a) Description			
OF				Check if travel	outside of Texas. Complete Schedule T.		
EXPENDITURE		Advertising Expense		Check if tAustir	a, TX officeholder living expense		
					Advertising		
Complete ONLY if dire expenditure to benefit		Candidate / Officeholder name	Office	sought	Office held		

ATTACH ADDITIONAL	COPIES OF THE	HIS FORM AS	NEEDEL

		EXPENDITUR	E CATEGORIES	FOR BO	X 8(a)		
Advertising Expense		Event Expense	Loan Repayment/Rei	mbursement	Solicitati	on/Fundraising Expense	
Accounting/Banking	Banking Fees		Office Overhead/Ren	tal Expense	Transpor	tation Equipment Related Expense	
Consulting Expense		Food/Beverage Expense	Polling Expense		Travel In District		
Contributions/Donations Made	э Ву	Gift/Awards/Memorials Expens	Printing Expense		Travel O	ut Of District	
Candidate/Officeholder/Poli	tical Committe	Legal Services	Salaries/Wages/Cont	ract Labor	Other (er	nter a category not listed above)	
Credit Card Payment		The Instruction	Guide explains how t	o complete	this form.		
Total Pages this sched	lule F: Fl	ILER NAME				Filer ID (Ethics Commission filers	
Page 10 of 10	<u> </u>	Gregory Parker					
DATE	Payee nar						
2/21/2018	Super Ch	eap Signs					
Amount (\$)	Payee add	fress: City:	State: Zip C	orie.			
` '	•	aterford Centre Blvd., Suite					
\$367.03	0200 110	atomora Gomino Bira., Ganto	Triod Addin, 17	70100			
PURPOSE	(a) Catego	ory (See Categories listed a	at the top of this s	chedule	(a) Description		
OF					LJ	outside of Texas, Complete Schedule T.	
EXPENDITURE		Printing Expense				, TX officeholder living expense	
					Camp	aign Signs Printing	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							
DATE	Payee nar	ne			·		
2/22/2018	DATE						
Amount (\$)	Payee add	Iress: City:	State: Zip C	ode			
\$424.34	5200 Mit	chelldate St Houston, TX 7	7092				
PURPOSE	(a) Catego	ry (See Categories listed a	t the top of this so	chedule	(a) Description		
OF EXPENDITURE		Distant Francis			ئــــا	rutside of Texas. Complete Schedule T.	
EXPENDITURE .		Printing Expense			Check if tAustin, TX officeholder living expense		
					Camp	aign Signs Printing	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							
DATE	Payee nan	ne			· · · · · · · · · · · · · · · · · · ·		
2/23/2018	Kitty's Ho	mestyle Café					
Amount (\$)	Payee add	Iress: City:	State: Zip C	ode			
\$65.94	18904 F i	VI 1488 Magnolia, TX 7735	5	,,			
PURPOSE	(a) Catego	ry (See Categories listed a	t the top of this so	chedule	(a) Description		
OF					Check if travel of	utside of Texas. Complete Schedule T.	
EXPENDITURE	RE Food/Beverage Expense Check if tAustin, TX officeholder living expense			TX officeholder living expense			
						Lunch	
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH							

ATTACH ADDITIONAL	COPIES OF	THIS FORM A	S NEEDEL