FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080027 96 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Philip A. NAME Date Received **ELECTRONICALLY FILED** 01/15/2016 NICKNAME LAST **SUFFIX** Phil Grant CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 22200 Bailey Grove Rd. MAILING Amount Receipt # **ADDRESS** Change of Address Montgomery, TX 77356 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. J.R. NAME NICKNAME LAST **SUFFIX** Moore Jr. **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 22 Cape Jasmine Pl. **ADDRESS** (Residence or Business) The Woodlands, TX 77381 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 796-6686 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 lx l appointment (officeholder only) July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR) PERIOD Month Month Day Year Day Year **COVERED THROUGH** 07/01/2015 12/31/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/01/2016 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 9th

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Grant, Philip A. (Mr.)		14 Filer ID 00080027	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political ex These expenditures may have been made w officeholders are required to report this info	vithout the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
Ш	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER N.	AME	
		COMMITTEE CAMPAIGN TREASURER A	DDRESS	
16 CONTIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (O [*] ARANTEES OF LOANS), UNLESS ITEMIZE		\$ 4,220.00
		CAL CONTRIBUTIONS	L CANC)	\$ 52,632.76
EXPENDITURE	`	PLEDGES, LOANS, OR GUARANTEES OF AL EXPENDITURES OF \$100 OR LESS, UN	•	• 0.00
TOTALS				\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 48,893.35
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 13,335.25
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOA TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00
17 AFFADAVIT			penalty of perjury, that the acudes all information required Code.	
			Mr. Philip A. Grant	
		Signa	ture of Candidate or Officeho	older
AFFIX NO	ГARY STAMP / SEAL AB	OVE		
Sworn to and subsc	cribed before me, by the s	aid	, this the	day
of	, 20, to c	rtify which, witness my hand and seal of offi	ce.	
Signature of offic	er administering oath	Printed name of officer administering o	ath Title of office	er administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

			3 of 96
18 FILER	NAME	19 Filer ID	(Ethics Commission Filers)
Grant,	Philip A. (Mr.)	00080027	
l	ULE SUBTOTALS		SUBTOTAL AMOUNT
IVAIVIE	DF SCHEDULE		
1.	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 43,407.76
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 9,225.00
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 48,893.35
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
			•

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.		pages Schedule A(J)1: 1/46 Rpt: 4/96	:
2	FILER NAME Grant, Philip	A. (Mr.)			3 Filer I 0008	D (Ethics Commission 0027	on Filers)
4	Date 09/17/2015	5 Full name of contributor Adams, Daniel6 Contributor address; City;	out-of-state PAC (ID#:		7 Amou	int of Contribution (\$)	\$475.00
_	Contributorio	Conroe, TX 77304		O Contributorio Joh Titlo			
ď	Retired	Principal Occupation		9 Contributor's Job Title			
10	10 Contributor's employer/law firm			oouse (if ar	ny)		
12		s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amou	int of Contribution (\$)	
	09/17/2015	Adams, Daniel Contributor address; City;	State; Zip Code				\$30.00
		Conroe, TX 77304					
	Contributor's I	Principal Occupation		Contributor's Job Title	<u>I</u>		
	Retired						
		employer/law firm		Law firm of contributor's sp	oouse (if ar	ny)	
_	Retired	s a child, law firm of parent(s) (i	f any)				
	ii contributor i	s a crind, law iiiiii or parerii(s) (i	i arry)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amou	ınt of Contribution (\$)	
	12/08/2015	Addison, Glenn	_				\$100.00
		Contributor address; City; Magnolia, TX 77354	State; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Funeral Hon			Owner			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if ar	пу)	
	Magnolia Fu	neral Home					
	If contributor i	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL CONT	RIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to com	nplete this form.	1 Total pages Schedule A(J)1: Sch: 2/46 Rpt: 5/96
2	FILER NAME Grant, Philip	A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00080027
4	Date 08/31/2015	 5 Full name of contributor out-of-Allen, Chris 6 Contributor address; City; State; Zip C 	-state PAC (ID#:) Code	7 Amount of Contribution (\$) \$1,750.00
		Conroe, TX 77301		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney			
10		employer/law firm	11 Law firm of contributor's s	spouse (if any)
		f Chris Allen		
12	2 If contributor i	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor out-of-	-state PAC (ID#:)	Amount of Contribution (\$)
	11/04/2015	Allison, Stephen		\$250.00
		Contributor address; City; State; Zip C	rode	
		Contributor address, City, State, 219 C	ouc	
		DL:: ::: 04.00540		
		Blairsville, GA 30512		
		Principal Occupation	Contributor's Job Title	
	Attorney			
		employer/law firm	Law firm of contributor's s	spouse (if any)
	Law Office of	f Scott M. Ledford, LLC		
	If contributor	s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor	-state PAC (ID#:)	Amount of Contribution (\$)
	09/18/2015	Allison, Steve		\$100.00
		Contributor address; City; State; Zip C	rode	
		Liberty Hill, TX 78642		
	Contributor's	Principal Occupation	Contributor's Job Title	
	DA investiga	ator		
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Williamson (County		
	If contributor	s a child, law firm of parent(s) (if any)	•	
L				

N	IONET	ARY POLITICAL O	CONTRIBUTION	ONS	SCHEDULE A(J)1
T	he Instru	ction Guide explains how	to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/46 Rpt: 6/96
	LER NAME				3 Filer ID (Ethics Commission Filers) 00080027
4 Da	09/17/2015 Anderson, Kristen 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$30.00	
		Montgomery, TX 77356			
		Principal Occupation		9 Contributor's Job Title	•
				11 Law firm of contributor's s	pouse (if any)
		s a child, law firm of parent(s) (if a	any)		
Date Full name of contributor out-of-state PAC (ID# 09/17/2015 Andrea, Fry Contributor address; City; State; Zip Code		:)	Amount of Contribution (\$) \$160.00		
C	ontributor's	The Woodlands, TX 7738 Principal Occupation	1	Contributor's Job Title	
	omemakei			CONTRIBUTOR 3 300 File	
	ontributor's elf	employer/law firm		Law firm of contributor's s	pouse (if any)
If (contributor	s a child, law firm of parent(s) (if a	any)	1	
	ate L/04/2015	Full name of contributor Armbruster, Bob Contributor address; City; St	out-of-state PAC (ID#	:)	Amount of Contribution (\$) \$150.00
		Houston, TX 77007			
	ontributor's torney	Principal Occupation		Contributor's Job Title	
		employer/law firm lice Officer's Union		Law firm of contributor's s	pouse (if any)
If (contributor	s a child, law firm of parent(s) (if a	nny)	•	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	J)1
	The Instru	ction Guide explains ho	w to complete this	form.		pages Schedule A(J)1: 4/46 Rpt: 7/96	
2	FILER NAME Grant, Philip	A. (Mr.)				ID (Ethics Commission Fi	lers)
4	Date 07/20/2015	5 Full name of contributor Atkinson, Douglas6 Contributor address; City;	out-of-state PAC (ID#:		7 Amo	unt of Contribution (\$) \$2,	500.00
		Montgomery, TX 77356					
8		Principal Occupation		9 Contributor's Job Title			
_	Attorney						
10	Douglas W.	employer/law firm Atkinson		11 Law firm of contributor's sp	oouse (if a	.ny)	
12		s a child, law firm of parent(s) (if	f anv)				
		, , , , , , , , , , , , , , , , , , , ,	,				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	unt of Contribution (\$)	
	09/17/2015 Bendiksen, Mike				125.00		
		Contributor address; City;	State; Zip Code				
		Montgomery, TX 77359					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Retired						
		employer/law firm		Law firm of contributor's sp	oouse (if a	ny)	
	Retired						
	it contributor is	s a child, law firm of parent(s) (if	rany)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	unt of Contribution (\$)	
	11/03/2015	Blackburn, Celeste					,000.00
		Contributor address; City;	State; Zip Code				
		Conroe, TX 77304					
		Principal Occupation		Contributor's Job Title			
	Attorney						
		employer/law firm kburn, P.L.L.C.		Law firm of contributor's sp	oouse (if a	.ny)	
		s a child, law firm of parent(s) (if	f any)				
	ii continuator i	s a crima, law initi of parcria(s) (ii	arry)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	al pages Schedule A(J)2 n: 5/46 Rpt: 8/96	L:
2	FILER NAME Grant, Philip	A. (Mr.)			1	r ID (Ethics Commissi 080027	on Filers)
4	Date 09/17/2015	5 Full name of contributor Blair, Samantha6 Contributor address; City; S	out-of-state PAC (ID#:)	7 Am	ount of Contribution (\$)	\$40.00
Ļ		Montgomery, TX 77316		T			
8		Principal Occupation		9 Contributor's Job Title			
10	Stylist 10 Contributor's employer/law firm Self 11 Law firm of contributor's sp				oouse (if	any)	
12		s a child, law firm of parent(s) (if	anv)				
		(-)(,,				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Am	ount of Contribution (\$)	
	09/28/2015 Blakewell, Michael Contributor address; City; State; Zip Code				\$1,000.00		
		The Woodlands, TX 773	80				
		Principal Occupation		Contributor's Job Title			
	CEO	and a conflored fine		Laur firms of contributous on	(if		
	Entergy	employer/law firm		Law firm of contributor's sp	ouse (ii	any)	
		s a child, law firm of parent(s) (if	anv)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Am	ount of Contribution (\$)	
	10/15/2015	Bourque, Gerald	–			,	\$1,000.00
		Contributor address; City; S					
		The Woodlands, TX 773	80				
		Principal Occupation		Contributor's Job Title			
	Attorney	ampleyer/less firm		Low firm of contributorio or	acusa (if	om/)	
		employer/law firm Gerald E. Bourque		Law firm of contributor's sp	oouse (ii	any)	
H		s a child, law firm of parent(s) (if	anv)				
		(-)(,,				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.		ages Schedule A(J)1: 46 Rpt: 9/96
2	FILER NAME Grant, Philip				3 Filer ID 000800	(Ethics Commission Filers)
4	Date 09/28/2015	Full name of contributor Boyett, Molly Contributor address; City;	out-of-state PAC (ID#:		7 Amount	of Contribution (\$) \$25.00
		Spring, TX 77388		_		
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title		
10	Contributor's Retired	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any)	ı		
Date Full name of contributor out-of-state PAC (ID# 09/17/2015 Boyett, Molly Contributor address; City; State; Zip Code			Amount	of Contribution (\$) \$220.00		
	Cantuilautaula	Spring, TX 77388		Contributorio Joh Tida		
	Retired	Principal Occupation		Contributor's Job Title		
	Contributor's Retired	employer/law firm		Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	_		
	Date 07/01/2015	Full name of contributor Brown, Kathy Contributor address; City;	out-of-state PAC (ID#:		Amount	of Contribution (\$) \$50.00
		Austin, TX 78735				
	Contributor's Housewife	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE /	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	ages Schedule A(J)1: 746 Rpt: 10/96	:
2	FILER NAME Grant, Philip				3 Filer ID 00080	(Ethics Commission	on Filers)
4	Date 09/02/2015	Full name of contributor Buckalew, Don Contributor address; City;	out-of-state PAC (ID#:		7 Amoun	t of Contribution (\$)	\$500.00
		Conroe, TX 77305					
8	_	Principal Occupation		9 Contributor's Job Title			
10	Owner	and a law of the sections		44 Law Since of a catalla stanlar	unaviaa (if ani	<u></u>	
10	Buckalew C	employer/law firm heyrolet		11 Law firm of contributor's s	spouse (if any	')	
12		s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amoun	t of Contribution (\$)	
	09/03/2015	Buckalew Jr., Don					\$250.00
		Contributor address; City; Conroe, TX 77305	State, Zip Code				
	Contributor's	Principal Occupation		Contributor's Job Title			
	Owner						
		employer/law firm		Law firm of contributor's s	spouse (if any	<i>'</i>)	
	Buckalew C	hevrolet					
	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amoun	t of Contribution (\$)	
	09/17/2015	Bulger, Kenni					\$450.00
		Contributor address; City;					
	Contributorio	Conroe, TX 77304		Contributor's Job Title			
	Owner	Principal Occupation		Contributor's Job Title			
		employer/law firm		Law firm of contributor's s	spouse (if any	·)	
	The Carriag						
	If contributor i	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 8/46 Rpt: 11/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/25/2015	5 Full name of contributor Butler, Rockey6 Contributor address; City; \$	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Willis, TX 77318-4954				
8		Principal Occupation		9 Contributor's Job Title		
_	Construction					
10	10 Contributor's employer/law firm Self			oous	e (if any)	
12		s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/17/2015	Byrd, Richard Contributor address; City; \$	State; Zip Code			\$50.00
		Conroe, TX 77384-4713				
Г	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired					
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired	a a abile! lavy firms of managet(a) (if				
	ii contributor i	s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/17/2015	Calhoun, Tempe	— (\$425.00
		Contributor address; City; S Montgomery, TX 77356	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Paralegal	inisipai decapation				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Montgomery	County				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	so	CHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages S Sch: 9/46 R	
2	FILER NAME Grant, Philip				3 Filer ID (Eth 00080027	nics Commission Filers)
4	Date 09/17/2015	5 Full name of contributor Cash, Philip	out-of-state PAC (ID#:		7 Amount of Co	entribution (\$) \$50.00
		Willis, TX 77378				
8		Principal Occupation		9 Contributor's Job Title		
	Sheriff's Dep					
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)	
	Montgomery					
12	If contributor i	s a child, law firm of parent(s) (if any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Co	ontribution (\$)
	08/31/2015	Ciborowski, Amy	.			\$500.00
		Contributor address; City;	State: Zip Code			
			э			
		Magnolia, TX 77354				
	Contributor's	Principal Occupation		Contributor's Job Title	1	
	Homemaker	•				
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)	
	Self					
	If contributor i	s a child, law firm of parent(s) (if any)	1		
	Doto	Full name of contributor		<u> </u>	Amount of Co	entribution (t)
	Date 12/18/2015	Clifton, Bruce	out-of-state PAC (ID#:)	Amount of Co	\$100.00
	12/10/2013		Ot-t 7'- O-d-			\$100.00
		Contributor address; City;	State; Zip Code			
		Magnolia, TX 77355				
	Contributor's	Principal Occupation		Contributor's Job Title	•	
	Owner					
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)	
	Clifton Drillin	ng Consulting Inc				
	If contributor i	s a child, law firm of parent(s) (if any)			
_						

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/46 Rpt: 13/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	5 Full name of contributor Consolidated Communi 6 Contributor address; City;			7	Amount of Contribution (\$) \$200.00
		Conroe, TX 77304				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	e (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)
	09/17/2015	Contributor address; City;	State; Zip Code			\$15.00
	0	Conroe, TX 77304		I 0		
	Assistant DA	Principal Occupation		Contributor's Job Title		
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Montgomery					, , ,
	If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/17/2015	Corradi, Sara	_			\$1,035.00
		Contributor address; City; Conroe, TX 77304	State; Zip Code			
-	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Assistant DA			Continuator 3 300 Title		
Н	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Montgomery	County				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/46 Rpt: 14/96
2	FILER NAME Grant, Philip	A. (Mr.)			1	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	Full name of contributor Coyne, Bev Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$60.00
		Montgomery, TX 77356				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	L		
	Date Full name of contributor out-of-state PAC (ID#:) 12/08/2015 Damuth, Dorie Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$50.00		
		Magnolia, TX 77354				
		Principal Occupation		Contributor's Job Title		
	Self	employer/law firm	fond	Law firm of contributor's sp	oous	e (if any)
	ii continuutoi ii	s a child, law firm of parent(s) (i	iany)			
	Date 09/17/2015	Full name of contributor Daniels, Joel Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$150.00
		Spring, TX 77381				
	Contributor's Assistant DA	Principal Occupation		Contributor's Job Title	•	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Montgomery		f am.)			
	ii continuutot E	s a child, law firm of parent(s) (i	, wiy)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	ages Schedule A(J)1: 2/46 Rpt: 15/96	
2	FILER NAME Grant, Philip				3 Filer ID 000800	(Ethics Commissio	n Filers)
4	Date 09/17/2015	5 Full name of contributor Davenport, Stephanne	out-of-state PAC (ID#:		7 Amount	of Contribution (\$)	\$325.00
		Conroe, TX 77304					
8	Contributor's	Principal Occupation		9 Contributor's Job Title			
	Treasurer						
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)	
	Montgomery	/ County					
12	2 If contributor i	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount	of Contribution (\$)	
	09/17/2015	DeForest, Gene					\$100.00
		Contributor address; City;	State; Zip Code				
		, ,,	, ,				
		Conroe, TX 77305					
-	Contributor's	I Principal Occupation		Contributor's Job Title			
	Constable						
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	
	Montgomery						
	If contributor i	is a child, law firm of parent(s) (if any)				
			• ,				
F	Date	Full name of contributor	out-of-state PAC (ID#:	.)	Amount	of Contribution (\$)	
	09/11/2015	DiMaio, Samantha				(,,	\$50.00
		1	State: Zip Code				
		Containation additionally city,	June 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
		San Antonio, TX 78256					
	Contributor's	Principal Occupation		Contributor's Job Title			
	Assistant DA	A					
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)	
	Bexar Coun	ty					
	If contributor	s a child, law firm of parent(s) (if any)	•			
H							

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/46 Rpt: 16/96
2	FILER NAME Grant, Philip				3	Filer ID (Ethics Commission Filers) 00080027
4	Date 08/28/2015	28/2015 Dishongh, Johnnie 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$2,500.00	
		Conroe, TX 77301		T		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10		employer/law firm ail Bonds		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/17/2015 Doyal, Craig Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$200.00		
		Conroe, TX 77305				
		Principal Occupation		Contributor's Job Title		
	County Judg	ge employer/law firm		Law firm of contributor's sp	20116	on (if any)
	Montgomery			Law IIIII of Contributor's Sp	Jous	e (ii ariy)
		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/09/2015	Doyle, Paul Contributor address; City; Houston, TX 77002	State; Zip Code			\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney					
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		and Associates				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 14/46 Rpt: 17/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/30/2015	5 Full name of contributor Drewniok, Sally6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$265.00
		Willis, TX 77318-5234				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm Retired 11 Law firm of contributor's sp			oous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date Full name of contributor out-of-state PAC (ID#:) 11/12/2015 Driskell, Craig Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00		
	Contributor's F	Arlington, TX 76016 Principal Occupation		Contributor's Job Title		
	Attorney Contributor's 6 CLEAT	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/18/2015 Dunman, Ray Contributor address; City; State; Zip Code Highlands, TX 77562				\$250.00	
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired					
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL CON	TRIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to co	omplete this f	orm.	1	ges Schedule A(J)1: /46 Rpt: 18/96	
2	FILER NAME Grant, Philip				3 Filer ID 000800	(Ethics Commissio 27	n Filers)
4	Date 09/01/2015			7 Amount	of Contribution (\$)	\$250.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
	10 Contributor's employer/law firm Montgomery County 11 Law firm of contributor's spo		oouse (if any)				
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date O9/17/2015 Full name of contributor out-of-state PAC (ID#:) Dupuis, Philip Contributor address; City; State; Zip Code			Amount	of Contribution (\$)	\$110.00	
	Contributor's F	Montgomery, TX 77316 Principal Occupation		Contributor's Job Title			
	Police Chief						
	City of Hous	employer/law firm ton s a child, law firm of parent(s) (if any)		Law firm of contributor's sp	oouse (if any)		
	Date 09/17/2015	Full name of contributor out Enax, Blake Contributor address; City; State; Zip The Woodlands, TX 77382	t-of-state PAC (ID#:_ D Code)	Amount	of Contribution (\$)	\$45.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	ı		
	Assistant DA						
	Montgomery			Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	ı	otal pages Schedule A(J)1 ch: 16/46 Rpt: 19/96	:
2	FILER NAME Grant, Philip	A. (Mr.)			ı	iler ID (Ethics Commission 0080027	on Filers)
4	Date 09/16/2015	6 Contributor address; City; State; Zip Code		7 A	mount of Contribution (\$)	\$250.00	
		Magnolia, TX 77354					
8		Principal Occupation		9 Contributor's Job Title			
10		employer/law firm County Public Health		11 Law firm of contributor's sp	ouse ((if any)	
12		s a child, law firm of parent(s) (i	f any)	<u> </u>			
	Date 09/17/2015	Full name of contributor Faulkner, Darla Contributor address; City;	out-of-state PAC (ID#:		A	mount of Contribution (\$)	\$130.00
		Huntsville, TX 77340 Principal Occupation		Contributor's Job Title			
L	Assistant DA	employer/law firm		Law firm of contributor's sp	201100	(if any)	
	Montgomery			Law IIIII of Contributor 3 Sp	ouse ((ii diriy)	
	If contributor is	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	09/17/2015	Femea, Erin Contributor address; City; Spring, TX 77388	State; Zip Code				\$120.00
_	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>		
	Legal Assist	ant					
Contributor's employer/law firm Law firm of contributor's s			ouse ((if any)			
	Montgomery						
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 17/46 Rpt: 20/96
2	FILER NAME Grant, Philip	A. (Mr.)			1	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/18/2015	5 Full name of contributor Ferdinand, Michael 6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Magnolia, TX 77354				
8		Principal Occupation		9 Contributor's Job Title		
10	Owner 10 Contributor's employer/law firm Interquest Group 11 Law firm of contributor's specific properties of the con			oouse	e (if any)	
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	Quit of state BAC (ID#:	,	ī	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:) 09/17/2015 Franke, Marion Contributor address; City; State; Zip Code			\$30.00		
		Willis, TX 77378				
		Principal Occupation		Contributor's Job Title	<u> </u>	
	Realtor					
	Keller Williar	employer/law firm ms		Law firm of contributor's sp	oouse	e (If any)
		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	'	Amount of Contribution (\$)
	07/03/2015	Franke, Marion Contributor address; City;	State; Zip Code			\$1,000.00
		Willis, TX 77378				
	Contributor's Realtor	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Keller Williar	ns				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete t	his form.	1 Total pages Schedule A(J)1: Sch: 18/46 Rpt: 21/96
2	FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	Full name of contributor		7 Amount of Contribution (\$) \$200.00
		Spring, TX 77393		
8		Principal Occupation	9 Contributor's Job Title	
	Constable			
10		employer/law firm	11 Law firm of contributor's s	spouse (if any)
	Montgomery			
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of Contribution (\$)
	09/17/2015	Garcia, Lorena		\$100.00
		Contributor address; City; State; Zip Code		··
		, , , , , , , , , , , , , , , , , , ,		
		Conroe, TX 77303-2266		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Director of C			
_	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Montgomery			, , , , , , , , , , , , , , , , , , , ,
_		s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor	(ID#:)	Amount of Contribution (\$)
	09/17/2015	Gebolys, Paul		\$17.76
		Contributor address; City; State; Zip Code		··
		The Woodlands, TX 77381		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Instructor			
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Heart of Tex	as DD School		
	If contributor	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 19/46 Rpt: 22/96
2	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/16/2015	5 Full name of contributor Gentry, James6 Contributor address; City;	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$250.00
		Conroe, TX 77305			
8		Principal Occupation		9 Contributor's Job Title	
_	Real Estate				
10	Self	employer/law firm		11 Law firm of contributor's s	spouse (if any)
12		s a child, law firm of parent(s) (i	if any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/17/2015 Grant, Carolyn			\$90.00		
		Contributor address; City; Georgetown, TX 78633	State; Zip Code		
	Contributor's	Principal Occupation		Contributor's Job Title	
	Retired	Filicipal Оссирацоп		Continuator 5 300 Title	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (i	if any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/17/2015	Grant, Carolyn	_		\$810.00
		Contributor address; City;	State; Zip Code		
		Georgetown, TX 78633			
	Contributor's Retired	Principal Occupation		Contributor's Job Title	-
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Retired				
	If contributor i	s a child, law firm of parent(s) (i	if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 20/46 Rpt: 23/96
	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4	4 Date 11/04/2015 5 Full name of contributor out-of-state PAC (ID#: Grant, Chuck 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$500.00	
		DENTON, TX 76205		_	
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date 09/17/2015	Full name of contributor Green, Janet Contributor address; City;	out-of-state PAC (ID#		Amount of Contribution (\$) \$800.00
	Contributor's	Conroe, TX 77303-459	0	Contributor's Job Title	
	Retired Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Retired If contributor i	s a child, law firm of parent(s) (if any)		
	Date 09/17/2015	Contributor address; City;	· '		Amount of Contribution (\$)
	Contributor's	Montgomery, TX 77356 Principal Occupation)	Contributor's Job Title	
	Contributor's Retired	employer/law firm s a child, law firm of parent(s) (if any)	Law firm of contributor's s	pouse (if any)
	ii contributor i	s a crilid, law lirm of parent(s) (ii any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 21/46 Rpt: 24/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	5 Full name of contributor Hall, David6 Contributor address; City;			7	Amount of Contribution (\$) \$50.00
L	Contributorio	The Woodlands, TX 773	880	Contributorio Joh Titlo		
8	Retired	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm Retired 11 Law firm of contributor's sp			pous	e (if any)	
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	11/05/2015 Ham, Duane Contributor address; City; State; Zip Code				\$225.00	
	Contributor's I	Montgomery, TX 77356 Principal Occupation		Contributor's Job Title		
	Business Ov			Continuator \$ 300 Title		
		employer/law firm		Law firm of contributor's sp	pous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	fany)	I .		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/04/2015 Hardin, Nancy Contributor address; City; State; Zip Code				\$100.00	
	Contributor's F	Chapel Hill, NC 27516 Principal Occupation		Contributor's Job Title		
	Retired	- micipal Occupation		Contributor 3 30b Title		
		employer/law firm		Law firm of contributor's sp	pous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	any)			

MONET	ARY POLITICAL CO	NTRIBUTIONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to	complete this form.	1 Total pages Schedule A(J)1: Sch: 22/46 Rpt: 25/96
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 Date 09/13/2015			7 Amount of Contribution (\$) \$250.00
	Montgomery, TX 77356		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	•
Nurse			
	employer/law firm	11 Law firm of contributor's	spouse (if any)
	impson, M.D.		
12 If contributor i	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	but of ctata DAC (ID#:	Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#: 09/16/2015 Hatchley, Robert		Jul-oi-State PAC (ID#)	\$115.00
00/10/2010	Contributor address; City; State; Zip Code		
	, , , , , , , , , , , , , , , , , , , ,		
	Montgomery, TX 77356		
Contributor's	Principal Occupation	Contributor's Job Title	•
Retired			
	employer/law firm	Law firm of contributor's	spouse (if any)
Retired			
If contributor i	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/16/2015	Hayden, Jerry		\$250.00
	Contributor address; City; State; 2	Zip Code	
	Cleveland, TX 77328		
Contributor's	Principal Occupation	Contributor's Job Title	•
Clerk			
	employer/law firm	Law firm of contributor's	spouse (if any)
Montgomery			
If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 23/46 Rpt: 26/96
2	FILER NAME				3 Filer ID (Ethics Commission Filers) 00080027
Grant, Philip A. (Mr.) 4 Date			7 Amount of Contribution (\$) \$100.00		
		Conroe, TX 77388-903	0		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Assistant DA				
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Montgomery				
12	If contributor i	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	09/17/2015	Hicks, Marcy	–		\$30.00
		Contributor address; City;	State; Zip Code		····
		,	,		
		Conroe, TX 77304			
	Contributor's	Principal Occupation		Contributor's Job Title	
		ource Manager			
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	HTRI	, ,			
	If contributor	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	09/17/2015	Hill, David	–		\$100.00
		Contributor address; City;	State; Zip Code		····
			. ,		
		Magnolia, TX 77355			
	Contributor's	Principal Occupation		Contributor's Job Title	-
	Constable				
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Montgomery	/ County			
	If contributor	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 24/46 Rpt: 27/96	
2	FILER NAME Grant, Philip				1	iler ID (Ethics Commission	Filers)
4				7 A	amount of Contribution (\$)	\$200.00	
		Montgomery, TX 77356	<u> </u>				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title			
10	Contributor's Retired	employer/law firm		11 Law firm of contributor's s	pouse	(if any)	
12	! If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>			
Date Full name of contributor out-of-state PAC (09/17/2015 Howard, TJ Contributor address; City; State; Zip Code		out-of-state PAC (ID#:			smount of Contribution (\$)	\$150.00	
	Contributor's	Willis, TX 77318-5671 Principal Occupation		Contributor's Job Title			
		employer/law firm		Law firm of contributor's s	pouse	(if any)	
	Retired If contributor i	is a child, law firm of parent(s) (if any)				
	Date 10/06/2015	Full name of contributor Hyden, Toby Contributor address; City;	out-of-state PAC (ID#:		A	amount of Contribution (\$)	\$150.00
		Conroe, TX 77304		T			
	Contributor's Realtor	Principal Occupation		Contributor's Job Title			
	Contributor's Keller Willian	employer/law firm ms		Law firm of contributor's s	pouse	(if any)	
	If contributor i	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	s	CHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Sch: 25/46	Schedule A(J)1: Rpt: 28/96
2	FILER NAME Grant, Philip				3 Filer ID (E 00080027	thics Commission Filers)
4)	7 Amount of C	Contribution (\$) \$75.00	
		Montgomery, TX 77356	5			
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title		
10	Contributor's Retired	employer/law firm		11 Law firm of contributor's s	spouse (if any)	
12	If contributor i	s a child, law firm of parent(s) (if any)	1		
	Date Full name of contributor out-of-state PAC (II 09/17/2015 Johnson, Karl Contributor address; City; State; Zip Code		out-of-state PAC (ID#:		Amount of C	Contribution (\$) \$1,395.00
		Montgomery, TX 77316	3			
	Contributor's Retired	Principal Occupation		Contributor's Job Title		
	Silver Hills,			Law firm of contributor's s	spouse (if any)	
	If contributor i	is a child, law firm of parent(s) (if any)			
	Date 10/07/2015	Full name of contributor Jordan, Jennifer Contributor address; City;	out-of-state PAC (ID#:		Amount of C	Contribution (\$) \$60.00
		Conroe, TX 77304				
	Contributor's Assistant DA	Principal Occupation		Contributor's Job Title		
	Montgomery		if and	Law firm of contributor's s	spouse (if any)	
	continuator l	is a child, law firm of parent(s) (wiy)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 26/46 Rpt: 29/96
2	FILER NAME Grant, Philip	A. (Mr.)			1	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	Full name of contributor Kennedy, Kevin Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$15.00
		Montgomery, TX 77356				
8		Principal Occupation		9 Contributor's Job Title		
	President					
10		employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
_	Kennedy Fa					
12	IT CONTRIBUTOR IS	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/18/2015 Lehman, Donald Contributor address; City; State; Zip Code				\$100.00	
		The Woodlands, TX 773	80			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Retired					
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired		: \			
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/12/2015	Ligon, Brett	_			\$1,000.00
	Contributor address; City; State; Zip Code					
	Contributor's I	Montgomery, TX 77356 Principal Occupation		Contributor's Job Title	<u> </u>	
	District Attor			Continuator 3 300 Title		
				Law firm of contributor's sp	oous	e (if any)
	Contributor's employer/law firm Law firm of contributor's s State of Texas					()
	If contributor is	s a child, law firm of parent(s) (if	any)	<u>l</u>		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 27/46 Rpt: 30/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	5 Full name of contributor Ligon, Shannon6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$80.00
		Montgomery, TX 77356-	5933			
8		Principal Occupation		9 Contributor's Job Title		
_	Anadarko					
10	Acccountant	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (if	anv)			
		, p(-) (
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/17/2015 Lopez, Brandie Contributor address; City; State; Zip Code			\$15.00		
	Contributor's I	New Waverly, TX 77358	·	Contributor's Job Title		
	Clerk	- Inicipal Occupation		Continuator 5 300 Title		
-		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Montgomery	County				
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	07/21/2015	McCabe, Robert				\$200.00
	Contributor address; City; State; Zip Code					
		Georgetown, TX 78628		1		
	Contributor's I	Principal Occupation		Contributor's Job Title		
H		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	McCable La					(,)
	If contributor is	s a child, law firm of parent(s) (if	any)	I		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 28/46 Rpt: 31/96
2	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4 Date 5 Full name of contributor out-of-state PAC (ID#: 09/17/2015 McGarrahan, R.W. 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$200.00		
		Conroe, TX 77304			
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any)		
Date Full name of contributor out-of-state PAC (I 09/17/2015 Merillat, A.P. Contributor address; City; State; Zip Code		out-of-state PAC (ID#:		Amount of Contribution (\$) \$50.00	
	Contributor's	Conroe, TX 77304 Principal Occupation		Contributor's Job Title	
	Investigator				
	Contributor's Montgomery	employer/law firm / County		Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	_	
	Date 09/17/2015	Full name of contributor Metts Jr., James Contributor address; City;	out-of-state PAC (ID#:)	Amount of Contribution (\$) \$90.00
		Cleveland, TX 77328			
	Contributor's Owner	Principal Occupation		Contributor's Job Title	
	Contributor's Metts Comp	employer/law firm any		Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	•	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 29/46 Rpt: 32/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	Date 08/31/2015	5 Full name of contributor Michel, Thomas6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$150.00
		Montgomery, TX 77356				
8		Principal Occupation		9 Contributor's Job Title		
		inance and Administration				
10		employer/law firm River Authority		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/17/2015 Moore, J.R. Contributor address; City; State; Zip Code				\$100.00	
		The Woodlands, TX 773	81			
	Contributor's Retired	Principal Occupation		Contributor's Job Title		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/17/2015 Munier, Nathan Contributor address; City; State; Zip Code Houston, TX 77008				\$45.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Assistant DA	, ,				
	Contributor's employer/law firm Law firm of contributor's s			Law firm of contributor's sp	oous	se (if any)
	Montgomery	County				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 30/46 Rpt: 33/96
	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4 Date 07/05/2015 5 Full name of contributor out-of-state PAC (ID#: Naftzger, Sally 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$50.00		
		Austin, TX 78738			
		Principal Occupation		9 Contributor's Job Title	
	Housewife				
	Contributor's (employer/law firm		11 Law firm of contributor's s	pouse (if any)
			£ 2.0.1		
12	ii contributor i	s a child, law firm of parent(s) (i	i any)		
	 Date	Full name of contributor	out-of-state PAC (ID#:	`	Amount of Contribution (\$)
	09/18/2015	Osborn, Mary	U out-or-state PAC (ID#.	J	\$200.00
	00/10/2010	Contributor address; City;	State: Zin Code		
		Contributor address, City,	State, Zip Code		
		Conroe, TX 77304			
H	Contributor's	Principal Occupation		Contributor's Job Title	
	Law Clerk	тпора Оссаратоп		Contributor 3 30b Title	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Montgomery				
	If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	09/17/2015	Osborn, Mary	_		\$50.00
		Contributor address; City;	State; Zip Code		
		Conroe, TX 77304			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Law Clerk				
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Montgomery				
	If contributor i	s a child, law firm of parent(s) (i	fany)		
_					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 31/46 Rpt: 34/96
2	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4 Date 10/07/2015 5 Full name of contributor out-of-state PAC (ID#: Osborn, Mary 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$100.0		
		Conroe, TX 77304			
8		Principal Occupation		9 Contributor's Job Title	
	Law Clerk				
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Montgomery				
12	If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/03/2015	Pattillo, Bill	.		\$1,750.0
		Contributor address; City;	State: Zip Code		····· <mark> </mark>
		Conroe, TX 77301			
		Principal Occupation		Contributor's Job Title	
	Attorney				
		employer/law firm		Law firm of contributor's s	spouse (if any)
		of William Pattillo			
	If contributor	is a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/19/2015	Paul, Barbara	_		\$120.0
		Contributor address; City;	State; Zip Code		
		Montgomery, TX 77356	i		
	Contributor's Retired	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Retired				
	If contributor	is a child, law firm of parent(s) (if any)		
\vdash					

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 32/46 Rpt: 35/96
2	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4 Date 09/17/2015 Full name of contributor out-of-state PAC (ID#:			7 Amount of Contribution (\$) \$30.00		
		Conroe, TX 77301			
8		Principal Occupation		9 Contributor's Job Title	
	Legal Assist	ant			
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Montgomery	/ County			
12	If contributor i	s a child, law firm of parent(s) (if	any)		
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/17/2015	Phillips, Carmen			\$30.00
		Contributor address; City; S	state: Zin Code		···
		Contributor address, City, C	nate, Zip Gode		
		Montgomery, TX 77356			
		Principal Occupation		Contributor's Job Title	
	Interior Desi	gn			
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Haute Interio	ors			
	If contributor i	s a child, law firm of parent(s) (if	any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:	1	Amount of Contribution (\$)
	10/01/2015	Redmond, Rhonda	out of state 1 AC (IDII.		\$75.00
	10/01/2010	Contributor address; City; S	tata: 7in Coda		
		Contributor address, City, 3	nate, Zip Code		
		Magnolia, TX 77354			
	Contributor's	Principal Occupation		Contributor's Job Title	•
	Owner				
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Genuwine				
	If contributor i	s a child, law firm of parent(s) (if	any)		
l					

MONE	TARY POLITICAL CO	ONTRIBUTIONS	SCHEDULE A(J)1
The Inst	ruction Guide explains how t	o complete this form.	1 Total pages Schedule A(J)1: Sch: 33/46 Rpt: 36/96
2 FILER NAM	1E lip A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00080027
4 Date 09/17/201		out-of-state PAC (ID#:e; Zip Code	7 Amount of Contribution (\$) \$75.00
	Montgomery, TX 77356		
8 Contributor Teacher	's Principal Occupation	9 Contributor's J	ob Title
	's employer/law firm	11 Law firm of co	ntributor's spouse (if any)
	or is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-state PAC (ID 09/17/2015 Robert, Judy Contributor address; City; State; Zip Code		out-of-state PAC (ID#:e; Zip Code	
	Montgomery, TX 77356	T	
Contributor Self Empl	's Principal Occupation Dyed	Contributor's J	ob Title
	's employer/law firm	Law firm of co	ntributor's spouse (if any)
If contribute	or is a child, law firm of parent(s) (if any)	
Date 12/10/2015 Full name of contributor out-of-state PAC (ID#: Roelke, Gregg Contributor address; City; State; Zip Code		out-of-state PAC (ID#:e; Zip Code	Amount of Contribution (\$) \$100.00
Contributor	Magnolia, TX 77355 's Principal Occupation	Contributor's J	oh Titlo
Sales Rep	·	Continutors	ob ride
Ferrari Me	's employer/law firm erchants or is a child, law firm of parent(s) (if any		ntributor's spouse (if any)
		,	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 34/46 Rpt: 37/96
2	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4	4 Date 09/17/2015 5 Full name of contributor out-of-state PAC (ID#: Romanchuck, Lisa 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$390.00	
		Montgomery, TX 77356	i		
8		Principal Occupation		9 Contributor's Job Title	
	Housewife				
10	Contributor's Self	employer/law firm		11 Law firm of contributor's s	spouse (if any)
12	If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/17/2015	Sanders, Randy	out or state 1740 (IB#.		\$1,025.00
		Contributor address; City;	State; Zip Code		
		Conroe, TX 77305			
		Principal Occupation		Contributor's Job Title	
	District Direc				
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Centerpoint				
	if contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	09/17/2015	Santini, Vincenzo			\$15.00
		Contributor address; City;	State; Zip Code		
		Montgomery, TX 77356	i		
	Contributor's Assistant DA	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Montgomery	/ County			
	If contributor i	is a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	otal pages Schedule A(J)1: Sch: 35/46 Rpt: 38/96	
2	FILER NAME Grant, Philip	A. (Mr.)			1	iler ID (Ethics Commission File	ers)
4	09/17/2015 Scott, Stephen 6 Contributor address; City; State; Zip Code		7 A	amount of Contribution (\$)	50.00		
		Willis, TX 77318					
8		Principal Occupation		9 Contributor's Job Title			
40	Business Co			44 Landing of a stallant all a		Ct A	
10		employer/law firm n Business Coach		11 Law firm of contributor's sp	oouse	(II any)	
12		s a child, law firm of parent(s) (i	f anv)				
			•				
=	Date	Full name of contributor	out-of-state PAC (ID#:)	A	mount of Contribution (\$)	
	09/17/2015	Seiter, Billy Contributor address; City;	State; Zip Code			\$1,7	700.00
		Montgomery, TX 77356					
		Principal Occupation		Contributor's Job Title			
	Construction						
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse	(if any)	
	If contributor is	s a child, law firm of parent(s) (i	f any)				
F	Date	Full name of contributor	out-of-state PAC (ID#:)	I A	mount of Contribution (\$)	
	09/17/2015	Shaw, Doris					50.00
		Contributor address; City; Spring, TX 77373	State; Zip Code				
_	Contributor's F	Principal Occupation		Contributor's Job Title			
	Retired						
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)	
	Retired						
	If contributor is	s a child, law firm of parent(s) (i	f any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 36/46 Rpt: 39/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	09/17/2015 Sicola, Vincent 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$15.00		
		Houston, TX 77070				
8		Principal Occupation		9 Contributor's Job Title		
		ment company				
10		employer/law firm ment company		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	l		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	07/02/2015	Smith, Greg Contributor address; City;	<u> </u>			\$500.00
		Montgomery, TX 77356				
		Principal Occupation		Contributor's Job Title		
	Owner					
		employer/law firm n Memorial Funeral Home		Law firm of contributor's sp	oous	se (if any)
_		s a child, law firm of parent(s) (i	f any)			
	ii contributor i.	s a crilid, law littii or parerii(s) (i	i airy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/17/2015	Starr, Glen				\$150.00
		Contributor address; City; Conroe, TX 77304	State; Zip Code			
	Contributorio [Principal Occupation		Contributor's Job Title		
	Financial Ad			Continuator's 300 Title		
H		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self					(* 3.9)
	If contributor is	s a child, law firm of parent(s) (i	f any)	l		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 37/46 Rpt: 40/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	10/06/2015 Stephenson, John 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$60.00		
		Conroe, TX 77304				
8		Principal Occupation		9 Contributor's Job Title		
40	Investigator			44 Landing of a strike table		Ct
10	Montgomery	employer/law firm r County		11 Law firm of contributor's sp	oous	se (II any)
12		s a child, law firm of parent(s) (i	f anv)			
		- a, p (-) (,,			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/17/2015	Stephenson, John Contributor address; City;	<u> </u>			\$50.00
		Conroe, TX 77304				
		Principal Occupation		Contributor's Job Title		
	DA Investiga					
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Montgomery		family			
	ii contributor ii	s a child, law firm of parent(s) (i	i ally)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/17/2015	Stephenson, John				\$15.00
		Contributor address; City;	State; Zip Code			
		Conroe, TX 77304				
		Principal Occupation		Contributor's Job Title		
	DA Investiga			l and fines of a solub stantant		Ct
	Montgomery	employer/law firm		Law firm of contributor's sp	oous	se (If any)
		s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CO	NTRIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to	complete this form.	1 Total pages Schedule A(J)1: Sch: 38/46 Rpt: 41/96
2	FILER NAME Grant, Philip	A. (Mr.)		3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015	5 Full name of contributor	out-of-state PAC (ID#:) Zip Code	7 Amount of Contribution (\$) \$80.00
		Montgomery, TX 77356		
8	Contributor's Assistant DA	Principal Occupation	9 Contributor's Job Title	
10		employer/law firm	11 Law firm of contributor's	spouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	Date 09/17/2015	Full name of contributor Stricker, Kathy Contributor address; City; State; 2	out-of-state PAC (ID#:) Zip Code	Amount of Contribution (\$)
	O antributanta	Montgomery, TX 77356	Operation of the Title	
	Owner	Principal Occupation	Contributor's Job Title	
	Conroe Med	employer/law firm lical Message s a child, law firm of parent(s) (if any)	Law firm of contributor's	spouse (if any)
	Date 09/01/2015	Strong, Bret	out-of-state PAC (ID#:) Zip Code	Amount of Contribution (\$) \$250.00
		The Woodlands, TX 77380		
	Contributor's Attorney	Principal Occupation	Contributor's Job Title	
	Contributor's of The Strong I	employer/law firm Firm	Law firm of contributor's	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)	<u>'</u>	

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 39/46 Rpt: 42/96	
2	FILER NAME Grant, Philip	FILER NAME Grant, Philip A. (Mr.)			3 Filer ID (Ethics Commission Filers) 00080027	
4	10/16/2015 Suder, Aaron 6 Contributor address; City; State; Zip Code Houston, TX 77007		7 Amount of Contribution (\$) \$100.	00		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	,	
10		employer/law firm ice Officer's Union		11 Law firm of contributor's sp	pouse (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if an	y)			
	Date 07/30/2015	Full name of contributor Swineford, Lincoln Contributor address; City; Sta Moseley, VA 23120	out-of-state PAC (ID#:_		Amount of Contribution (\$)	00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Manager					
	Zannino Eng	employer/law firm gineering s a child, law firm of parent(s) (if an	у)	Law firm of contributor's sp	pouse (if any)	
	Date 09/17/2015	Full name of contributor Talbert, Dale Contributor address; City; Sta Montgomery, TX 77316	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	<u> </u>
	Contributor's F	I Principal Occupation		Contributor's Job Title	1	
	Contributor's e	employer/law firm If Montgomery Is a child, law firm of parent(s) (if an	y)	Law firm of contributor's sp	pouse (if any)	

	MONET	ARY POLITICAL CONT	TRIBUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to co	mplete this form.	1 Total pages Schedule A(J)1: Sch: 40/46 Rpt: 43/96
2	FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/17/2015		of-state PAC (ID#:) Code	7 Amount of Contribution (\$) \$100.00
		Conroe, TX 77303-3920		
8		Principal Occupation	9 Contributor's Job Title	
	Owner			
10		employer/law firm	11 Law firm of contributor's	spouse (if any)
_		Entertainment		
12	2 if contributor	s a child, law firm of parent(s) (if any)		
H	Date	Full name of contributor out-	of state DAC (ID#)	Amount of Contribution (\$)
	11/01/2015	Thompson, Charles	of-state PAC (ID#:)	\$75.00
	11/01/2013	Contributor address; City; State; Zip	Code	
		Contributor address, City, State, Zip	Code	
		Houston TV 77006		
_	0	Houston, TX 77006	Contributorio Joh Tillo	
	Attorney	Principal Occupation	Contributor's Job Title	
		employer/law firm	Law firm of contributor's	enouse (if any)
		Charles Thompson	Law IIIII of Contributor 3.	spouse (ii aiiy)
_		s a child, law firm of parent(s) (if any)		
	ii continuator	3 a cilia, law lilili of parcin(3) (ii ariy)		
H	Date	Full name of contributor Out-	of-state PAC (ID#:)	Amount of Contribution (\$)
	09/08/2015	Tidwell, James	or-state i AC (ID#)	\$100.00
	00/00/2020	Contributor address; City; State; Zip		
		Contributor address, City, State, 2.p	Code	
		Montgomery, TX 77316		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Retired			
		employer/law firm	Law firm of contributor's	spouse (if any)
	Retired			
	If contributor	s a child, law firm of parent(s) (if any)		

MONE	FARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	uction Guide explains ho	w to complete this	form.	1 Total pages Schedule A(J)1: Sch: 41/46 Rpt: 44/96
2 FILER NAME Grant, Phili				3 Filer ID (Ethics Commission Filers) 00080027
4 Date 09/16/2015 5 Full name of contributor out-of-state PAC (ID#: Tomlinson, Micah 6 Contributor address; City; State; Zip Code		:)	7 Amount of Contribution (\$) \$100.00	
	Montgomery, TX 77356			
8 Contributor's Doctor	Principal Occupation		9 Contributor's Job Title	
	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12 If contributor	is a child, law firm of parent(s) (if	any)	<u> </u>	
Date 09/17/2015	Full name of contributor Townsend, David Contributor address; City; \$	out-of-state PAC (ID#:	:)	Amount of Contribution (\$) \$100.00
	Montgomery, TX 77356			
Contributor's Retired	Principal Occupation		Contributor's Job Title	
Contributor's Retired	employer/law firm		Law firm of contributor's s	pouse (if any)
If contributor	is a child, law firm of parent(s) (if	any)		
Date 09/17/2015	Full name of contributor Traylor, Pamela Contributor address; City; \$	out-of-state PAC (ID#:	:)	Amount of Contribution (\$) \$100.00
	Conroe, TX 77303			
	Principal Occupation ess Coordinator		Contributor's Job Title	
Contributor's Montgomer	employer/law firm y County		Law firm of contributor's s	pouse (if any)
If contributor	is a child, law firm of parent(s) (if	any)	1	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 42/46 Rpt: 45/96
2	FILER NAME Grant, Philip				3	Filer ID (Ethics Commission Filers) 00080027
4	12/09/2015 Turnbull, Ed 6 Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00		
		Houston, TX 77007				
8		Principal Occupation		9 Contributor's Job Title		
40	Attorney			44 Landing of a strike table		Ct and
10	Turnbull Leg	employer/law firm		11 Law firm of contributor's sp	oous	e (If any)
12		s a child, law firm of parent(s) (i	f anv)			
1	. II COITHIDGEOLI	s a clina, law littl of parchi(s) (i	i diriy)			
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Т	Amount of Contribution (\$)
	09/15/2015	Vernon, Roy	out of state 1 Me (IB#.)		\$30.00
		Contributor address; City;	State: Zin Code		1	
		Contributor address, Oity,	State, Zip Gode			
		Montgomery, TX 77356				
	Contributor's I			Contributor's Job Title		
	Retired	Principal Occupation		Continuator's Job Title		
_		employer/law firm		Law firm of contributor's sp	20116	e (if any)
	Retired	employer/law mm		Law iiiiii oi continutioi 3 3	Jous	ic (ii diiy)
		s a child, law firm of parent(s) (i	f anv)			
	ii continuator i	s a clina, law littl of parchi(s) (i	i diriy)			
-	Date	Full name of contributor	out-of-state PAC (ID#:	1	Τ	Amount of Contribution (\$)
	09/17/2015	Walding, Michael	out of state 1 Me (IB#.	<i></i>		\$250.00
	00/11/1010	Contributor address; City;	State: 7in Code			+
		Contributor address, Oity,	State, Zip Gode			
		Montgomery, TX 77356				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Construction			Continuator 5 005 Title		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Lakeway Co				0000	(
		s a child, law firm of parent(s) (i	f anv)			
		- a , , (-) (-	,,			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 43/46 Rpt: 46/96
2	FILER NAME Grant, Philip				3 Filer ID (Ethics Commission Filers) 00080027
4	Date 10/01/2015	Full name of contributor Walker, Jarrod Contributor address; City;	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$725.00
		Conroe, TX 77301			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney				
10	Contributor's Self	employer/law firm		11 Law firm of contributor's s	spouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)	1	
H	Data	Full recipe of contributor			Associated Contribution (f)
	Date 08/17/2015	Full name of contributor Webb, Brenda	out-of-state PAC (ID#:)	Amount of Contribution (\$) \$250.00
	00/11/2015	Contributor address; City;	Ot-t 7'- O-d-		Ψ250.00
		New Caney, TX 77357			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Public Offici			Continuator 3 300 Title	
_		employer/law firm		Law firm of contributor's s	spouse (if any)
		mery County Improvement	District		
	If contributor i	s a child, law firm of parent(s) (if any)	1	
H	Date	Full name of contributor	out-of-state PAC (ID#:	.)	Amount of Contribution (\$)
	09/17/2015	Welsh, Charlotte	United State FAC (ID#.	J	\$35.00
	00/11/1010		State; Zip Code		
		Conroe, TX 77301			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Paralegal	- ппстрат Оссарацоп		Contributor 3 300 Title	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Linebarger (Googan Blair			
	If contributor i	s a child, law firm of parent(s) (if any)	•	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 44/46 Rpt: 47/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	09/19/2015 White, Michael 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$350.00		
		Montgomery, TX 77356				
8	Contributor's F Deputy	Principal Occupation		9 Contributor's Job Title		
10	Contributor's of Montgomery	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	any)	<u> </u>		
	Date 09/17/2015	Full name of contributor Wilder, Kyla Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$30.00
		The Woodlands, TX 773	80			
		Principal Occupation		Contributor's Job Title		
	Paralegal					
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	The Strong F		i anu)			
	ii contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	09/17/2015	Williams, Jamaar				\$15.00
		Contributor address; City; S Willis, TX 77318				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	incipal Occupation		Contributor 3 30b Title		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 45/46 Rpt: 48/96
2	FILER NAME Grant, Philip	A. (Mr.)			3	Filer ID (Ethics Commission Filers) 00080027
4	08/02/2015 Williams, Shay 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$200.00		
		Montgomery, TX 77356				
8		Principal Occupation		9 Contributor's Job Title		
_	Owner			44 Landing of a stall stall a		Ct
10	Kiva Consult	employer/law firm tina		11 Law firm of contributor's sp	oous	se (II any)
12		s a child, law firm of parent(s) (if	anv)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	09/17/2015	Williams, Stephen Contributor address; City;	<u> </u>			\$15.00
	Contributorio	Montgomery, TX 77356 Principal Occupation		Contributor's Job Title		
	Finance Mar			Continuator's Job Title		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	City of Conro	, ,				
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	08/01/2015	Zamalis, Michael				\$75.00
		Contributor address; City; Mount Sidney, VA 2446				
	Contributor's F	Principal Occupation	•	Contributor's Job Title	<u> </u>	
	Director of E					
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Daikin Indus	tries				
	If contributor is	s a child, law firm of parent(s) (if	any)			

MONET	TARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 46/46 Rpt: 49/96
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 Date 09/17/2015	 Full name of contributor		7 Amount of Contribution (\$) \$60.00
	Montgomery, TX 77356		
	Principal Occupation	9 Contributor's Job Title	
	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
Keller Willian	ms is a child, law firm of parent(s) (if any)		

SCH	HED	UL	E	Α2

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2:
	· · · · · · · · · · · · · · · · · · ·		Sch: 1/14 Rpt: 50/96
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/17/2015	 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) 9 In-kind contribution description \$150.00 Gift Certificate
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
12 Contributor's Dry cleaning	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's Loop Clean	employer/law firm (FOR JUDICIAL) ers	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Butler, Rockey Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$1,000.00 Bilboard space
Principal occi	Willis, TX 77318-4954 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
Contributor's Construction	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Self	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Castleschouldt, Stephanie Contributor address; City; State; Zip Code Conroe, TX 77301		Amount of In-kind contribution contribution (\$) description \$75.00 I Desk
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's Owner	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Moxie Hair a	employer/law firm (FOR JUDICIAL) and Wigs	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 2/14 Rpt: 51/96
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Grant, Philip	o A. (Mr.)		00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
09/17/2015	DeCastro, Kacie		contribution (\$) description \$35.00 Haircut
	7 Contributor address; City; State; Zip Code		I \$33.001 HallCut
	Conroe, TX 77304		Check if travel outside of Texas. Complete Schedule T
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Owner			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Krimped by			
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Data	Full name of contributor		Amount of In kind contribution
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
09/11/2015			\$60.00 Wine basket
	Contributor address; City; State; Zip Code		
			ļ į
	Conroe, TX 77305		_ ;
Dringing con	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	L Check if travel outside of Texas. Complete Schedule T J-JUDICIAL) (See instructions)
Principal occi	apation / Job title (FOR NON-JODICIAL) (See instructions)	Employer (FOR NON	1-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
County Judg	ge		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Montgomery	y County		
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
Date	Full name of contributor ut-of-state PAC (ID#:	`	Amount of ! In-kind contribution
09/17/2015	Dunman, Tyler		contribution (\$) description
03/11/2013	Contributor address; City; State; Zip Code		\$170.00 Football tickets and
	Continuator address, City, State, Zip Code		parking pass
			<u> </u>
	Montgomery, TX 77316		Check if travel outside of Texas. Complete Schedule T
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	•
i illioipai oool	apadon / cos dae (i orchest cos ion L)	Employer (Fortitor)	(332,000)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Assistant D			(
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	y County District Attorney	Law iiiii oi contiibutt	or o operate (ii arry) (i or obbioine)
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)]	
ii continuator	is a crima, raw mini or parerill(s) (ii arry) (FOR SODICIAL)		
ı			

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Scl	
9			Sch: 3/14 Rpt	
2 FILER NAME Grant, Philip			3 Filer ID (Ethic 00080027	s Commission Filers)
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 09/17/2015	6 Full name of contributor ☐ out-of-state PAC (ID#:)	contribution (\$)	9 In-kind contribution description Skeet package
	Montgomery, TX 77316		Check if travel of	I butside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON		nstructions)
12 Contributor's Police Chie	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL)	(See instructions)
	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
City of Conr				,
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Evans, Christi Contributor address; City; State; Zip Code)	Amount of contribution (\$) \$800.00	In-kind contribution description Wine Dinner and Round of Golf for Four
	Montgomery, TX 77356		Check if travel of	I I outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See ii	nstructions)
Contributor's Construction	principal occupation (FOR JUDICIAL) n	Contributor's job title	(FOR JUDICIAL)	(See instructions)
Contributor's Silverlake H	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Freyer, Robert Contributor address; City; State; Zip Code)		In-kind contribution description Duck hunt, and two weekend beach house rentals.
	Spring, TX 77382		Check if travel of	l butside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON		nstructions)
Contributor's Attorney	principal occupation (FOR JUDICIAL)	Contributor's job title Assistant DA	(FOR JUDICIAL)	(See instructions)
	employer/law firm (FOR JUDICIAL) y County District Attorney	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2:
			Sch: 4/14 Rpt: 53/96
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/17/2015	 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) 9 In-kind contribution description \$100.00 Gift Certificate
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's Owner	principal occupation (FOR JUDICIAL)	13 Contributor's job title	FOR JUDICIAL) (See instructions)
14 Contributor's Red Brick T	employer/law firm (FOR JUDICIAL) avern	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Grant, Carolyn Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$35.00 Mens Watch
	Georgetown, TX 78633		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's Retired	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Retired	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Grant, Carolyn Contributor address; City; State; Zip Code Georgetown, TX 78633		Amount of contribution (\$) In-kind contribution description \$150.00 Nolan Ryan Autograph Picture Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's Retired	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Retired	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

	The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 5/14 Rpt: 54/96
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Grant, Philip			00080027
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5	Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
	09/17/2015	Grant, Carolyn		contribution (\$) description \$60.00 Bow Tie Quilt
		7 Contributor address; City; State; Zip Code		J. J
		C		_
10	Data da al acce	Georgetown, TX 78633	44 F	Check if travel outside of Texas. Complete Schedule T.
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12	Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
	Retired			
14	Contributor's Retired	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
	09/17/2015	Grant, Carolyn		contribution (\$) description
		Contributor address; City; State; Zip Code		\$200.00 Rag Quilt I
				_
		Georgetown, TX 78633		Check if travel outside of Texas. Complete Schedule T.
	Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	Retired			
	Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
	Retired			
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution
	09/17/2015	Grant, Carolyn		contribution (\$) description \$100.00 Wall Hanging
		Contributor address; City; State; Zip Code		I
				_
		Georgetown, TX 78633		Check if travel outside of Texas. Complete Schedule T.
	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
	Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	Retired			
		employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
	Retired			
	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
I				

The Instru	uction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 6/14 Rpt: 55/96
2 FILER NAME Grant, Phili			3 Filer ID (Ethics Commission Filers) 00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/17/2015	6 Full name of contributor out-of-state PAC (ID#: Grant, Carolyn 7 Contributor address; City; State; Zip Code Georgetown, TX 78633)	8 Amount of 9 In-kind contribution contribution (\$) description \$50.00 I NRA Knife
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
12 Contributor's Retired	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's Retied	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Grant, Carolyn Contributor address; City; State; Zip Code)	Amount of In-kind contribution contribution (\$) description \$50.00 Christmas Hanging
	Georgetown, TX 78633		Check if travel outside of Texas. Complete Schedule T.
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's Retired	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Retired	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Grant, Carolyn Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$60.00 Holiday Placemats
Principal occ	Georgetown, TX 78633 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
Contributorio	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Retired		·	,
Contributor's Retired	employer/law firm (FOR JUDICIAL)	Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 7/14 Rpt: 56/96
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Grant, Philip	o A. (Mr.)		00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/17/2015	6 Full name of contributor ☐ out-of-state PAC (ID#: Grant, Carolyn 7 Contributor address; City; State; Zip Code)	8 Amount of 9 In-kind contribution contribution (\$) description \$45.00 Navy Throw
	Georgetown, TX 78633		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Retired			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Retired			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of In-kind contribution
09/17/2015	Grant, Carolyn		contribution (\$) description
	Contributor address; City; State; Zip Code		\$125.00 Blue Quilt
			į į
	Georgetown, TX 78633		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Retired			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Retired			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution
09/17/2015	Harrington, Philip		contribution (\$) description \$150.00 Gift Baskets
	Contributor address; City; State; Zip Code		I
			_
	Montgomery, TX 77316	•	Check if travel outside of Texas. Complete Schedule T.
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Distributor	principal occupation (i ON JODICIAL)	Continuator 5 job title	(I ST. JODICIAL) (See instructions)
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	employemaw IIIII (FOR JUDICIAL)	Law IIIII OI COIIIIDUI	oi a apouse (ii aiiy) (FOR JODICIAL)
Big Red	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
ii continutor	is a clinia, law liliti of paretit(s) (ii arry) (FOR JUDICIAL)		

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The Instru	estion Cuido explaine how to complete this	form	1 Total pages Schedule A2:
The mstru	The Instruction Guide explains how to complete this form.		Sch: 8/14 Rpt: 57/96
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Grant, Philip	o A. (Mr.)		00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
09/17/2015	Harris, Linda		contribution (\$) description \$100.00 Chest
	7 Contributor address; City; State; Zip Code		I I
	Mantagara TV 770FC		_
40.00	Montgomery, TX 77356	T44 5 1 (500 NO)	Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Nurse			
	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Methodist H	•		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution
09/17/2015	Harris, Shannon		contribution (\$) description \$50.00 Bath and Body Products
	Contributor address; City; State; Zip Code		I
			i i
	O-277.2 TV 77004		_
5	Conroe, TX 77304	T = 1 (500 NO)	Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Owner	principal occupation (FOR JODICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Wear us Ou		Law IIIII of Contribute	of 3 spouse (ii arry) (i ort sobicial)
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii contributor	is a clina, law inition parent(s) (if any) (if on sobietine)		
Dete	Full name of contributor		Amount of In kind contribution
Date 09/17/2015)	Amount of In-kind contribution contribution (\$) description
09/11/2015	Janca, James		\$150.00 Cross
	Contributor address; City; State; Zip Code		i i
	Conroe, TX 77304		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Woodcarvin	g		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Self			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 9/14 Rpt: 58/96
2 511 512 114 145			·
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
09/17/2015	<u> </u>		contribution (\$) description
	7 Contributor address; City; State; Zip Code		\$60.00 Planter
			į
	Montgomery, TX 77356		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Owner			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Pecan Hill F	Florist		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
09/17/2015	Klein, Marilyn	J	contribution (\$) description
00/11/12010	Contributor address; City; State; Zip Code		\$500.00 T-posts
	Continuator address, City, State, Zip Code		i
	Montgomery, TX 77356		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
	, , , , , , , , , , , , , , , , , , , ,	1 2 2 4 7 2	
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Retired	,		, , ,
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Retired	,		(), (
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>	
ii contributor	is a crima, law inition parent(s) (if any) (if on obstonic)		
Dette	Full name of contributes.		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
09/17/2015	Ligon, Brett		\$675.00 I Shotgun
	Contributor address; City; State; Zip Code		
			į į
	Montromon, TV 770FC		_
	Montgomery, TX 77356		Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
District Attor			
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Montgomery	y County District Attorney		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
		-	

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 10/14 Rpt: 59/96
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	LITIONS	\$
			<u> </u>
5 Date 09/17/2015	 Full name of contributor out-of-state PAC (ID#:	8 Amount of 9 In-kind contribution contribution (\$) description \$350.00 Cooler	
	Conroe, TX 77301		Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Manager			
	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
Conroe Wel			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Olszowy, Sylvia Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$200.00 Aggie Cooler and Swag
	Willis, TX 77318		Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's Adminstrativ	principal occupation (FOR JUDICIAL) ve Assistant	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Montgomery	employer/law firm (FOR JUDICIAL) y County	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Osborn, Mary Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$500.00 Rocking chair
	Conroe, TX 77304		Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's Law Clerk	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
	employer/law firm (FOR JUDICIAL) y County District Attorney	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

The Instru	action Guide explains how to complete this f	orm.	1 Total pages Schedule A2:
			Sch: 11/14 Rpt: 60/96
2 FILER NAME Grant, Philip			3 Filer ID (Ethics Commission Filers) 00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/17/2015	 Full name of contributor out-of-state PAC (ID#:)	8 Amount of contribution (\$) 9 In-kind contribution description \$140.00 Quilt
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)
12 Contributor's Retired	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's Retired	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Petty, Bill Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$250.00 Photographs
	Montgomery, TX 77356		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's Photograph	principal occupation (FOR JUDICIAL) er	Contributor's job title	(FOR JUDICIAL) (See instructions)
	employer/law firm (FOR JUDICIAL) / Photography	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 09/17/2015	Full name of contributor out-of-state PAC (ID#: Rabun, Dana Contributor address; City; State; Zip Code Montgomery, TX 77351		Amount of In-kind contribution contribution (\$) description \$75.00 Rustic Art
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	
Contributor's Artist	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's Self	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

The Instru	estion Cuido ovaloino hourto complete this	form	1 Total pages Schedule A2:
i ne instru	ection Guide explains how to complete this	ioriii.	Sch: 12/14 Rpt: 61/96
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Grant, Philip	o A. (Mr.)		00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
09/17/2015			contribution (\$) description \$75.00 Gift Basket
	7 Contributor address; City; State; Zip Code		I I
	Conroe, TX 77304		_
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)
10 Filicipal occi	spation 7 300 title (FOR NON-30DICIAL) (See instructions)		
	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Realtor			
	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Keller Wiliar			
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of In-kind contribution contribution (\$) description
09/17/2015	Redwine, Tobin		\$200.00 Framed photographs
	Contributor address; City; State; Zip Code		
			į į
	Montgomery, TX 77316		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)
	,	,, (, , , , , , , , , , , , , , , , , , , ,
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Professor		Professor	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Texas A&M	University	Montgomery Coun	ty District Attorney's Office
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
09/17/2015	Reed, Allyson		contribution (\$) description
	Contributor address; City; State; Zip Code		\$40.00 Southern Roots
	Montgomery, TX 77356	•	Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
0	reference of the COD INSTANCE	O - materials and a second second	(FOR HIDIOIAL) (Consideration)
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Stylist Contributor's	omployor/low firm (FOR 31 DICIAL)	Low firm of a matrile set	or's engues (if any) (FOR HIDIOIAL)
Self	employer/law firm (FOR JUDICIAL)	Law IIIIII OI CONTIIDUTO	or's spouse (if any) (FOR JUDICIAL)
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii continutori	is a clinu, law litti of paretil(s) (ii atty) (FOR JUDICIAL)		

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The Instru	action Guide explains how to complete this	form	1 Total pages Schedule A2:
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2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Grant, Philip	o A. (Mr.)		00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution
09/17/2015	Reed, Angie		contribution (\$) description \$80.00 I Montgomery ISD
	7 Contributor address; City; State; Zip Code		I
			i i
	Montromon, TV 770FC		_
10 Dringing age	Montgomery, TX 77356 upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (EOD NON	Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Teacher			
	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Montgomery			
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
09/17/2015	Ruonavar, Jodi		contribution (\$) description \$50.00 Cross
	Contributor address; City; State; Zip Code		
			i
	Dortor TV 70622		_
Dringing con	Porter, TX 78633 upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (EOD NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)
Philicipal occi	apation 7 300 title (FOR NON-30DICIAL) (See instructions)	Employer (FOR NON	1-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Business Ov			(i enteres)
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Self			(,) (
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	, , , , , , , , , , , , , , , , , , , ,		
Date	Full name of contributor out-of-state PAC (ID#:	`	Amount of ! In-kind contribution
09/17/2015	Schneider, Steve		contribution (\$) description
00/11/1010	Contributor address; City; State; Zip Code		\$225.00 Flashlight
	Continuator address, Sity, State, Elp Code		į į
			į
	Conroe, TX 77301		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Owner			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Texas Top (Cop Shop		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

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The Instru	iction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 14/14 Rpt: 63/96
2 FILER NAME	:		3 Filer ID (Ethics Commission Filers)
Grant, Philip			00080027
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 09/17/2015	 Full name of contributor out-of-state PAC (ID#:		8 Amount of contribution (\$) In-kind contribution (\$) description \$340.00 Quilts
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	L_J Check if travel outside of Texas. Complete Schedule T. I-JUDICIAL) (See instructions)
·	,		*
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
Retired			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Retired			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
12/17/2015	Spencer, Scott		contribution (\$) description
	Contributor address; City; State; Zip Code		\$600.00 BBQ Pit
			į į
	Magnolia, TX 77354		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Detective			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
MCSO			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
09/17/2015	Stricker, Kathy		contribution (\$) description
	Contributor address; City; State; Zip Code		\$60.00 Gift Certificate
			į į
	Conroe, TX 77301		Check if travel outside of Texas. Complete Schedule T.
Principal occı	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Owner			
	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
	dical Message		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
I			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schodule F1:	· · · · · · · · · · · · · · · · · · ·	-
1	Total pages Schedule F1:		
	Sch: 1/33 Rpt: 64/96	Grant, Philip A. (Mr.) 00080027	_
4	Date	5 Payee name	
	12/17/2015	Airbrush Images	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$952.60	851 N FM 3083 E	
		Conroe, TX 77303	
<u>_</u>	DUDDOG		_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Printing of Vinyl for 2 billboards	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
"	expenditure to benefit C/O		ľ
L	·		_
	Date	Payee name	
	12/18/2015	Airbrush Images	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$54.13	851 N FM 3083 E	
		Conroe, TX 77303	
	DUDDOCE		_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Billboard expenses	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_			_
	Date	Payee name	
L	10/07/2015	Auttomatic, Inc.	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$50.00	132 Hawthorne Street	
		San Francisco, CA 94107	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		PG email address; WPcharge	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to co	ompl	olete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/33 Rpt: 65/96	Grant, Philip A. (Mr.)		00080027
4	Date	5 Payee name		-
	12/15/2015	BOONDOCKED PAYPAL		
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode	
	\$150.00	161 Rainbow Dr. #6116		
		Livingston, TX 77399		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EX. ENDITORE			Check if Austin, TX, officeholder living expense GRAPHIC WORK
				GRAFIIIC WORK
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	Light	t Office held
Ĭ	expenditure to benefit C/O		agiit	Cince Hold
	Date	Payee name	_	
	09/04/2015	Bentwater Country Club		
	Amount (\$)	Payee address; City; State; Zip Ci	ode	
	\$16.00	800 Bentwater Dr.	Juc	•
	Ψ10.00	Coo Bonimator Bir		
		Montgomery, TX 77356		
	PURPOSE		T _(b)	N December
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(6)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 000/Deverage Expense		Check if Austin, TX, officeholder living expense
				Luncheon
			丄	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	t Office held
	- CAPCHARLATO TO SOLIOIR GAO			
	Date	Payee name		
	10/09/2015	Bentwater Country Club		
	Amount (\$)	Payee address; City; State; Zip Co	ode	
	\$16.00	800 Bentwater Dr.		
		Montgomery, TX 77356		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u> </u>	t Office held
	expenditure to benefit C/O		•	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 3/33 Rpt: 66/96	Grant, Philip A. (Mr.) 00080027
4	Date	5 Payee name
	11/16/2015	Bentwater Country Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$16.00	800 Bentwater Dr.
		Montgomery, TX 77356
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Luncheon
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/04/2015	Bentwater Country Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$16.00	800 Bentwater Dr.
		Montgomery, TX 77356
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Luncheon
		Luncheon
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	09/09/2015	CARD AND PARTY Factory Conroe
	Amount (\$)	Payee address; City; State; Zip Code
	\$73.33	705 W. Davis
		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraiser decorations
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	o

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction Gu	Sa		ages	/Contract Labor		OTHER (enter	a category not listed abo	ove)
Ļ		-			ilue explains now	io con	ipic	te this form.	-			
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 4/33 Rpt: 67/96		Grant, Philip	A. (Mr.)						00080027		
4	Date	5	Payee name									
	09/23/2015		CC Plus									
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Cod	de					
	\$2,110.85		4205 W. Da		•							
	,-,··											
			O TV	77004								
		L	Conroe, TX	77304								
8	PURPOSE OF	(a)	Category (Se	e Categories listed at t	ne top of this schedule	e) ((b)	Description				
	EXPENDITURE		Solicitation/	Fundraising Exp	ense			브			nplete Schedule T.	
								Guns sold at		officeholder livin	g expense	
								Guris solu at	IUII	iuraisei		
_	- I											
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Offic	e soug	jht			Office h	eld	
	Date		Payee name									
	10/21/2015		CHRIST, KF	RISTIN								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Cod	de					
	\$1,500.00		29567 TUD	OR WAY								
			MAGNOLIA	TV 77255								
		_				Т.						
	PURPOSE OF	(a)		e Categories listed at the	ne top of this schedule	e) ((b)	Description		df.T 0	ondete Oake dule T	
	EXPENDITURE		Consulting E	Expense				=		officeholder livin	nplete Schedule T.	
								PAYMENT TO				
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Offic	e soug	ıht			Office h	eld	
	expenditure to benefit C/OI		Janara ato, Omi	seriolaer riame	O.IIIO	o ooug	,			01110011	ioiu	
	Date		Payee name									
	11/09/2015		CHRIST, KF	RISTIN								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Cod	de					
	\$1,500.00		29567 TUD	OR WAY								
			MAGNOLIA	, TX 77355								
	PURPOSE	(a)	Category (ca	e Categories listed at t	no ton of this cohodule	. ((b)	Description				
	OF	(~)	Consulting E		ie top of this schedule	e) '	()		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Consum g	-xperioe				Check if Austin,	, TX,	officeholder livin	g expense	
								PAYMENT TO	0 0	CAMPAIGN	MGR	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	eld	
	expenditure to benefit C/OI					J						
l												

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment			OTHER (enter a	category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)			
	Sch: 5/33 Rpt: 68/96	Grant, Philip A. (Mr.)		00080027				
4	Date	5 Payee name						
	12/14/2015	CHRIST, KRISTIN						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$385.89	29567 Tudor Way						
		Magnolia, TX 77355						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Navertioning Expense		side of Texas. Com				
		l		(, officeholder living				
		Expense	repoi	t from Camp	algii Mgi.			
Ļ	Commiste ONII V if disport	Constitute (Office helder nove		Office le	- I al			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought H		Office he	eiu			
L	Date	Davis nama						
	09/24/2015	Payee name						
		Carriage House						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$750.00	3845 Sapp Road						
		Conroe, TX 77304						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Solicitation// undraising Expense		side of Texas. Com				
		l —		(, officeholder living	g expense			
		Fundraise	ι δμαι	ce remai				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	7l4			
	expenditure to benefit C/O			Office In	Siu			
	Data							
	Date 12/17/2015	Payee name Cecil Bell Jr. Campain						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$100.00	18320 FM 1488						
		Magnolia, TX 77354						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)		-:	olete Celesdale T			
	EXPENDITURE	Continuations/Donations Made by	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Carialace, Chiconolaci, Chicae Committee		-	paign Kickoff in			
		Magnolia			. •			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld			
	expenditure to benefit C/OI	9						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 6/33 Rpt: 69/96	Grant, Philip A. (Mr.)		00080027
4	Date	5 Payee name		
	12/17/2015	Childrens Safe Harbor		
6	Amount (\$)	7 Payee address; City; State; Zip Coc	de	
	\$20.00	1500 N Frazier		
		Conros TV 77201		
Ļ	DUDDOOF	Conroe, TX 77301	(I- \	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 oou/Develage Expense		Check if Austin, TX, officeholder living expense
				Breakfast
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held
L	· 			
	Date	Payee name		
	11/17/2015	DATAMINER City Control of the Contro		
	Amount (\$) \$9.95	Payee address; City; State; Zip Coo 16600 Sherman Way	ae	
	Ф9.95	10000 Shemian way		
		Van Nuys, CA 91406		
_	PURPOSE	-	(h)	Description
	OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(2)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	, 1800 a. 1. a. 1. g.		Check if Austin, TX, officeholder living expense
				Credit card fees
L	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/O	<u> </u>	JIIL	Office field
_	Date	Daylee name		
	12/14/2015	Payee name DATAMINER		
	Amount (\$)	Payee address; City; State; Zip Coo	de.	
	\$9.95	16600 Sherman Way		
	,,,,,,			
		Van Nuys, CA 91406		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
	LXI ENDITORE			Credit Card Fees
				Credit Card Fees
_	Complete ONLY if direct	Candidate/Officeholder name Office souc	aht	Office held
	expenditure to benefit C/O		,	5.1100 11010
l				

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 7/33 Rpt: 70/96	Grant, Philip A. (Mr.)	00080027							
4	Date	5 Payee name	•							
	09/21/2015	DAVIS, STEPHANIE								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$405.94	6917 Gentle Breeze								
		Willis, TX 77318								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Event Expense Check if trave	el outside of Texas. Complete Schedule T.							
	EXI ENDITORE		tin, TX, officeholder living expense							
		Photograph	y							
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/O		Office field							
┝	Date	Payee name								
	11/02/2015	DAVIS, STEPHANIE								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$216.50	6917 Gentle Breeze								
	Ψ210.30	0317 Ochile Breeze								
		Millio TV 77210								
	DUDD005	Willis, TX 77318								
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advantaging Type and a	el outside of Texas. Complete Schedule T.							
	EXPENDITURE	Advertising Expense	tin, TX, officeholder living expense							
		Photograph:	у							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/OI	1								
	Date	Payee name								
	09/17/2015	Diamonds in the Rough								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$2,670.00	155 N. Mill Trace								
		The Woodlands, TX 77381								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Event Expense	el outside of Texas. Complete Schedule T.							
	-		in, TX, officeholder living expense a for Fundraiser							
		Welliotabilia	a for a diffusion							
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held							
	expenditure to benefit C/O	•	555							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_				
_	Sch: 8/33 Rpt: 71/96	Grant, Philip A. (Mr.)					
4	Date	5 Payee name					
	11/16/2015	East Montgomery County Fair Association					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$1,316.66	21679 McClesky Rd.					
		New Caney, TX 77357					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Sponsorships					
		Sportsorships					
Ļ	0 1: 0:::::::::::::::::::::::::::::::::						
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	09/25/2015	Events Plus					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,653.96	8809 Fawn Trail					
		Conroe, TX 77385					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense					
	LXI LINDITORL	Check if Austin, TX, officeholder living expense					
		Fundraiser stage, tablecloths, etc.					
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
	experialitate to beliefit 6/01						
	Date	Payee name					
	10/13/2015	FACEBOOK					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$25.16	1 Hacker Way					
		Menlo Park, CA 94205					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense					
		Check if Austin, TX, officeholder living expense					
		ADVERTISING ON SOCIAL MEDIA					
_							
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	experience to beliefft C/OI						
1							

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)				
				The Instruction G	uide explains l	now to coi	mple	ete this form.					
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commi	ssion Filers)	
	Sch: 9/33 Rpt: 72/96		Grant, Philip	A. (Mr.)						00080027			
4	Date	5 F	Payee name										
	10/29/2015	1	ACEBOOK										
6	Amount (\$)	7 P	Payee addres	s; City;	State;	Zip Co	de						
	\$50.04	1	. Hacker Wa			•							
				,									
		١,	Menlo Park,	CA 0420E									
L						-							
8	PURPOSE OF			e Categories listed at	the top of this sche	edule)	(b)	Description					
	EXPENDITURE	^	Advertising E	Expense				=	k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense				
								ADVERTISIN					
									_				
9	Complete ONLY if direct	l Ca	andidate/Offic	eholder name		Office sou	aht			Office h	hlal		
	expenditure to benefit C/OI		andidate/Onic	cholder hame	O	mee sou	giit			Office i	iciu		
_	D :												
	Date	l .	Payee name										
	11/02/2015	F	ACEBOOK										
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Co	de						
	\$37.43	1	. Hacker Wa	ay									
		١	Menlo Park,	CA 94205									
	PURPOSE	(a) (Category (See	e Categories listed at	the top of this scho	adula)	(b)	Description					
	OF	1	Event Expen		are top or trilo sorte	sudic)		_ :	outsi	de of Texas. Cor	mplete Schedule T.		
	EXPENDITURE		I					Check if Austin,	TX,	officeholder livin	ig expense		
								ADVERTISIN	IG۱	WITH SOC	IAL MEDIA		
	Complete ONLY if direct		andidate/Offic	eholder name	O	office sou	ght			Office h	eld		
	expenditure to benefit C/OI	Н											
	Date	F	Payee name										
	11/16/2015	F	ACEBOOK										
	Amount (\$)	F	Payee addres	s; City;	State;	Zip Co	de						
	\$250.02	1	. Hacker Wa	ay									
		١,	Menlo Park,	CA 94205									
_	PURPOSE	_				1	/h\	D					
	OF			e Categories listed at	the top of this sche	edule)	(D)	Description Check if travel of	outsi	de of Texas, Cor	nplete Schedule T.		
	EXPENDITURE	^	Advertising E	Expense				므		officeholder livin			
								ADVERTISIN					
	Complete ONLY if direct	Ca	andidate/Offic	eholder name	C	Office sou	ght			Office h	ield		
	expenditure to benefit C/OI					•							
-													
1													

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 10/33 Rpt: 73/96	Grant, Philip A. (Mr.) 00080027
4	Date	5 Payee name
	12/01/2015	FACEBOOK
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$112.45	1 Hacker Way
		Menlo Park, CA 94205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		ADVERTISING WITH SOCIAL MEDIA
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/09/2015	FIRST TRADITION
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	11210 Amber Park
		Conroe, TX 77303
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		POLITICAL CONSULTANT
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date	Payee name FLOWERS TEXAS STYLE CONROE TX
	09/17/2015	
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.93	903 W Davis St.
		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraiser Decorations
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	U

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	lete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 11/33 Rpt: 74/96	Grant, Philip A. (Mr.)		00080027
4	Date	5 Payee name		1
	11/24/2015	GENUWINE		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$36.93	6503 Farm to Market Rd 1488 #401		
		MAGNOLIA, TX 77354		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORL			Check if Austin, TX, officeholder living expense
				POLITICAL DINNER
_	Complete ONLY if direct	Condidate/Officeholder name Office acu	abt	Office hold
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ynt	t Office held
_				
	Date	Payee name		
	11/24/2015	GENUWINE		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$240.00	6503 Farm to Market Rd 1488 #401		
		Magnolia, TX 77354		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)) Description
	EXPENDITURE	Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				EVENT-MEET&GREET
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O		•	
	Date	Payee name		
	11/01/2015	Gofundme		
	Amount (\$)	Payee address; City; State; Zip Co	nde	
	\$158.36	Po Box 711798	uc	
	¥200.00			
		San Diego, CA 92171		
	DUDDOCE	-	//->	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Solicitation/Fundraising Expense		Check if Austin, TX, officeholder living expense
				Fundraising expense
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	1	_	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	, , , ,
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 12/33 Rpt: 75/96	Grant, Philip A. (Mr.)	00080027
4	Date	5 Payee name	
	09/19/2015	HACIENDA MIS PADRES ME CONROE	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$78.80	5104 W Davis St, Conroe	
		Conroe, TX 77304	
8	PURPOSE OF	1 ' ' I =	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		L	Campaign team lunch
			. •
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	09/18/2015	HARRIS, LINDA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$97.10	14232 Lawrence Dr.	
		Montgomery, TX 77356	
	PURPOSE OF	'	Description
	EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		L	Tundraiser Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	Н	
	Date	Payee name	
	10/20/2015	HICKORY CORRAL MAGNOLIA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$28.60	18535 Farm to Market 1488	
		Magnolia, TX 77354	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense DINNER WITH CONSTABLE HILL
			SINNER WITH CONSTABLE THEE
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Cinice Hold

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 13/33 Rpt: 76/96	2 FILER NAME Grant, Philip A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/10/2015	5 Payee name HOBBY LOBBY #0203 CONROE TX	•
6	Amount (\$) \$92.10	7 Payee address; City; State; Zip Code 1217 TX-336 Loop	
8	PURPOSE OF EXPENDITURE	Solicitation/Fundraising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser decorations
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 09/18/2015	Payee name HOBBY-LOBBY #0203 CONROE TX	
	Amount (\$) \$6.81	Payee address; City; State; Zip Code 1217 TX-336 Loop Conroe, TX 77301	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser deCoration
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 09/19/2015	Payee name HOBBY-LOBBY #0203 CONROE TX	
	Amount (\$) \$17.06	Payee address; City; State; Zip Code 1217 TX-336 Loop	
		Conroe, TX 77301	
	PURPOSE OF EXPENDITURE	Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser decorations
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 14/33 Rpt: 77/96	Grant, Philip A. (Mr.)	
4		5 Payee name	
L	12/19/2015	High Meadow Ranch	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,089.00	37300 Golf Club Trail	
		Magnelia TV 772FF	
Ļ	DUDDOOF	Magnolia, TX 77355	_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Meet and Greet catering	
Ļ	Compulate ONII V if direct	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		
⊨	Date	Power name	_
	07/01/2015	Payee name I love Being a Moco Republican	
┝	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,000.00	409 S Rivershire	
		Conroe, TX 77304	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Sponsorship	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/19/2015	JIM'S HARDWARE	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$101.65	14460 Liberty St	
		MONTGOMERY, TX 77356	
┝	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		SIGN SUPPLIES	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
H			_
1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 15/33 Rpt: 78/96	2 FILER NAME Grant, Philip A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/14/2015	5 Payee name JOSE'S VILLA ITALIA CONRE TX	
6	Amount (\$) \$199.41	7 Payee address; City; State; Zip Code 603 N Thompson St Conroe, TX 77301	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meeting food
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 12/11/2015	Payee name KROGER	
	Amount (\$) \$17.29	Payee address; City; State; Zip Code Kroger 6616 FM 1488 Magnolia, TX 77354	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parade Supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 12/21/2015	Payee name Kroger Tomball	
	Amount (\$) \$20.49	Payee address; City; State; Zip Code 14060 FM 2920	
		Tomball, TX 77377	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for sign crew
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
	ordan dara r aymon	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 16/33 Rpt: 79/96	Grant, Philip A. (Mr.) 00080027	
4	Date	5 Payee name	_
	11/24/2015	Lake Conroe Area Republican Women	
6	Amount (\$)	7 Payee address; City; State; Zip Code	-
	\$47.00	PO Box 737	
	,		
		Montgomony TV 772E6	
		Montgomery, TX 77356	_
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Membership and luncheon	
		mombolomp and tallellost.	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/OI	the state of the s	
	-		_
	Date	Payee name	
	09/18/2015	MAGNOLIA DINER MONTGOMERY TX	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.27	19784 TX-105	
		Montgomery, TX 77356	
	PURPOSE	The state of the s	_
	OF		
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign breakfast	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
	Date	Payee name	=
	07/24/2015	Magonlia Area Republican Women	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$15.00	PO Box 729	
	Φ13.00	FO B0X 729	
		Pinehurst, TX 77362	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
		Candidate/Officeholder/Political Committee	
		Membership Membership	
	0 1. 0		_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 17/33 Rpt: 80/96	2 FILER NAME Grant, Philip A. (Mr.) 3 Filer ID (Ethics Commission Filers) 00080027
4	Date 12/09/2015	5 Payee name Montgomery County Homeless Coalition
6	Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 2257 N Loop 336 Conroe, TX 77304
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Homeless walk
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 12/07/2015	Payee name Montgomery County Republican Party
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 310 Metcalf St. Conroe, TX 77301
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Filling Fee
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 08/01/2015	Payee name North Shore Republican Women PAC
	Amount (\$) \$200.00	Payee address; City; State; Zip Code 803 N. rivershire Dr.
		Conroe, TX 77304
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/33 Rpt: 81/96	Grant, Philip A. (Mr.) 00080027
4	Date	5 Payee name
	08/18/2015	North Shore Republican Women PAC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	803 N. rivershire Dr.
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Silent Auction basket
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-1
	Date	Payee name
	11/13/2015	North Shore Republican Women PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.00	803 N. rivershire Dr.
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Membership
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	Para and a second
	Date 09/18/2015	Payee name OFFICE DEPOT #620
	Amount (\$) \$12.45	Payee address; City; State; Zip Code 1319 W Davis St
	Ψ12.43	1313 W Davis 3t
		Conroe, TX 77304
	DUDDOCE	To.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sign suplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	oxperialitate to betterit G/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete thi	is form.
1	Total pages Schedule F1: Sch: 19/33 Rpt: 82/96	2 FILER NAME Grant, Philip A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00080027
4	Date 09/18/2015	5 Payee name OFFICE DEPOT #620	
6	Amount (\$) \$14.20	7 Payee address; City; State; Zip Code 1319 W Davis St Conroe, TX 77304	
8	PURPOSE OF EXPENDITURE	/ Navertising Expense	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 1 supplies
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/18/2015	Payee name OFFICE DEPOT #620	
	Amount (\$) \$34.61	Payee address; City; State; Zip Code 1319 W Davis St	
	PURPOSE OF EXPENDITURE	/ Naverlising Expense	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 1 supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 09/01/2015	Payee name Office Depot	
	Amount (\$) \$50.27	Payee address; City; State; Zip Code 1319 W Davis St	
		Conroe, TX 77304	
	PURPOSE OF EXPENDITURE	I finding Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/33 Rpt: 83/96	Grant, Philip A. (Mr.)
4	Date	5 Payee name
	09/16/2015	PANERA BREAD #4033 CONROE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$8.40	1302 W Davis St
		Conroe, TX 77304
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Food for setup team
		1 oou for octup tourn
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	12/01/2015	PAYPAL - MARW Event
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P.O. Box 729
		Pinehurst, TX 77362
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		MARW EVENT REGISTRATION (money was
		returned)
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/16/2015	Paypal
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.00	2211 North First St.
		San Jose, CA 95131
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Fundraising expense
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	y
\vdash		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 21/33 Rpt: 84/96	Grant, Philip A. (Mr.) 00080027	
4	Date	5 Payee name	
	07/01/2015	Performance Marketing	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$7,500.00	200 N Houston Ave	
		Humble, TX 77338	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	-	Check if Austin, TX, officeholder living expense	
		Political Consultant Marc Davenport	
_	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
L	Data		
	Date	Payee name	
	07/22/2015	Performance Marketing	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00	200 N. Houston Avenue	
		Humble, TX 77338	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Marketing expenses	
		Marketing expenses	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
H	Date	Power name	
	08/04/2015	Payee name Performance Marketing	
_		· ·	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,250.36	200 N. Houston	
		Humble, TX 77338	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Campaign expense - signs	
		Campaign expenses - signs	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
l			

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee Leg	'Awards/Memorials E al Services e Instruction Gui	·		ages	/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed	above)
1	Total pages Schedule F1:	2 □			-		_	1	3	Filer ID	(Ethics Comm	ission Filers)
•	Sch: 22/33 Rpt: 85/96		Grant, Philip A	(Mr.)						00080027	\	
L	•		•	. (IVII.)						00000027		
4	Date		ayee name									
	09/14/2015	P	Performance N	Marketing								
6	Amount (\$)	7 P	ayee address;	City;	State;	Zip Co	de					
	\$4,765.84	2	00 N Houstor	ı Ave								
		l⊔	lumble, TX 77	,338								
8	PURPOSE OF			ategories listed at the	e top of this sche	edule)	(b)	Description				
	EXPENDITURE	A	dvertising Ex	pense				=		de of Texas. Com officeholder living	plete Schedule T.	
								Signs, mail or				
								orgrio, man ot	<i>a</i> ,	,	··	
Ļ	Complete ONLY 'C. I'		nalidat-100°°°	alalau		.tt:	n le 4			Ott. ;	-1-1	
9	Complete ONLY if direct expenditure to benefit C/OI		ndidate/Officeh	older name	0	office sou	gnt			Office h	eid	
L												
	Date	Р	ayee name									
	12/12/2015	R	RANSICK, DE	BRA								
	Amount (\$)	Р	ayee address;	City;	State;	Zip Co	de					
	\$504.29	2	6710 Elm	÷		-						
	,	_										
			Angnolia TV	77255								
			/lagnolia, TX			1						
	PURPOSE OF			ategories listed at the	e top of this sche	edule)	(b)	Description	, .			
	EXPENDITURE	A	dvertising Ex	pense				—		de of Texas. Com officeholder living	plete Schedule T.	
								T-Shirt and E				
								. Omit and L	AU(Janvo Omiti	·····ui	
\vdash	Complete ONLY if direct		ndidata/Offic - !-	older neme		office as:	ab+			Office I-	ald.	
	Complete ONLY if direct expenditure to benefit C/OI		ndidate/Officeh	oluer name	O	office sou	JIII			Office h	eiu	
	Date		ayee name									
	11/13/2015	R	RANSOM'S S	ΓΕΑΚΗΟUSE								
	Amount (\$)	Р	ayee address;	City;	State;	Zip Co	de					
	\$20.34	3	00 C B Stewa	art Dr								
		N/	MONTGOMER	Y TX 77256								
						ı	4.					
	PURPOSE OF			ategories listed at the	e top of this sche	edule)	(a)	Description	outo:	do of Toyon Com	unloto Cobodiila T	
	EXPENDITURE	F	ood/Beverag	e ∟ xpense				ш		officeholder living	plete Schedule T. expense	
								Campaign me			npo.100	
								- apaigii iii				
	Complete ONLY if direct		ndidate/Officeh	oldor nama		office soug	nh+			Office he	old	
	Complete ONLY if direct expenditure to benefit C/OI		indidate/Officer	oluci IIaIIIE	U	nnce sou(JIIL			Onice n	- iu	

SCHEDULE F1

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

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

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

	Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	3)				
	Sch: 23/33 Rpt: 86/96	Grant, Philip A. (Mr.) 00080027					
4	Date	5 Payee name					
	09/22/2015	ROSS, VINCE					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$450.00	183 Harley Dr.					
		Montgomery, TX 77356					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Event Expense					
		Check if Austin, TX, officeholder living expense					
		Auctioneering					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
9	expenditure to benefit C/OI						
H	D-1-	T _	_				
	Date	Payee name					
	11/19/2015	Red Onion Company					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$200.00	410 Moonwalk					
		Montgomery, TX 77356					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
		Luncheon sponsorship					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	H					
	Date	Payee name					
	09/01/2015	River Plantation Country Club					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$30.00	550 Country Club Drive					
		Conroe, TX 77302					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Luncheon					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	experientare to benefit 6/01	••					

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 24/33 Rpt: 87/96	2 FILER NAME Grant, Philip A. (Mr.) 3 Filer ID (Ethics Commission Filers) 00080027
4	Date 12/07/2015	5 Payee name River Plantation Country Club
6	Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 550 Country Club Drive Conroe, TX 77302
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Luncheon
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 09/11/2015	Payee name SALTGRASS CONROE
	Amount (\$) \$113.67	Payee address; City; State; Zip Code 810 Interstate 45 N Conroe, TX 77301
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Team luncheon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 09/18/2015	Payee name SAMS CLUB #6421 CONROE
	Amount (\$) \$38.98	Payee address; City; State; Zip Code 2000 Westview Blvd
		Conroe, TX 77304
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraiser supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 25/33 Rpt: 88/96	Grant, Philip A. (Mr.)	00080027
4	Date	5 Payee name	
	10/22/2015	SIGNS OF MAGNOLIA	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$538.00	P.O. Box 1678	
		O TV 77005	
L		Conroe, TX 77305	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	n, TX, officeholder living expense
		YARD SIGN:	S
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
_	<u> </u>		
	Date	Payee name	
	11/18/2015	SIGNS OF MAGNOLIA	
	Amount (\$) \$2,419.39	Payee address; City; State; Zip Code P.O. Box 1678	
	\$2,419.39	F.O. BOX 1076	
		Conroe, TX 77305	
_	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	l outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		DEPOSIT OI	N LARGE SIGNS
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/OH	9	Office field
	Data	Pausa	
	Date 12/15/2015	Payee name SIGNS OF MAGNOLIA	
L	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,419.39	P.O. Box 1678	
	,_,,,		
		Conroe, TX 77305	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	l outside of Texas. Complete Schedule T.
	EXI ENDITORE		n, TX, officeholder living expense FOR BIG SIGNS
		BALANCE P	ON DIG SIGNS
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	9	
ı			

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 26/33 Rpt: 89/96	Grant, Philip A. (Mr.) 00080027
4	Date	5 Payee name
	11/10/2015	SPRINGCREEK SHENANDOAH
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.22	19099 N Fwy Service Rd
		SHENANDOAH, TX 77385
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense MEETING WITH JOE WILLIAMS
		WILLIAMS WITH SOL WILLIAMS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/20/2015	Shake FX, LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,461.38	4711 Braesvalley Dr.
		Houston, TX 77096
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Website design
		Woscille design
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/10/2015	TEXAS SECRETARY OF STATE
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$1.03	1019 Brazos
		Austin, TX 78701
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Donation research
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/33 Rpt: 90/96	Grant, Philip A. (Mr.) 00080027
4	Date	5 Payee name
L	09/14/2015	THE HOME DEPOT 508 CONROE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.60	1341 W Davis St
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraiser supllies
		. a.i.a.a.co. capinos
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	09/19/2015	THE HOME DEPOT 508 CONROE TX
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.18	1341 W Davis St
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sign materials
		Sign materials
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/14/2015	THE TOASTED YOLK CAFE
	Amount (\$)	Payee address; City; State; Zip Code
	\$32.77	2129 W Davis St
		CONROE, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign meeting - Nathan Arazate
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		
1		
I		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		/ages	/Contract Labor		OTHER (enter a	strict category not listed above)	
				The Instruction G	uide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Fil	ers)
	Sch: 28/33 Rpt: 91/96		Grant, Philip	A. (Mr.)						00080027		
4	Date	5	Payee name									
	10/02/2015		The UPS St	ore								
6	Amount (\$)	7	Payee addres	ss; City;	Stato:	Zip Co	do					
ľ	\$137.00	ľ	3915 W. Da		State,	Zip Co	uc					
	Ψ137.00		3313 W. Da	VIS								
			Conroe, TX	77304								
8	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Office Overh	nead/Rental Ex	pense			브			plete Schedule T.	
	ZA ZHOHOKZ							_	, TX,	officeholder livin	g expense	
								PO Box				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	eld	
	experiulture to benefit C/Oi											
	Date		Payee name									
	09/10/2015		The Woodla	nds Republica	n Women							
	Amount (\$)	H	Payee addres	ss; City;	State:	Zip Co	de					
	\$22.00		PO Box 729	-	·	•						
	,											
			The Weedle	nda TV 77207	,							
				nds, TX 77387								
	PURPOSE OF	(a)	Category (Se	e Categories listed at	the top of this sch	edule)	(b)	Description				
	EXPENDITURE		Event Exper	nse				=		de of Texas. Con officeholder livin	plete Schedule T.	
								Luncheon	, 17,	onicendidei iiviii	g expense	
								Lanoncon				
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	poholdor namo		Office sou	aht			Office h	old	
	Complete ONLY if direct expenditure to benefit C/OI		Januluale/Onic	centiquei maine		Jilice Sou	gni			Office II	eiu	
		_										
	Date		Payee name									
	10/15/2015		The Woodla	nds Republica	n Women							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$22.00		PO Box 729	4								
			The Woodla	nds, TX 77387	,							
	PURPOSE	(2)					(h)	Description				
	OF	رم) 		e Categories listed at	the top of this sch	edule)	(0)	Description Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		F000/Bever	age Expense				므		officeholder livin		
								Luncheon				
\vdash	Complete ONLY if direct		Candidate/Offic	ceholder name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/OI					5500	J			20011		
\vdash												

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 29/33 Rpt: 92/96	Grant, Philip A. (Mr.)				
4	Date	5 Payee name				
	07/24/2015	Trey Kirby Campaign				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$100.00	PO Box 1032				
		Montgomery, TX 77356				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Candidate/Officeholder/Political Committee				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	'				
	Date	Payee name				
	09/23/2015	VILLASENOR, LORENA				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$300.00	902 Queenswood				
		Montgomery, TX 77356				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Paintings sold at fundraiser				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·				
	Data					
	Date 10/07/2015	Payee name VISTAPRINT				
	Amount (\$) \$28.97	Payee address; City; State; Zip Code				
	\$28.97	275 Wyman St				
		Malahama MA 02451				
		Waltham, MA 02451				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		BUSINESS CARDS				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1				

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/33 Rpt: 93/96	Grant, Philip A. (Mr.) 00080027
4	Date	5 Payee name
	10/17/2015	VISTAPRINT
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$78.47	275 Wyman St
		Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense NOTE CARDS (STATIONARY) AND ADDRESS
		LABELS
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	09/17/2015	WAL-MART #0400 CONROE TEXAS
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.16	1407 N Loop 336
		Conroe, TX 77304
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fundraiser Supplies
		Fundraiser Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 12/13/2015	Payee name
		WALMART
	Amount (\$)	Payee address; City; State; Zip Code
	\$81.86	1407 N Loop 336
		Conroe, TX 77304
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Parade supplies
		i didde supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1: Sch: 31/33 Rpt: 94/96	2 FILER NAME Grant, Philip A. (Mr.)	3 Filer ID (Ethics Commission Filers) 00080027				
4	Date 09/18/2015	5 Payee name WHATABURGER 858 Q26 CONROE TX					
6	Amount (\$) \$14.43	7 Payee address; City; State; Zip Code 2123 W Davis St					
8	PURPOSE OF EXPENDITURE	Conroe, TX 77304 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food for setup crew				
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held				
	Date 09/04/2015	Payee name WM SUPERCENTER # Lake Conroe					
	Amount (\$) \$22.76	Payee address; City; State; Zip Code 18700 Highway 105 W					
	PURPOSE OF EXPENDITURE	Montgomery, TX 77356 (a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps				
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held				
	Date 09/02/2015	Payee name Woodforest National Bank					
	Amount (\$) \$29.95	Payee address; City; State; Zip Code PO Box 8339					
		The Woodlands, TX 77387					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card setup				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
-	Sch: 32/33 Rpt: 95/96	Grant, Philip A. (Mr.) 00080027
Ļ	•	
4	Date	5 Payee name
L	10/02/2015	Woodforest National Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$154.82	PO Box 8339
		The Woodlands, TX 77387
8	PURPOSE	
0	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraiser Credit Card Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	11/02/2015	Woodforest National Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.95	PO Box 8339
		The Woodlands, TX 77387
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit card fees
		Cieult Caiu lees
	Operation ONE VIII II	Oversite to 100% or health and a second to 100% of the second to 1
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/21/2015	Woodforest National Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.00	PO Box 8339
		The Woodlands, TX 77387
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		DEBIT CARD FOR CAMPAIGN MGR
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorare to benefit C/OF	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit	Food/Beverage Expense By - Gift/Awards/Memorials Expense tical Committee Legal Services	Polling Expense Printing Expense Salaries/Wages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains	how to complete this form.	
1 Total pages Schedule F1 Sch: 33/33 Rpt: 96/96	I	3	Filer ID (Ethics Commission Filers) 00080027
4 Date 12/02/2015	5 Payee name Woodforest National Bank	'	
6 Amount (\$) \$24.95		Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school Accounting/Banking	Check if travel outs	side of Texas. Complete Schedule T. K, officeholder living expense IP fee
Complete ONLY if direct expenditure to benefit C/		Office sought	Office held