#### FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST МΙ OFFICEHOLDER Melanie NAME **NICKNAME** LAST **SUFFIX** Bush CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE CITY; **OFFICEHOLDER** 9 Creek Forest Lane MAILING **ADDRESS** Change of Address Conroe, TX 77384 Date Processed Date Imaged CAMPAIGN MS/MRS/MR **FIRST** MΙ **TREASURER** NAME Alan Μ SUFFIX NICKNAME LAST Bush CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: ZIP CODE TREASURER **ADDRESS** 9 Creek Forest Lane (Residence or Business) Conroe, TX 77384 CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION** TREASURER PHONE 281-384-4660 8 REPORT TYPE $\square$ January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Exceeded \$500 limit Final Report (Attach C/OH-FR) July 15 8th day before election PERIOD Month Day Year Month Day Year COVERED 07/14/2017 THROUGH 12/31/2017 10 ELECTION **ELECTION DATE ELECTION TYPE** Other Month Day Runoff Year χ Primary 03/06/2018 General Special 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) 11 OFFICE CISD Board of Trustees Position 1 Montgomery County Treasurer **GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

0011011	<u> </u>				2 of 57			
13 C / OH NAME	Bush, Melanie		14 Filer ID					
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	t the candidate's or officel	holder's knov	wledge or			
Additional Pages	COMMITTEE TYPE  GENERAL	COMMITTEE NAME						
	SPECIFIC	COMMITTEE ADDRESS						
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRE	ss					
16 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	2,520.00			
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	\$	37,418.00			
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED TOTALS				\$	0.00			
	4. TOTAL POLITIC	AL EXPENDITURES		\$	44,663.82			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	LAST DAY OF THE	\$	1,888.10			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	3 OF THE LAST DAY	\$	0.00			
17 AFFADAVIT	ANNA MARIE HANSON Notary ID # 126292821 My Commission Expires November 1, 2020	I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.  Signature of	all information required to	be reported	eport is by me			
		aid <u>Melanie Bush</u> ertify which, witness my hand and seal of office.	, this the1 5	<u>-h</u>	_day			
Signature of office	cer administering	Anna Hanson Printed name of officer administering	Title of officer a	administering	g oath			

#### FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 57 18 FILER NAME 19 Filer ID Bush, Melanie 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE Х SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 33,238.00 \$ 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 4,180.00 \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. \$ 32,894.62 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS 7. \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS X \$ 11,769.20 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

	MONET	TARY POLITICAL CONTRIBUT	<b>FIONS</b>		SCHEDUL	.E <b>A1</b>
	The Instru	iction Guide explains how to complete th	nis form.	Ī	Total pages Schedule A1: Sch: 1/22 Rpt: 4/57	
2	FILER NAME Bush, Melan			3	Filer ID	
4		<ul> <li>Full name of contributor</li></ul>	(ID#:)	7	Amount of Contribution (\$)	\$100.00
		Houston, TX 77069				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 09/18/2017	Full name of contributor out-of-state PAC ( Ball, Rebecca  Contributor address; City; State; Zip Code  35 Nocturne Woods Place	(ID#:)		Amount of Contribution (\$)	\$200.00
	Principal oper	The Woodlands, TX 77382	Employer (See Instruction			
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	š) —		
	Date 09/18/2017	Full name of contributor out-of-state PAC (I Ball, Rebecca Contributor address; City; State; Zip Code 35 Nocturne Woods Place	D#:		Amount of Contribution (\$)	\$30.00
	1 1 1 22	The Woodlands, TX 77382		Ļ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		
	Date 09/18/2017	Full name of contributor out-of-state PAC (i Bartoskewitz, Ashley Contributor address; City; State; Zip Code 70 N Crescendo Path Place	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	Shenandoah, TX 77381  upation / Job title (See Instructions)	Employer (See Instructions	 s)		
_						
	Date 11/09/2017	Full name of contributor out-of-state PAC (I Bartoskewitz, Ashley Contributor address; City; State; Zip Code 70 N Crescendo Path Place Shenandoah, TX 77381	D#:		Amount of Contribution (\$)	\$100.00
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	5)		

			Total pages Schedule A1:	
The Instruc	ction Guide explains how to complete this fo	orm.	Sch: 2/22 Rpt: 5/57	
FILER NAME			3 Filer ID	
Bush, Melani	e			
Date 09/18/2017	5 Full name of contributor out-of-state PAC (ID#: Bartoskewitz, Ashley		7 Amount of Contribution (\$)	\$45
	6 Contributor address; City; State; Zip Code	***************************************		
	70 N Crescendo Path Place			
	Shenandoah, TX 77381			
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
Data	Full name of contributor  out-of-state PAC (ID#:		Assessment of Countries time (C)	
Date 10/10/2017	Full name of contributor out-of-state PAC (ID#: Bays, Randal		Amount of Contribution (\$)	\$100
10,10,201,	Contributor address; City; State; Zip Code			Ψ±00
	11991 White Oak Path			
	Conroe, TX 77385			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/07/2017	Berry, Stephanie			\$40
	Contributor address; City; State; Zip Code			
	2310 Villiage Leaf Dr			
	Spring, TX 77386			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/18/2017	Berry, Stephanie			\$30
	Contributor address; City; State; Zip Code			
	2310 Villiage Leaf Dr			
	Spring, TX 77386			
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	
t t	Bevers, Byron			\$100
11/09/2017	Contributor address; City; State; Zip Code			
11/09/2017				
11/09/2017	18727 Tuscany Woods Dr	Į.		
11/09/2017	18727 Tuscany Woods Dr Shenandoah, TX 77381			
		Employer (See Instructions)		<del></del>

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/22 Rpt: 6/57 2 FILER NAME 3 Filer ID Bush. Melanie 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 09/18/2017 \$60.00 Bevers, Byron 6 Contributor address; City; State; Zip Code 18727 Tuscany Woods Dr Shenandoah, TX 77381 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) 08/17/2017 Blanton, Barry \$500.00 Contributor address; City; State; Zip Code 138 E Capstone The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 11/20/2017 Blanton, Barry \$500.00 Contributor address; City; State; Zip Code 138 E Capstone The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$40.00 12/28/2017 Blanton, Barry Contributor address; City; State; Zip Code 138 E Capstone The Woodlands, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:\_ 11/09/2017 \$250.00 Bone, Jamie Contributor address; City; State; Zip Code 28507 Russell Creek Ct Spring, TX 77386 Principal occupation / Job title (See Instructions) Employer (See Instructions)

	MONET	TARY POLÍTICAL CONTRIBUTIO	NS		SCHEDUL	.E <b>A1</b>
	The Instru	uction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/22 Rpt: 7/57	
2	FILER NAME Bush, Melan			3	Filer ID	
4	Date 10/09/2017	5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
		6 Contributor address; City; State; Zip Code 15 E. Hullwood Cir				
<u>_</u>		The Woodlands, TX 77389		L		
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 11/20/2017	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Contributor address; City; State; Zip Code 90 N Willow Point Cir				
		The Woodlands, TX 77382		Ĺ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 09/18/2017	Full name of contributor out-of-state PAC (ID#: Brown, Cynthia	)	<u> </u>	Amount of Contribution (\$)	\$410.00
	I	Contributor address; City; State; Zip Code 30 N Bantam Woods Cir				
<u></u>		The Woodlands, TX 77382		L		
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)		_
<del></del>	Date 09/18/2017	Full name of contributor out-of-state PAC (ID#: Brown, John	)		Amount of Contribution (\$)	\$75.00
	J	Contributor address; City; State; Zip Code 90 N Willow Point Cir				
<b></b>		The Woodlands, TX 77382		L		
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)		
<u>-</u>	Date 09/21/2017	Full name of contributor out-of-state PAC (ID#:	)	<u> </u>	Amount of Contribution (\$)	\$500.00
	!	Contributor address; City; State; Zip Code PO Drawer 2627		l		
	<u></u>	Conroe, TX 77305		<u></u>	<del></del>	
_	Principal occu Owner	upation / Job title (See Instructions)	Employer (See Instructions) Buckalew Chevrolet	)		
-	-			_		

MONET	ARY POLITICAL CONTRIBUTIO	NS .	SCHEDUL	E A1
The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 5/22 Rpt: 8/57	
2 FILER NAME Bush, Melar		·	3 Filer ID	
4 Date 09/06/2017	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Buckalew Jr., Don</li> <li>6 Contributor address; City; State; Zip Code PO Box 500</li> <li>Conroe, TX 77305</li> </ul>		7 Amount of Contribution (\$)	\$250.00
8 Principal occu	<u> </u>	9 Employer (See Instructions	)	
Date 09/18/2017	Full name of contributor out-of-state PAC (ID#: Bunch, Michelle  Contributor address; City; State; Zip Code 19 Legato Way  The Woodlands, TX 77382		Amount of Contribution (\$)	\$200.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Date 09/05/2017	Full name of contributor out-of-state PAC (ID#:_ Bush, George W Contributor address; City; State; Zip Code 618 Finch		Amount of Contribution (\$)	\$350.00
Principal occu	McKinney, TX 75069 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Fillespai occu	pation / 300 title (See Instructions)	Employer (See instructions,	,	
Date 09/29/2017	Full name of contributor out-of-state PAC (ID#:_Buttross, Mylene Contributor address; City; State; Zip Code 53 Golden Sunset Cir Spring, TX 77381	)	Amount of Contribution (\$)	\$100.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	
Date 09/11/2017	Full name of contributor out-of-state PAC (ID#:_ Cannetti, Michael  Contributor address; City; State; Zip Code 26 Taylor Point Dr  The Woodlands, TX 77382		Amount of Contribution (\$)	\$100,00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	

	MONET	ARY POLITICAL CONTRIBUTIO	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/22 Rpt: 9/57	
2	FILER NAME Bush, Melar			3	Filer ID	
4	Date 09/21/2017	Full name of contributor		7	Amount of Contribution (\$)	\$100.00
		Contributor address; City; State; Zip Code     Windfellow PI				
		The Woodlands, TX 77381				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	11/11/2017	Cipolla, Denise				\$100.00
		Contributor address; City; State; Zip Code 11 E Green Gables Cir				
		The Woodlands, TX 77382				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor  out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	<del></del>
	11/08/2017	Clinkscales, Janet				\$100.00
		Contributor address; City; State; Zip Code				
		207 Bristol Bend Circle				
		Spring, TX 77382				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	11/10/2017	Corley, Larry				\$100.00
		Contributor address; City; State; Zip Code				
		39 Windsor Dr				
		Conroe, TX 77304				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	09/18/2017	Culbreth, Morgan				\$500.00
		Contributor address; City; State; Zip Code				
		33218 East Border Oak Ct				
		Magnolia, TX 77354				
	•	pation / Job title (See Instructions)	Employer (See Instructions)	)	-	
	General Cou	nsel	MS Energy Services			

MONE	TARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
The Inst	ruction Guide explains how to complete this f	form.		Total pages Schedule A1: Sch: 7/22 Rpt: 10/57	
2 FILER NA			3	Filer ID	
Bush, Me 4 Date 09/13/201	5 Full name of contributor  ut-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$60.00
9. Britariania	Magnolia, TX 77354	I	Ĺ		
General C	ccupation / Job title (See Instructions) Counsel	9 Employer (See Instructions MS Energy Services	S)		
Date 12/29/201	Full name of contributor out-of-state PAC (ID#:_ 7	_		Amount of Contribution (\$)	\$100.00
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 11/09/201	Full name of contributor	<u> </u>		Amount of Contribution (\$)	\$250.00
	The Woodlands, TX 77382				
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 11/08/201	Full name of contributor			Amount of Contribution (\$)	\$250.00
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	5)		
Date 11/18/201	Full name of contributor out-of-state PAC (ID#:_  7 Ellis, Byron  Contributor address; City; State; Zip Code  59 Heritage Hill Cir  The Woodlands, TX 77381	)		Amount of Contribution (\$)	\$100.00
Principal o	cupation / Job title (See Instructions)	Employer (See Instructions	5)		

MONEI	ARY POLITICAL CONTRIBUTIO	PNS		SCHEDUL	E A1
The Instruc	tion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/22 Rpt: 11/57	
FILER NAME			3	Filer ID	
Bush, Melanie Date 11/18/2017	5 Full name of contributor out-of-state PAC (ID#: Ellis, Leslie	)	7	Amount of Contribution (\$)	\$250.0
ľ	6 Contributor address; City; State; Zip Code 59 Heritage Hill Cir				
	The Woodlands, TX 77381				
Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions	5)		
Date 07/29/2017	Full name of contributor out-of-state PAC (ID#:_ Faubel, Julie Contributor address; City; State; Zip Code 3110 Golfcrest Drive			Amount of Contribution (\$)	\$500.0
	Montgomery, TX 77356				
Principal occupa Homemaker	ation / Job title (See Instructions)	Employer (See Instructions None	s)		
Date 11/09/2017	Full name of contributor out-of-state PAC (ID#: Faubel, Julie Contributor address; City, State; Zip Code 3110 Golfcrest Drive			Amount of Contribution (\$)	\$500.0
Principal occupa	Montgomery, TX 77356 ation / Job title (See Instructions)	Employer (See Instructions None	;)		
Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:_ Faubel, Julie Contributor address; City; State; Zip Code 3110 Golfcrest Drive			Amount of Contribution (\$)	\$90.0
	Montgomery, TX 77356				
Principal occupa Homemaker	ation / Job title (See Instructions)	Employer (See Instructions) None	j)		
Date 11/08/2017 	Full name of contributor out-of-state PAC (ID#:_Fitts, Susan Love  Contributor address; City; State; Zip Code 63 West Ruskin Dr			Amount of Contribution (\$)	\$50.0
Principal occupa	Montgomery, TX 77356 ation / Job title (See Instructions)	Employer (See Instructions)	)		
	y Texas Ethics Commission www.ethics.	choto by us		Version	V/4 0 7

MONE	TARY POLITICAL CONTRIBUTIO	NS	SCHEDUL	E <b>A1</b>
The Instr	uction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 9/22 Rpt: 12/57	
2 FILER NAMI Bush, Mela			3 Filer ID	
4 Date 08/24/2017	5 Full name of contributor out-of-state PAC (ID#		7 Amount of Contribution (\$)	\$30.00
8 Principal occ	Montgomery, TX 77356 cupation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> ;)	
Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:_ Flowers, Bobbie Contributor address; City; State; Zip Code 31 Wind River Dr Conroe, TX 77384	)	Amount of Contribution (\$)	\$200.00
Principal occ	cupation / Job title (See Instructions)	Employer (See Instructions)	)	
Date 11/09/2017	Full name of contributor out-of-state PAC (ID#:_Flowers, Bobbie  Contributor address; City; State; Zip Code 31 Wind River Dr		Amount of Contribution (\$)	\$50.00
Principal occ	Conroe, TX 77384 cupation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> ;)	
Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:_ Flowers, Bobbie Contributor address; City; State; Zip Code 31 Wind River Dr		Amount of Contribution (\$)	\$15.00
Principal occ	Conroe, TX 77384 supation / Job title (See Instructions)	Employer (See Instructions)	)	
Date 08/24/2017	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$100.00
Principal occ	supation / Job title (See Instructions)	Employer (See Instructions)	)	
				<del></del>

	MONET	TARY POLITICAL CONTRIBU	UTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete	this fo	orm.	1	Total pages Schedule A1: Sch: 10/22 Rpt: 13/57	•
2	FILER NAME				3	Filer ID	
_	Bush, Melan				L		
4	Date 11/08/2017	5 Full name of contributor  out-of-state PA Freede, Linda	\C (ID#:		7	Amount of Contribution (\$)	\$100.00
		6 Contributor address; City; State; Zip Code 1875 Nursery Rd.					
_		The Woodlands, TX 77380					
8	Principal occu	upation / Job title (See Instructions)	ę	9 Employer (See Instructions	;)		
<del></del>	Date	Full name of contributor out-of-state PA	AC (ID#:		Π	Amount of Contribution (\$)	
	09/18/2017	Gassmann, Kimberley	-				\$1,225.00
		Contributor address; City; State; Zip Code	100000000000000000000000000000000000000				
	I	225 E Summerhaze Cir		!			
		The Woodlands, TX 77382					
_		pation / Job title (See Instructions)		Employer (See Instructions	;)		
=	President			365 RSS			
	Date 07/19/2017	Full name of contributor out-of-state PA	\C (ID#:			Amount of Contribution (\$)	\$200.00
	0//19/2011	Gassmann, Kimberley  Contributor address; City; State; Zip Code			1		<b>Φ</b> Ζ <b>υ</b> υ.υυ
	I	225 E Summerhaze Cir					
	,						
	<u> </u>	The Woodlands, TX 77382	<del></del>		L		
	Principal occup President	pation / Job title (See Instructions)		Employer (See Instructions) 365 RSS	.)		
—		The state of other Division of the Division of		300 000	<del>-</del>		<del></del>
	Date 09/18/2017	Full name of contributor out-of-state PAr Gauthier, Devin	،C (ID#:			Amount of Contribution (\$)	\$30.00
	00/10/202	Contributor address; City; State; Zip Code			1		<del></del>
	!	19 S. Crisp Morning Cir			1		
	!			ļ			
_	= ::! 000!	The Woodlands, TX 77382		Tarabase (See Instructions	Ļ		<del></del>
_	Principal occu	ipation / Job title (See Instructions)		Employer (See Instructions)	)		
	Date	Full name of contributor  ut-of-state PA	AC (ID#:		Γ	Amount of Contribution (\$)	
	09/17/2017	Gauthier, Devin			1		\$30.00
	ļ	Contributor address; City; State; Zip Code			1		
	!	19 S. Crisp Morning Cir					
	!	The Woodlands, TX 77382					
_	Principal occur	pation / Job title (See Instructions)	_	Employer (See Instructions)	)		
—							

	MONET	TARY POLITICAL CONTRIBUTION	NS		SCHEDUL	.E <b>А1</b>
	The Instru	ction Guide explains how to complete this fo	erm.	1	Total pages Schedule A1: Sch: 11/22 Rpt: 14/57	
2	FILER NAME			3	Filer ID	
4	Date 11/01/2017	5 Full name of contributor out-of-state PAC (ID#: Grice, Chris 6 Contributor address; City; State; Zip Code 14 Sapling PI		7	Amount of Contribution (\$)	\$250.00
		The Woodlands, TX 77382				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 09/05/2017	Full name of contributor out-of-state PAC (ID#: Gustavsen, Martha  Contributor address; City; State; Zip Code 4085 Pine Acres Rd  Conroe, TX 77384-4069	)		Amount of Contribution (\$)	\$100.00
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/05/2017	Full name of contributor out-of-state PAC (ID#: Gustavsen, Martha  Contributor address; City; State; Zip Code  4085 Pine Acres Rd			Amount of Contribution (\$)	\$30.00
	Principal occu	Conroe, TX 77384-4069 spation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 08/26/2017	Full name of contributor out-of-state PAC (ID#: Hammons, Gary Contributor address; City; State; Zip Code 11636 Princess Ann Ct	)		Amount of Contribution (\$)	\$250.00
		Montgomery, TX 77316		<u> </u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 11/08/2017	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
•	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		

	MONET	TARY POLITICAL CONTRIBUTIO	NS	SCHEDU	LE <b>A1</b>
	The Instru	iction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 12/22 Rpt: 15/57	
2	FILER NAME Bush, Melar			3 Filer ID	
4	Date 09/18/2017	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	\$100.00
8	Principal occi	Spring, TX 77380  upation / Job title (See Instructions)	9 Employer (See Instructions	)	<u> </u>
	Date 11/08/2017	Full name of contributor out-of-state PAC (ID#: Harris, Gregg Contributor address; City; State; Zip Code 5406 Glenview Drive Kingwood, TX 77345		Amount of Contribution (\$)	\$100.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	)	
	Date 11/08/2017	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)	\$100.00
_	Principal occu	The Woodlands, TX 77381  upation / Job title (See Instructions)	Employer (See Instructions)	)	
	Date 11/02/2017	Full name of contributor out-of-state PAC (ID#: Henry, William Alan  Contributor address; City; State; Zip Code 604 Haddington Lane  Peachtree City, GA 30269		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)	
	Date 09/28/2017	Full name of contributor out-of-state PAC (ID#: Jim Clark Campaign  Contributor address; City; State; Zip Code PO Box 680  Conroe, TX 77305	)	Amount of Contribution (\$)	\$3,350.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	· · · · · · · · · · · · · · · · · · ·	

	MONET	ARY POLITICAL CONTRIBUTIONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 13/22 Rpt: 16/57	=		
2	FILER NAME Bush, Melan		3 Filer ID			
4	Date 11/09/2017	John, Stephanie  6 Contributor address; City; State; Zip Code  18 Forest Steppes	7 Amount of Contribution (\$) \$100.0	0		
8	Principal occu	The Woodlands, TX 77382 pation / Job title (See Instructions)  9 Employer (See Instructions)	1			
Ĺ	1 10 Oespeen 2 2 2 2	2	,	_!		
	Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:) Kaschik, Deborah  Contributor address; City; State; Zip Code 39 Howell Creek PI  The Woodlands, TX 77382	Amount of Contribution (\$) \$100.0	0		
	Principal occu	pation / Job title (See Instructions)  Employer (See Instructions)	)			
	Date 11/09/2017	Full name of contributor out-of-state PAC (ID#:) Kaschik, Deborah  Contributor address; City; State; Zip Code 39 Howell Creek PI	Amount of Contribution (\$) \$50.00	0		
	Principal necu	The Woodlands, TX 77382 pation / Job title (See Instructions)  Employer (See Instructions)		_		
l		AUDITY OUD due (See insuductions)				
	Date 11/08/2017	Full name of contributor out-of-state PAC (ID#:) Keplinger, Bob  Contributor address; Clty; State; Zip Code 2203 Timberloch Ste 132 The Woodlands, TX 77380	Amount of Contribution (\$) \$100.00	D .		
	Principal occur	pation / Job title (See Instructions) Employer (See Instructions)				
	Date 11/10/2017	Full name of contributor out-of-state PAC (ID#:) Kilgo, Kara  Contributor address; City; State; Zip Code  33 Wind River Dr  Conroe, TX 77384	Amount of Contribution (\$) \$100.00	כ		
	Principal occuj	pation / Job title (See Instructions)  Employer (See Instructions)				
				-		

	MONET	ARY POLITICAL		SCHEDULE A1			
	The Instru	ction Guide explains ho	w to complete this f	form.	1	Total pages Schedule A1: Sch: 14/22 Rpt: 17/57	
2	FILER NAME				3	Filer ID	
	Bush, Melan	ie					
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	08/24/2017	Koester, Robert					\$250.00
	1	6 Contributor address; City; S 41 Cedar Crest Lane	State; Zip Code				
	- <del></del>	Lake Auburn, NH 03032					
8	Principal occur	pation / Job title (See Instruction	is)	9 Employer (See Instruction	s)		
	Date	Full name of contributor	out-of-state PAC (ID#;_	)	Τ	Amount of Contribution (\$)	
	08/19/2017	Larkworthy, Sharon					\$60.00
		Contributor address; City; S 14305 Gabriel Place	State; Zip Code				
_		Conroe, TX 77384					
_	Principal occur	pation / Job title (See Instruction	ıs)	Employer (See Instruction:	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:_		Т	Amount of Contribution (\$)	
	11/09/2017	Larkworthy, Sharon	<u></u>			· · · · ·	\$50.00
	!	Contributor address; City; S	State; Zip Code				
	1	14305 Gabriel Place					
	!	Conroe, TX 77384					
	Principal occur	pation / Job title (See Instruction	<del></del>	Empleyer (Co. Justinistics	د/ —		
		patient, our due (eur mordone.	ns)	Employer (See Instructions	3)		
=	Date	Full name of contributor	ns)  out-of-state PAC (ID#:_	Employer (See Instruction	<del></del>	Amount of Contribution (\$)	
	Date 08/20/2017			Employer (See Instruction	, T	Amount of Contribution (\$)	\$100.00
		Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S	out-of-state PAC (ID#:_	Employer (See Instruction	<u></u>	Amount of Contribution (\$)	\$100.00
		Full name of contributor Lau-Layton, Yng Yng	out-of-state PAC (ID#:_	Employer (See Instruction	<u></u>	Amount of Contribution (\$)	\$100.00
		Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S	out-of-state PAC (ID#:_	Employer (See Instruction		Amount of Contribution (\$)	\$100.00
	08/20/2017	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court	out-of-state PAC (ID#:_ State; Zip Code	Employer (See Instructions		Amount of Contribution (\$)	\$100.00
	08/20/2017 Principal occur	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court The Woodlands, TX 7738	out-of-state PAC (ID#:_ State; Zip Code	Employer (See Instructions		Amount of Contribution (\$)  Amount of Contribution (\$)	
	08/20/2017 Principal occur	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court The Woodlands, TX 7738 pation / Job title (See Instruction	out-of-state PAC (ID#:_ State; Zip Code 82	Employer (See Instructions		, ,	\$100.00 \$500.00
	08/20/2017 Principal occur	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court The Woodlands, TX 7738 pation / Job title (See Instruction Full name of contributor Lawson, Steve Contributor address; City; S	out-of-state PAC (ID#:_ State; Zip Code  82  Is) Out-of-state PAC (ID#:_	Employer (See Instructions		, ,	
	08/20/2017 Principal occur	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court The Woodlands, TX 7738 pation / Job title (See Instruction Full name of contributor Lawson, Steve Contributor address; City; S 9421 FM 2920 Rd	out-of-state PAC (ID#:_ State; Zip Code  82  Is) Out-of-state PAC (ID#:_	Employer (See Instructions		, ,	
	08/20/2017 Principal occur	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court The Woodlands, TX 7738 pation / Job title (See Instruction Full name of contributor Lawson, Steve Contributor address; City; S	out-of-state PAC (ID#:_ State; Zip Code  82  Is) Out-of-state PAC (ID#:_	Employer (See Instructions		, ,	
	08/20/2017  Principal occur  Date 11/09/2017	Full name of contributor Lau-Layton, Yng Yng Contributor address; City; S 26 Harmony Arbor Court The Woodlands, TX 7738 pation / Job title (See Instruction Full name of contributor Lawson, Steve Contributor address; City; S 9421 FM 2920 Rd Bldg 23	out-of-state PAC (ID#:_  State; Zip Code  82  Is)  out-of-state PAC (ID#:_  State; Zip Code	Employer (See Instructions	ss)	, ,	

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/22 Rpt: 18/57 2 FILER NAME 3 Filer ID Bush, Melanie 4 Date 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 09/18/2017 Love, Anthony \$100.00 6 Contributor address; City; State; Zip Code 1826 Willow Point Dr Kingwood, TX 77389 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/29/2017 \$250.00 McDaniel, Keaton Contributor address; City; State; Zip Code 35 Silver Bluff Ct The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#:\_ Full name of contributor Amount of Contribution (\$) Date 11/09/2017 \$500.00 McDaniel, Mark Contributor address; City; State; Zip Code 99 Player Oaks Place The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) McDaniel Cullen Owner Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) \$500.00 09/18/2017 Michalk, Dan Contributor address; City; State; Zip Code 14 Player Pines Ct The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) Waterway Wealth Management Owner Amount of Contribution (\$) Full name of contributor ut-of-state PAC (ID#: Date 09/18/2017 \$865.00 Miller, Jason Contributor address; City; State; Zip Code 18319 Grimes Rd Cleveland, TX 77328 Principal occupation / Job title (See Instructions) Employer (See Instructions) City of Conroe **Utility Manager**

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/22 Rpt: 19/57	
2	FILER NAME Bush, Melan	ie		3	Filer ID	
4	Date 09/18/2017	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Miller, Jason</li> <li>Contributor address; City; State; Zip Code 18319 Grimes Rd</li> <li>Cleveland, TX 77328</li> </ul>		7	Amount of Contribution (\$)	\$60.00
8	Principal occupation / Job title (See Instructions)  9 Employer (See		Employer (See Instructions     City of Conroe	)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/13/2017 Miller, Mary Virginia  Contributor address; City; State; Zip Code PO Box 7543  Huntsville, TX 77342-7543			Amount of Contribution (\$)	\$500.00	
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions McGee Miller & Co LLP	)		
	Date Full name of contributor out-of-state PAC (ID#:_09/18/2017 Millsaps, Hayley				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:_ Morefield, Amy  Contributor address; City; State; Zip Code 2111 Stoneycreek Park  Conroe, TX 77385			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:_09/18/2017 Morefield, Amy  Contributor address; City; State; Zip Code 2111 Stoneycreek Park  Conroe, TX 77385				Amount of Contribution (\$)	\$35.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 17/22 Rpt: 20/57 3 Filer ID 2 FILER NAME Bush, Melanie 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 09/18/2017 Mortenson, Curt \$4,185.00 6 Contributor address; City; State; Zip Code 42 Meadow Brook Pl The Woodlands, TX 77382 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Managing Director Deloitte Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) 09/12/2017 Mortenson, Curt \$60.00 Contributor address; City; State; Zip Code 42 Meadow Brook PI The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) Deloitte Managing Director Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 11/09/2017 Mortenson, Curt \$50.00 Contributor address; City; State; Zip Code 42 Meadow Brook PI The Woodlands, TX 77382 Principal occupation / Job title (See Instructions) Employer (See Instructions) Managing Director Deloitte Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 09/18/2017 Morton, Randie \$100.00 Contributor address; City; State; Zip Code 916 Manchester Dr Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#; 08/20/2017 Novelli, Michael \$250.00 Contributor address; City; State; Zip Code 42 Palmer Crest Spring, TX 77381 Principal occupation / Job title (See Instructions) Employer (See Instructions) Version V1.0.5389

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	TARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
The Inst	uction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 18/22 Rpt: 21/57		
2 FILER NAM			3 Filer ID		
Bush, Mel					
1 Date	5 Full name of contributor out-of-state PAC (ID#:_		7 Amount of Contribution (\$)		
08/22/201				\$100.00	
	6 Contributor address; City; State; Zip Code 14 Petalcup Place				
	The Woodlands, TX 77381				
8 Principal occi	cupation / Job title (See Instructions)	9 Employer (See Instructions)			
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	····	
11/08/201	O'Sullivan, William			\$100.00	
	Contributor address; City; State; Zip Code				
	14 Petalcup Place				
	The Woodlands, TX 77381				
Principal or	cupation / Job title (See Instructions)	Employer (See Instructions)			
r fincipal oc	apation 7 300 title (See institutions)	Employer (See Instructions)			
Date	Full name of contributor   out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
08/22/201	Peet, Johnny J.			\$100.00	
	Contributor address; City; State; Zip Code	***************************************			
	ositiibatsi daarossi otty, otato, zip oodo				
	7334 Teaswood Dr				
	7334 Teaswood Dr				
<u> </u>	7334 Teaswood Dr Conroe, TX 77304-5400				
Principal oc	7334 Teaswood Dr	Employer (See Instructions)			
Principal oc	7334 Teaswood Dr Conroe, TX 77304-5400	Employer (See Instructions)	Amount of Contribution (\$)		
	7334 Teaswood Dr  Conroe, TX 77304-5400  cupation / Job title (See Instructions)  Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions)		\$40.00	
Date	7334 Teaswood Dr  Conroe, TX 77304-5400  cupation / Job title (See Instructions)  Full name of contributor  ut-of-state PAC (ID#:	Employer (See Instructions)		\$40.00	
Date	7334 Teaswood Dr  Conroe, TX 77304-5400  cupation / Job title (See Instructions)  Full name of contributor out-of-state PAC (ID#: Rapp, Danielle	Employer (See Instructions)		\$40.00	
Date	7334 Teaswood Dr  Conroe, TX 77304-5400  cupation / Job title (See Instructions)  Full name of contributor out-of-state PAC (ID#:_ Rapp, Danielle  Contributor address; City; State; Zip Code 15 Edgewood Forest Ct	Employer (See Instructions)		\$40.00	
Date 12/29/201	7334 Teaswood Dr  Conroe, TX 77304-5400  Expation / Job title (See Instructions)  Full name of contributor out-of-state PAC (ID#:_ Rapp, Danielle  Contributor address; City; State; Zip Code 15 Edgewood Forest Ct  The Woodlands, TX 77381	)	Amount of Contribution (\$)	\$40.00	
Date 12/29/201	7334 Teaswood Dr  Conroe, TX 77304-5400  cupation / Job title (See Instructions)  Full name of contributor out-of-state PAC (ID#:_ Rapp, Danielle  Contributor address; City; State; Zip Code 15 Edgewood Forest Ct	Employer (See Instructions)  )  Employer (See Instructions)	Amount of Contribution (\$)	\$40.00	
Date 12/29/201	7334 Teaswood Dr  Conroe, TX 77304-5400  Expation / Job title (See Instructions)  Full name of contributor out-of-state PAC (ID#:_ Rapp, Danielle  Contributor address; City; State; Zip Code 15 Edgewood Forest Ct  The Woodlands, TX 77381	)	Amount of Contribution (\$)	\$40.00	
Date 12/29/201 Principal oc	7334 Teaswood Dr  Conroe, TX 77304-5400  cupation / Job title (See Instructions)  Full name of contributor	)	Amount of Contribution (\$)	\$40.00	
Date 12/29/201 Principal oc	7334 Teaswood Dr  Conroe, TX 77304-5400  Expation / Job title (See Instructions)  Full name of contributor	)	Amount of Contribution (\$)		
Date 12/29/201 Principal oc	7334 Teaswood Dr  Conroe, TX 77304-5400  Expation / Job title (See Instructions)  Full name of contributor	)	Amount of Contribution (\$)		
Date 12/29/201 Principal oc	7334 Teaswood Dr  Conroe, TX 77304-5400  Expation / Job title (See Instructions)  Full name of contributor	)	Amount of Contribution (\$)		
Date 12/29/201 Principal oc Date 09/18/201	7334 Teaswood Dr  Conroe, TX 77304-5400  Expation / Job title (See Instructions)  Full name of contributor	)	Amount of Contribution (\$)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/22 Rpt: 22/57	
2	FILER NAME Bush, Melar		,	3	Filer ID	
4	Date 09/18/2017	<ul> <li>5 Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	·	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$500.00
	Principal occu Owner/Oper	pation / Job title (See Instructions) ator	Employer (See Instructions Chick Fil A	)		
	Date 10/11/2017		•	Amount of Contribution (\$)	\$1,000.00	
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Geoscience Engineering			
	President  Date Full name of contributor out-of-state PAC (iD# 09/17/2017 Swoboda, Jay  Contributor address; City; State; Zip Code 956 Shandy Way  Conroe, TX 77301				Amount of Contribution (\$)	\$60.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 09/17/2017	Full name of contributor out-of-state PAC (ID#:_ Swoboda, Jay  Contributor address; City; State; Zip Code 956 Shandy Way  Conroe, TX 77301			Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	)		
		<u>i</u>			, , ,	

	MONET	TARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	action Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 20/22 Rpt: 23/57	
2	FILER NAME Bush, Melan			3	Filer ID	
4	Date 11/08/2017	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$500.00
Ļ		The Woodlands, TX 77382		L		
8	Principal occu Owner	upation / Job title (See Instructions)	Employer (See Instructions)     DLT Envelopes	)		
	Date 09/17/2017	Full name of contributor			Amount of Contribution (\$)	\$200.00
	Principal occu Owner	upation / Job title (See Instructions)	Employer (See Instructions) DLT Envelopes	)		
	Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:_Taylor, Matthew  Contributor address; City; State; Zip Code  11 Barker Ridge Ct  The Woodlands, TX 77382			Amount of Contribution (\$)	\$160.00
	Principal occu Owner	upation / Job title (See Instructions)	Employer (See Instructions) DLT Envelopes	)		
	Date 11/08/2017	Full name of contributor out-of-state PAC (†D#:_ Turney, Susan Contributor address; City; State; Zip Code 42 Split Rock Rd The Woodlands, TX 77381			Amount of Contribution (\$)	\$100.00
	Principal occur	upation / Job title (See Instructions)	Employer (See Instructions)	)		
	Date 08/20/2017	Full name of contributor out-of-state PAC (ID#:_ Usher, John G Contributor address; City; State; Zip Code 42 Little Falls PI The Woodlands, TX 77375			Amount of Contribution (\$)	\$50.00
	Principal occup	upation / Job title (See Instructions)	Employer (See Instructions)	)		

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 21/22 Rpt: 24/57 2 FILER NAME 3 Filer ID Bush, Melanie 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 08/21/2017 \$30.00 Usher, John G 6 Contributor address; City; State; Zip Code 42 Little Falls PI The Woodlands, TX 77375 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:\_ Amount of Contribution (\$) 11/10/2017 Usher, John G \$25.00 Contributor address; City; State; Zip Code 42 Little Falls Pl The Woodlands, TX 77375 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:\_ Date 09/13/2017 Way, Sabrina \$200.00 Contributor address; City; State; Zip Code 32918 Greenfield Forest Magnolia, TX 77354 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#:\_ 11/08/2017 Way, Sabrina \$100.00 Contributor address; City; State; Zip Code 32918 Greenfield Forest Magnolia, TX 77354 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 11/10/2017 Williams, Billy \$100.00 Contributor address; City; State; Zip Code 2513 Angel Faye Way Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.0.5389

ine msu u	ction Guide explains how to complete this fo	orm.		tal pages Schedule A1: ch: 22/22 Rpt: 25/57	
FILER NAME			Filer ID		
Bush, Mela	nie				
Date 12/29/2017	5 Full name of contributor out-of-state PAC (ID#:		<b>7</b> An	nount of Contribution (\$)	\$150.
	Magnolia, TX 77354				
Principal occi	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
Date	Full name of contributor out-of-state PAC (ID#:		An	nount of Contribution (\$)	
11/08/2017	Winkle, Lea Ann  Contributor address; City; State; Zip Code  32650 Ryder Cup				\$75.
	Magnolia, TX 77354				
Principal occi	pation / Job title (See Instructions)	Employer (See Instructions)	)		
Date 10/11/2017	Full name of contributor out-of-state PAC (ID#: Woloshyn, Myles Contributor address; City; State; Zip Code 3 Players Trail		An	nount of Contribution (\$)	\$900.
	The Woodlands, TX 77382				
Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions) Turbo Drill Industries	)		
Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:		Ап	nount of Contribution (\$)	\$60.0
	Magnolia, TX 77354				
	pation / Job title (See Instructions)	Employer (See Instructions)	)		
Principal occu					
Principal occu Date 09/18/2017	Full name of contributor out-of-state PAC (ID#:		An	nount of Contribution (\$)	\$2,353.
Date	<b>-</b> ` ` <del></del>	)	An	nount of Contribution (\$)	\$2,353.
Date 09/18/2017	Yollick, Eric  Contributor address; City; State; Zip Code	Employer (See Instructions)		nount of Contribution (\$)	\$2,353.

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

# SCHEDULE A2

	<u> </u>						
The Instru	uction Guide explains how to complete this	form.	1 Total pages Schedule A2: Sch: 1/4 Rpt: 26/57				
2 FILER NAME			3 Filer ID				
Bush, Mela	nie						
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$ 80.00				
5 Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution				
09/18/2017	Bihm, Kate		contribution (\$) description				
	7 Contributor address; City; State; Zip Code	***************************************	\$460.00 I Item for Auction various				
	5306 County Ct						
]			į				
	Magnolia, TX 77354		Check if travel outside of Texas. Complete Schedule T.				
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)				
Attorney		Self					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
ļ							
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<del>*************************************</del>					
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of In-kind contribution				
09/18/2017	Blanton, Barry	contribution (\$) description					
	Contributor address; City; State; Zip Code		\$220.00 I Item for Auction wine				
•	138 E Capstone		basket				
	The Woodlands, TX 77381		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Consultant		Self					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	e (FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>					
Date	Full name of contributor out-of-state PAC (ID#:		Amount of ! In-kind contribution				
09/18/2017	Bush, Alan (Mr.)		contribution (\$) description				
	Contributor address; City; State; Zip Code		\$515.00   Item for Auction Various				
	9 Creek Forest Lane		1				
	Conroe, TX 77384		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Lawyer		Bush Law Firm					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
	· , , , , , , , , , , , , , , , , , , ,						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	r's spouse (if any) (FOR JUDICIAL)				
			, ,,,				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u>.                                    </u>					
	, , , , , , , , , , , , , , , , , , , ,						
1							

#### **NON-MONETARY (IN-KIND) POLITICAL** SCHEDULE A2 CONTRIBUTIONS 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/4 Rpt: 27/57 2 FILER NAME 3 Filer ID Bush, Melanie 80.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$ 5 Date 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: 8 Amount of contribution (\$) description 09/18/2017 Duncan, Emily \$500.001 Item for Auction --Contributor address; City; State; Zip Code Surfside House 100 Commercial Cir Conroe, TX 77304 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) Questco 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if anv) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 09/18/2017 Gauthier, Devin \$300.00 Item for Auction --Contributor address; City; State; Zip Code Benches 19 S. Crisp Morning Cir The Woodlands, TX 77382 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Full name of contributor Amount of In-kind contribution ut-of-state PAC (ID#; contribution (\$) description 09/18/2017 Gustavsen, Martha \$30.00 Item for Auction --Contributor address; City; State; Zip Code Bracelet 4085 Pine Acres Rd Conroe, TX 77384-4069 Check if travel outside of Texas. Complete Schedule T. Principal occupation / 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) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

# SCHEDULE A2

The Instru	action Guide explains how to complete this	form.	1 Total pages Schedule A2: Sch: 3/4 Rpt: 28/57				
2 FILER NAME			3 Filer ID				
Bush, Melai							
4							
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 80.00				
5 Date	6 Full name of contributor out-of-state PAC (ID#:		8 Amount of 9 In-kind contribution contribution (\$) description				
09/18/2017	Hanson, Anna		\$25,001 Item for Auction				
	7 Contributor address; City; State; Zip Code		! Autographed book				
	722 Cannonball		1				
	Spring, TX 77380		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)				
	(700 7000)						
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	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				
09/18/2017	Kaschik, Debbie	contribution (\$) description					
	Contributor address; City; State; Zip Code		\$400.00 Items for Auction				
	1500 Woodstead Court		Various				
	2000 770040044 00411						
	The Woodlands, TX 77380		Check if travel outside of Texas. Complete Schedule T.				
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)						
Owner	,	The Woodlands Young Learners					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)					
	,		<b>,</b>				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
	,		, , , , , , , , , , , , , , , , , , , ,				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>					
	,						
Data	Full name of contributor Out-of-state PAC (ID#:		Amount of In-kind contribution				
Date 09/18/2017		)	contribution (\$) description				
09/10/2017	Lopez, Anthony		\$500.00 Item for Auction Concan				
	Contributor address; City; State; Zip Code 10 Sandwell Pl		house				
	10 Salidwell Pi		!				
	The Woodlands, TX 77389						
Principal occu	ipation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON-	L Check if travel outside of Texas. Complete Schedule T.  -JUDICIAL) (See instructions)				
President	,passer, 000 and (1 011 1101 100 10 11 12)	Wailua Technology					
	principal occupation (FOR JUDICIAL)	Contributor's job title (					
Continuation	,		( 3, 3, 3, 4, 3, 4, 3, 4, 3, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
	•		•				
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	L					
1							

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 4/4 Rpt: 29/57 2 FILER NAME 3 Filer ID Bush, Melanie \$ 80.00 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 8 9 In-kind contribution 5 Date 6 Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) description 10/30/2017 Shealy, Jennifer \$150.00 i CrimeStoppers Hole Contributor address; City; State; Zip Code Sponsorship 14 Dalea Pl The Woodlands, TX 77382 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / 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) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor'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 Amount of In-kind contribution ut-of-state PAC (ID#: contribution (\$) description 09/18/2017 Woloshyn, Myles \$1,000.00 Item for Auction -- Cabo Contributor address; City; State; Zip Code San Lucas trip 3 Players Trail The Woodlands, TX 77382 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions) CEO Turbo Drill Industries Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

## SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services The Instruction Guid	The Instruction Guide explains how to complete this form.			OTHER (enter a category not listed above)		
1 Total pages Schedule F1.	2 FILER NAM	1E				3 F	iler ID	
Sch: 1/21 Rpt: 30/57	Bush, Mel	anie						
4 Date	5 Payee nam	e						
09/06/2017	Bentwater	Country Club						
6 Amount (\$) \$20.00	7 Payee addi 800 Bentv Montgome		State; Zip C	ode			·	
8 PURPOSE	(a) Category	(See Categories listed at the	top of this schedule)	(b)	Description			
OF EXPENDITURE	Food/Bev	erage Expense			ш	, TX, ο	e of Yexas. Complete Schedule T. fficeholder living expense	
Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office so	<b>I</b> ught			Office held	
Date	Payee nam	e						
11/01/2017	Bentwater	Country Club						
Amount (\$) \$20.00	Payee addi 800 Bentv Montgome		State; Zip C	ode			•	
PURPOSE OF EXPENDITURE	1	See Categories listed at the earage Expense	top of this schedule)	(b)	<u> </u>	, TX, o	of Texas. Complete Schedule T. fficeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		fficeholder name	Office so	ught			Office held	
Date	Payee nam	e						
08/18/2017	1 '	ron Custom Goods						
Amount (\$) \$2,032.50	Payee addr 210 N Mai		State; Zip C	ode		········	***************************************	
	Conroe, T	X 77301						
PURPOSE OF EXPENDITURE	(a) Category Advertisin	See Categories listed at the lig Expense	top of this schedule)	(b)	L		e of Texas. Complete Schedule T. fficeholder living experise	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		fficeholder name	Office so	ught			Office held	
	<del></del> .							

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage B Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expe Legal Services  The Instruction Guide	ense Prin Sala	-	se s/Contract Labor	7	Travel Out of District DTHER (enter a category not listed above)
┰	Total pages Schedule F1:	12 FILER NAM			•		3 F	Filer ID
	Sch: 2/21 Rpt: 31/57	Bush, Mela						
4	Date	5 Payee name	;					
	09/21/2017	Branding Ir	on Custom Goods					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zij	p Code			
	\$400.00	210 N Mair	ı St					
		Conroe, TX	77301					
8	PURPOSE	(a) Category (s	See Categories listed at the top	p of this schedule;	) (b)	Description		
	OF EXPENDITURE	Advertising				<u></u>		of Texas, Complete Schedule T.
						Bracelets	1, Ιλ, υ	fficeholder living expense
						D. 0.00.2.2		
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office	e sought			Office held
	expenditure to benefit C/OI	н 						
	Date	Payee name						
	09/28/2017	Brian Daws	son Campaign					
Г	Amount (\$)	Payee addre	ess; City;	State; Zir	ρ Code			<u>,                                    </u>
	\$45.00	3600 FM 14	488					
	!	Ste 120-15	4					
	J	Conroe, TX	77384					
┢	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Contribution	ns/Donations Made	Ву	-	<u></u>		of Texas. Complete Schedule T.
	!	Candidate/	Officeholder/Politica	I Committee	•	Event ticket	1, Ιλ. υ	fficeholder living expense
	!					L,0111 10.101		
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office	e sought			Office held
	expenditure to benefit C/OI	H			=			
H	Date	Payee name						
	11/05/2017	Bush, Mela						
	Amount (\$)	Payee addre	ess; City;	State; Zip	p Code			
	\$107.86	9 Creek Fo	• • • • • • • • • • • • • • • • • • • •					
	,	Conroe, TX	77384					
	PURPOSE	(a) Category (s	ee Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Loan Repa	yment/Reimburseme	ent		$\Box$		of Texas. Complete Schedule T. ficeholder living expense
								n from personal funds through
						10/31/17		
H	Complete ONLY if direct	Candidate/Off	iceholder name	Office	sought			Office held
	expenditure to benefit C/OF							

#### SCHEDULE F1

Advertising Expense Accounting/Banking

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide expla		ense .ges/Contract Labor	r	Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NA	ME			3	Filer ID	
	Sch: 3/21 Rpt: 32/57	Bush, Me	lanie					
4	Date	5 Payee nan	ne					
	12/31/2017	Bush, Me						
6	Amount (\$)	7 Payee add	dress; City; St	tate; Zip Cod	<u></u> е			
	\$157.17	9 Creek F						
		Conroe, 7	TX 77384					
8	PURPOSE OF EXPENDITURE	4	(See Categories listed at the top of this payment/Reimbursement	s schedule) (	Check if A	ravel outsid Austin, TX, (	de of Texas. Complete Schedule T. officeholder living expense an from personal funds through	
9	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	Office soug	nt		Office held	
_	Date	Payee nam	ne					
	11/17/2017	Bush, Me	lanie					
_	Amount (\$)	Payee add	fress; City; St	tate; Zip Cod	e			
	\$500.00	9 Creek F	Forest Ln					
		Conroe, T	<del></del>	<del> </del>				
	PURPOSE OF EXPENDITURE		(See Categories listed at the top of this payment/Reimbursement	s schedule)	<u></u>	avel outsid	le of Texas. Complete Schedule T.	
					ت		an from personal funds through	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Officeholder name	Office sough	nt		Office held	
<u> </u>	Date	Payee nam	ne	_	_	_		
	09/06/2017	Bush, Mel	lanie					
	Amount (\$) \$750.00	Payee add 9 Creek F		tate; Zip Cod	э			
		Conroe, T	TX 77384			<del></del>		
	PURPOSE OF EXPENDITURE	1	(See Categories listed at the top of this ayment/Reimbursement	; schedule) (I	Check if A	avel outsid ustin, TX, o nt of loa	le of Texas. Complete Schedule T. officeholder living expense an from personal funds through	
	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	Office sough	nt		Office held	
								:

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage F Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services  The Instruction Guide exp	Print Salar	-	se s/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not liste	d above)
1	Total pages Schedule F1:	2 FILER NAMI					3 Filer ID	
	Sch: 4/21 Rpt: 33/57	Bush, Mela						
4	Date	5 Payee name						
	10/11/2017	Bush, Mela	nie					
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip	Code			
	\$1,020.00	9 Creek Fo	rest Ln					
	i	Conroe, TX	77384					
8	PURPOSE	(a) Category (s	ee Categories listed at the top of	this schedule)	(b)	Description		
	OF EXPENDITURE		yment/Reimbursement				outside of Texas. Complete Schedule T.	
							TX, officeholder living expense	
						Repayment of 10/5/17	f loan from personal funds	tnrough
						10,0,11		
9	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office	sought		Office held	
	Date	Payee name						
	09/29/2017	Bush, Mela	nie					
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code			
	\$1,500.00	9 Creek Fo	rest Ln					
		Conroe, TX	77384					
	PURPOSE	(a) Category (s	ee Categories listed at the top of t	his schedule)	(b)	Description		
	OF EXPENDITURE	Loan Repay	yment/Reimbursement			<b></b>	outside of Texas. Complete Schedule T.	
						_	TX, officeholder living expense f loan from personal funds	through
						9/18/17	riban iroin personal iunus	แแบนนูก
	Complete ONLY if direct expenditure to benefit C/OF		ceholder name	Office	I sought		Office held	
_	Date	Payee name	<del> </del>		····	· <u>.                                    </u>		
	09/20/2017	Bush, Mela	nie					
	Amount (\$)	Payee addre	ss; City;	State; Zip	Code			
	\$4,234.17	9 Creek Fo	-					
	, ,,							
		Conroe, TX	77384					
	PURPOSE	(a) Category (Se	ee Categories listed at the top of t	his schedule)	(b)	Description		
	OF EXPENDITURE		/ment/Reimbursement			_	utside of Texas. Complete Schedule T.	
						ш	TX, officeholder living expense	thro:
						8/31/17	f loan from personal funds	แแบนผู้ไ
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office :	sought		Office held	
	expenditure to benefit C/OF		ooriolaat (lattic	Office :	Jougin		Ombe field	

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Candidate/Officehold Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla		ges/Contract Labor	Travel Out of District OTHER (enter a category no	nt listed above)		
	le F1: 2 FILER NAME				3 Filer ID			
Sch: 5/21 Rpt: 3	4/57 Bush, Melar	niė						
4 Date 09/24/2017	5 Payee name Bush, Melar	nie						
6 Amount (\$) \$5,00		est Ln	tate; Zip Cod	е				
· , · · · · · · · · · · · · · · · · · ·	Conroe, TX	7738 <del>4</del> 						
8 PURPOSE OF EXPENDITURE	4	e Categories listed at the top of thi ment/Reimbursement	is schedule)	Check if Austin	outside of Texas. Complete Sched , TX, officeholder living expense of loan from personal fu			
Complete <u>ONLY</u> if a expenditure to bene		eholder name	Office soug	ht	Office held			
Date 09/19/2017	Payee name CC Plus							
Amount (\$) \$4,00	Payee addres 0.00 4205 Hwy 1 Conroe, TX	05 W	tate; Zip Cod					
PURPOSE OF EXPENDITURE	(a) Category (se Event Exper	e Categories listed at the top of this	s schedule)		outside of Texas, Complete Schedi TX, officeholder living expense	иle Т.		
Complete <u>ONLY</u> if d expenditure to bene		Candidate/Officeholder name Office sought Office held						
Date	Payee name							
09/26/2017	CC Plus							
Amount (\$)	Payee addres 8.00 4205 Hwy 19		tate; Zip Cod	ę		·		
	Conroe, TX	77304						
PURPOSE OF EXPENDITURE	(a) Category (Se Event Exper	e Categories listed at the top of this	s schedule)		outside of Texas. Complete Schedu TX, officeholder living expense	ule T.		
Complete <u>ONLY</u> if d expenditure to bene		eholder name	Office sough	nt	Office held			

#### SCHEDULE F1

Advertising Expense Accounting/Banking

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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Bayment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Exp Printing Ex Salaries/W	pense	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:						3	Filer ID		
	Sch: 6/21 Rpt: 35/57	Bush, Mel	anie ————————————————————————————————————							
4	Date	5 Payee nam	e							
	09/18/2017	Cake That	1							
6	Amount (\$)	7 Payee addr	ess; City; Sta	te; Zip Co	de	•				
	\$140.00	10595 Nor	rth <b>ridge</b> Dr							
		Conroe, T.	X 77303							
8	PURPOSE	(a) Category	See Categories listed at the top of this s	scheduje)	(b) [	Description				
	OF EXPENDITURE	Event Exp		· · ·				de of Texas, Complete Schedule T.		
	EXI ENDITORE	EXPENDITURE			Ĺ	Check if Austin, TX, officeholder living expense				
					(	Cake for ever	П			
_	0	0	C   -   -   -   -   -   -   -   -	055		•		Office held		
g	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	дπτ			Office held		
	Date	Payee nam	e							
	09/19/2017	Gauthier, I	Devin							
	Amount (\$)	Payee addr	ess; City; Stat	te; Zip Co	de					
	\$300.00	19 S Crisp Morning Cir								
		The Wood	lands, TX 77382							
	PURPOSE	(a) Category	See Categories listed at the top of this s	schedule)	(b) [	escription				
	OF EXPENDITURE	Event Exp		´		<b>-</b>		de of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense  Auction Item bench									
					-	Auction item -	D	encii		
	Complete ONLY if disease	Condidate (O:	Final place and a	Office sour	ah+			Office hold		
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						Office Reid			
		T	<del></del>							
	Date	Payee name								
	08/24/2017	<b></b>	wart Campaign							
	Amount (\$)	Payee addr		te; Zip Co	de					
	\$20.00	PO Box 50	)1							
		Willis, TX	77378							
	PURPOSE	(a) Category (	See Categories listed at the top of this s	schedule)	(b) [	escription				
	OF EXPENDITURE		ons/Donations Made By					de of Texas. Complete Schedule T.		
		Candidate.	/Officeholder/Political Com	mittee	L	J check if Ausun, Event ticket	IX,	officeholder living expense		
						TVOIR HOREL				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office soug	ht			Office held		
	expenditure to benefit C/OI		iliceriolde: Hairie	Omee soug	Ji II			Office field		
	- +									

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees
Food/Beverage Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment		el Out of District IER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 7/21 Rpt: 36/57	2 FILER NAME Bush, Melanie	rID
4 Date 10/10/2017	5 Payee name Lake Conroe Area Republican Women	
6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code PO Box 737	
	Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Dues to Republican Org  (b) Description  Check if travel outside of Check if Austin, TX, office  Dues	Texas, Complete Schedule T. holder living expense
Complete ONLY if direct expenditure to benefit C/Ol		Office held
Date 09/07/2017	Payee name Lake Conroe Area Republican Women	
Amount (\$) \$20.00	Payee address; City; State; Zip Code PO Box 737  Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Texas, Complete Schedule T. holder living expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date 11/02/2017	Payee name Lake Conroe Area Republican Women	
Amount (\$) \$20.00	Payee address; City; State; Zip Code PO Box 737	
	Montgomery, TX 77356	
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if travel outside of Check if Austin, TX, office  Luncheon ticket	Texas. Complete Schedule T. holder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought H	Office held

# SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 8/21 Rpt: 37/57	2 FILER NAME  Bush, Melanie  3 Filer ID
4	Date 09/11/2017	5 Payee name Liberty Belles Republican Women
6	Amount (\$) \$15.76	7 Payee address; City; State; Zip Code 29815 S Legends Chase Cir Spring, TX 77386
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 ticket
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date 11/13/2017	Payee name Magnolia Area Republican Women
	Amount (\$) \$15.00	Payee address; City; State; Zip Code PO Box 729  Pinehurst, TX 77362
	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)  Dues to Republican Orgs  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Dues
	Complete <u>ONLY</u> if direct expenditure to benefit C/Of	Candidate/Officeholder name Office sought Office held H
	Date 10/01/2017	Payee name MediaGenics
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 8122  Huntsville, TX 77340
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign consulting
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

# SCHEDULE F1

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

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		Git/Awards/Memorials Expe Legal Services	Salaries/	Wages	/Contract Labor	OTHER (enter a cate	gory not listed above)
			The Instruction Guide	explains how to co	omple	te this form.	<u>.</u>	
1	Total pages Schedule F1: Sch: 9/21 Rpt: 38/57	2 FILER NAM Bush, Mel				3	3 Filer ID	
4	Date 11/03/2017	5 Payee nam MediaGen						
6	Amount (\$) \$2,000.00	7 Payee addr PO Box 8: Huntsville	* **	State; Zip Co	ode			
8	PURPOSE		See Categories listed at the top	n of this rehadulo)	(b)	Description		
	OF EXPENDITURE	Consulting		701 tills schedule)		Check if travel ou	utside of Texas. Complete FX, officeholder living expe Sulting	
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	ught		Office held	
_	Date	Payee name	<del></del> e					
	12/05/2017	MediaGen	ics					
	Amount (\$) \$2,000.00	Payee addr PO Box 81 Huntsville,	122	State; Zip Co	ode			
	PURPOSE OF EXPENDITURE	(a) Category ( Consulting	See Categories listed at the top   Expense	of this schedule)		<u></u>	utside of Texas. Complete (X, officeholder living expe	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	<u>ı</u> ıght		Office held	
	Date 11/15/2017	Payee name MediaGen			••			
	Amount (\$) \$557.49	Payee addre		State; Zip Co	ode			
	DUDDOS"	ļ	·		(L)			
	PURPOSE OF EXPENDITURE	(a) Category (	See Categories listed at the top g Expense	of this schedule)		<b></b>	tside of Texas. Complete 'X, officeholder living expe	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ficeholder name	Office sou	ıght		Office held	

# SCHEDULE F1

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

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Ove Polling Exp Printing Ex			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Candidate/Officerolder/Politica	1) Committee	The Instruction Guide expl		_		OTHER (enter a category not asset above)
1	Total pages Schedule F1:	2 FILER NAM	IE			3	Filer ID
	Sch: 10/21 Rpt: 39/57	Bush, Mela	anie				
4	Date	5 Payee name	e				. · · · · · · · · · · · · · · · · · · ·
	09/14/2017	Melisa Mill	er Campaign				
6	Amount (\$) \$25.00	7 Payee addre PO Box 29	•	State; Zip Co	ide		,
		Conroe, TX	X 77305				
8	PURPOSE OF EXPENDITURE	Contributio	See Categories listed at the top of the ons/Donations Made By /Officeholder/Political Co		_	stin, TX,	ide of Texas, Complete Schedule T. , officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght		Office held
Г	Date	Payee name	e	<u> </u>			
	08/31/2017	Montgome	ry County Association o	f Business W	Vomen		
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	de		
	\$155.00	13921 Hwy	y 105 W				
	!	Ste 130					
L	<u> </u>	Conroe, T	X 77304				
	PURPOSE OF EXPENDITURE	(a) Category (s Advertising	See Categories listed at the top of th g Expense	iis schedule)		stin, TX,	de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ficeholder name	Office sout	ght		Office held
	Date 11/11/2017	Payee name Montgome	e ry County Republican P	arty			
	Amount (\$) \$1,250.00	Payee addre	lf St	State; Zip Cod	de		
匚		Conroe, TX					
	PURPOSE OF EXPENDITURE	(a) Category (s Fees	See Categories listed at the top of th	is schedule)	المما		de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		ficeholder name	Office soug	ght		Office held
				,			

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Consulting Expense
Contributions/ Donations Made By -Food/Beverage Expense Gift/Awards/Memorials Expense Poliing Expense Travel in District Travel Out of District Printing Expense Salaries/Wages/Contract Labor Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 11/21 Rpt: 40/57 Bush, Melanie 4 Date 5 Payee name 11/07/2017 Montgomery County Republican Women Payee address; Amount (\$) City: State; Zip Code \$30.00 PO Box 1766 Conroe, TX 77305 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Dues to Republican Oras **EXPENDITURE** Check if Austin, TX, officeholder living expense Dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/27/2017 Montgomery County Republican Women Amount (\$) Payee address; City; State; Zip Code \$400.00 PO Box 1766 Conroe, TX 77305 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Event sponsorship Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name North Shore Republican Women 10/10/2017 Amount (\$) Payee address; State; Zip Code City; \$20.00 30 Fairway Park Montgomery, TX 77356 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Dues to Republican Orgs **EXPENDITURE** Check if Austin, TX, officeholder living expense Dues Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Constituting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expe Legal Services  The Instruction Guide	Salaries/	Expens s/Wages	nse es/Contract Labor		Travel Out of District OTHER (enter a category not listed above	/e)
1	Total pages Schedule F1:	2 FILER NAME	<u> </u>				3	Filer ID	
	Sch: 12/21 Rpt: 41/57	Bush, Melai							
4	Date	5 Payee name							
	07/31/2017	North Shore	e Republican Wome	ın					
6	Amount (\$)	7 Payee addres	ss; City;	State; Zip C	Code				
	\$300.00	30 Fairway	Park						
		Montgomer	y, TX 77356						
8	PURPOSE	(a) Category (S	ee Categories listed at the top	o of this schedule)	(b)	Description			
İ	OF EXPENDITURE	1	ns/Donations Made				outsic	de of Texas, Complete Schedule T.	
	EXPENDITURE		Officeholder/Political			_		officeholder living expense	
	Į					Event sponso	orsh	ip	
_		<u> </u>	<del>*</del>	······································					
9	Complete ONLY if direct expenditure to benefit C/OH		iceholder name	Office so	ught			Office held	
L	expenditure to benefit oron	<u> </u>							
	Date	Payee name							
	09/28/2017	River Plants	ation Country Club						
	Amount (\$)	Payee addres	ss; City;	State; Zip C	ode				
	\$18.00	550 Country	•						
	1								
		Conroe, TX	77302						
	PURPOSE	(a) Category (Sr	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE		age Expense			<u></u>		ie of Texas. Complete Schedule T.	
	Di Libi. Cit					Check if Austin		officeholder living expense	
	!					Luilliaeon ac	:KC:		
<del></del>	Complete ONLY if direct	Condidate/Off	ceholder name	Office so				Office held	<del></del>
	expenditure to benefit C/OI		zenoider name	OHCE SO	agm			Office field	
<u> </u>		<del></del>			—				
	Date	Payee name	the Company of the Company						
	11/30/2017		ation Country Club						·····
	Amount (\$)	Payee addres		State; Zip Ci	ode				
	\$18.00	550 Country	/ Club Dr						
	1								
ĺ	1	Conroe, TX	77302						
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description			
	OF EXPENDITURE		age Expense	Of this derican,		Check if travel		le of Texas. Complete Schedule T.	
	EXPENDITORE					_		officeholder living expense	
i	1	1				Luncheon ticl	ket		
Ĺ.		1							
ĺ	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Offic	ceholder name	Office sou	ught			Office held	
_	expenditure to benefit Go	<del>-</del>							
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4									

# SCHEDULE F1

Advertising Expense

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

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donat Candidate/Office	tions Made By	. Fo	ees ood/Beverage Expense ft/Awards/Memorials Expens gal Services	Polling Exp e Printing Ex	ense pense		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Credit Card Paymen	nt	т	he Instruction Guide ex	plains how to cor	nplet	te this form.	
Total pages Sch	edule F1:	2 FILER NAME				3	Filer ID
Sch: 13/21 Rpt	t: 42/57	Bush, Melani	9			i	
Date		5 Payee name				<b>'</b>	
09/18/2017		Ross, Vince					
Amount (\$)		7 Payee address	; City;	State; Zip Coo	de		<del>.</del>
	\$400.00	210 Springs E	dge Dr	•			
		Montgomery,	TX 77356				
PURPOSE			Categories listed at the top of	(alain - alanda)	(b)	Description	
OF		Event Expens		i this schedule)	(~, 		side of Texas, Complete Schedule T.
EXPENDITURE	-	, , , , , ,			Ì	ш	, officeholder living expense
						Auctioneer serv	ices
Complete ONLY expenditure to be		Candidate/Office	holder name	Office soug	jht		Office held
	<del></del>		· · · · · · · · · · · · · · · · · · ·				
Date		Payee name					
08/21/2017		Square				<u>,                                      </u>	
Amount (\$)		Payee address	•	State; Zip Co	le		
	\$10.75	1455 Market	Street				
		Suite 600					
		San Francisco	o, CA 94103				
PURPOSE OF		(a) Category (See	Categories listed at the top of	this schedule)	(b) i	Description	
EXPENDITURE	:	Fees			ļ	<u></u>	ide of Texas. Complete Schedule T. , officeholder living expense
					Į.	Credit card fee	, amountain ming approve
Complete ONLY	if direct	Candidate/Office	holder name	Office soug	ht		Office held
expenditure to be	enefit C/OH						
Date	T	Pavee name		·····		<del> </del>	
08/22/2017		Square					
Amount (\$)		Payee address:	City;	State; Zip Coo	le		
.,	\$1.75	1455 Market S	•				
		Suite 600					
		San Francisco	o, CA 94103				
PURPOSE				and a color data of the	(b) i	Description	
OF		Fees	Categories listed at the top of	this schedule)	`~, , [		ide of Texas. Complete Schedule T.
EXPENDITURE		, 555			Ī		, officeholder living expense
					(	Credit card fee	
	if direct	Candidate/Office	holder name	Office soug	ht		Office held

# SCHEDULE F1

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expens Legal Services  The Instruction Guide ex	Salaries/\	Vages	s/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 14/21 Rpt: 43/57	2 FILER NAMI Bush, Mela				];	3 F	Filer (D
4	Date 08/25/2017	5 Payee name Square						
6	Amount (\$) \$7.55	7 Payee addre 1455 Marke Suite 600 San Franci		State; Zip Co	de	·		
8	PURPOSE OF EXPENDITURE	(a) Category (s	ee Categories listed at the top o	f this schedule)	(b)		TX, σ	e of Texas. Complete Schedule T. fliceholder living expense
9	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	ght			Office held
	Date 08/28/2017	Payee name Square						
	Amount (\$) \$7.55	Payee addre 1455 Marke Suite 600 San Francis	•	State; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a) Category (s Fees	ee Categories listed at the top o	f this schedule)	(b)		TX, of	of Texas. Complete Schedule T.
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	ght			Office held
	Date 09/19/2017	Payee name Square						
	Amount (\$) \$27.26	Payee addre 1455 Marke Suite 600 San Francis		State; Zip Co	de			
	PURPOSE OF EXPENDITURE	(a) Category (s Fees	ee Categories listed at the top o	this schedule)	(b)	ш	TX, of	of Texas. Complete Schedule T. ficeholder living expense
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	ght			Office held
				·				

# SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services  The Instruction Guid	,		ages	s/Contract Labor		OTHER (enter a category not listed above)	
_	Tradition of Orbital In Ed.	Τ.	EU EB MAN		uc explains in					E't. IB	
1	Total pages Schedule F1: Sch: 15/21 Rpt: 44/57	2	Bush, Mela					3	ś	Filer ID	
4	Date	5	Payee name	<del></del>					_	<del></del>	
	09/20/2017		Square								
	Amount (\$) \$118.81	7		et Street isco, CA 94103		Zip Cod	ie				
8	PURPOSE	(a)	Category (s	See Categories listed at the	top of this scher	dule)	(b)	Description			
	OF EXPENDITURE		Fees						TX, c	e of Texas. Complete Schedule T. officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ficeholder name	Of	ffice soug	jht			Office held	
_	Date		Payee name	<del></del>			_		_		
_	10/05/2017		Square				_				
	Amount (\$)	Г	Payee addre	ess; City;	State;	Zip Cod	Je				
	\$3.20		1455 Marke	et Street							
	l		Suite 600								
	l		San Franci	isco, CA 94103							
_	PURPOSE	(a)	Category (s	See Categories listed at the	top of this scher	edule) (	(b)	Description			
	OF EXPENDITURE		Fees					<u></u>		e of Texas. Complete Schedule T.	
								Credit card fee		officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ficeholder name	Of	ffice soug	ıht			Office held	
	Date	Ī	Payee name	)	<del></del>					<del> · · · · · · · · · · · · · · · · · · </del>	
	10/11/2017		Square								
_	Amount (\$)	Г	Payee addre	ess; City;	State;	Zip Cod	le				
	\$3.20		1455 Marke	et Street							
	!		Suite 600								
	!		San Franci	sco, CA 94103							
_	PURPOSE	(a)	Category (S	See Categories listed at the	top of this scher	edule) (	(b)	Description		**************************************	
	OF EXPENDITURE		Fees	-		·				e of Texas. Complete Schedule T.	
	EXPENDITORE					1				officeholder living expense	
								Credit card fee	:		
	Complete ONLY if direct		Candidate/Off	ficeholder name	Of	ffice soug	ht			Office held	
	expenditure to benefit C/OF	4									
_		_					_			-	

# SCHEDULE F1

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Office Overhea Polling Expense Printing Expens Salaries/Wages	se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
<u> </u>	Total pages Schedule F1:		1000 10 22	<del> </del>	F1: - 17			
1	Sch: 16/21 Rpt: 45/57	Bush, Melanie		3	Filer ID			
4	Date	5 Payee name						
	10/18/2017	Square						
	Amount (\$) \$29.30	7 Payee address; City; State; 1455 Market Street Suite 600 San Francisco, CA 94103	; Zip Code					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this scho	Gees  Check if travel outside of Texas. Complete Sched Check if Austin, TX, officeholder living expense Credit card fee					
9	Complete ONLY if direct expenditure to benefit C/Oh		Office sought		Office held			
Γ	Date	Payee name						
	11/03/2017	Square						
	Amount (\$) \$7.55	Payee address; City; State; 1455 Market Street Suite 600 San Francisco, CA 94103	Zip Code					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Fees	edule) (b)	<u></u> !	side of Texas. Complete Schedule T. ., officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Office sought		Office held			
<u> </u>	Date	Payee name						
	11/06/2017	Square						
	Amount (\$) \$7.55	Payee address; City; State; 1455 Market Street Suite 600 San Francisco, CA 94103	Zip Code					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Fees	(b)		ide of Texas. Complete Schedule T.			
	Complete ONLY if direct expenditure to benefit C/OF		Office sought		Office held			

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide explain:		ges/Contract Labor	OTHER (enter a category not listed a	above)
1	Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID	
_	Sch: 17/21 Rpt: 46/57	Bush, Mela				<b>9</b> Thories	
4	Date	5 Payee name	ė				
	11/09/2017	Square					
6	Amount (\$)	7 Payee addr	ess; City; State	e; Zip Cod	е		
	\$76.71	1455 Mark	et Street				
		Suite 600					
		San Franc	isco, CA 94103				
8	PURPOSE	(a) Category (	See Categories listed at the top of this so	chedule) (I	b) Description		
ĺ	OF EXPENDITURE	Fees		-	<u></u>	outside of Texas. Complete Schedule T.	
						, TX, officeholder living expense	
					Credit card fe	ee	
Ļ		2 51 1 12	·	0"		05. 1.11	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sough	1E	Office held	
	Date	Payee name	€				
	11/10/2017	Square					
	Amount (\$)	Payee addre	ess; City; State	e; Zip Code	Э		
	\$106.71	1455 Mark	et Street				
		Suite 600					
		San Franc	isco, CA 94103				
	PURPOSE OF	(a) Category (s	See Categories listed at the top of this so	chedule) (I	Description		
	EXPENDITURE	Fees		İ	<u>                                     </u>	outside of Texas. Complete Schedule T.	
					Credit card fe	, TX, officeholder living expense	
					Credit cara ic		
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office sough	nt	Office held	
F	Date	Payee name	<del></del>				
	11/13/2017	Square					
一	Amount (\$)	Payee addre	ess; City; State	e; Zip Code	9		
	\$20.12	1455 Mark	et Street				
		Suite 600					
			sco, CA 94103				
	DUDDOCE			10	2) December	<del></del>	
	PURPOSE OF		See Categories listed at the top of this so	chedule)	<ul> <li>Description</li> <li>Check if travel of</li> </ul>	outside of Texas. Complete Schedule T.	
	EXPENDITURE	Fees				TX, officeholder living expense	
					Credit card fe		
	Complete ONLY if direct		ficeholder name	Office sough	nt	Office held	
	expenditure to benefit C/OF	4					į
ı							

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Children and		Vages	s/Contract Labor		ivel Out of District HER (enter a category not listed above)	1
Ļ		<del></del>	The Instruction Guide expla	tins now to co	mpie				
1	Total pages Schedule F1: Sch: 18/21 Pat: 47/57					3	3 File	er ID	
L	Sch: 18/21 Rpt: 47/57	Bush, Mela							
4		5 Payee name	<b>3</b>						
_	11/20/2017	Square							
6	Amount (\$)	7 Payee addre	ess; City; St	state; Zip Co	de				
	\$11.91	1455 Marke	et Street						
	!	Suite 600							
	,	San Franci	isco, CA 94103						
8	PURPOSE	(a) Category e	See Categories listed at the top of this	in cabedule)	(b)	Description	<del></del>		
	OF	Fees (S	see Categories listed at the top of the	s schedule)	1		utside of	f Texas. Complete Schedule T.	
	EXPENDITURE	"		1	i	السسا		eholder fiving expense	
	!			J	l	Credit card fee	3		
_		<u> </u>							
9			ficeholder name	Office sou	ght		_	Office held	
_	expenditure to benefit C/OF	л 							
Г	Date	Payee name	<u> </u>	<del></del>			-		<del></del>
ĺ	12/06/2017	Square							
$\vdash$	Amount (\$)	Payee addre	ess; City; St	itate; Zip Co	de				
	\$1.03	1455 Marke	• • •	•					
ĺ	!	Suite 600							
	!		isco, CA 94103						
$\vdash$	PURPOSE	<u> </u>			(b)	Description		_	
	OF	Fees (s	See Categories listed at the top of this	s schedule)	( <b></b> ,		utside of	Texas. Complete Schedule T.	
	EXPENDITURE	rte3		J	i	<u>—</u>		eholder living expense	
	!			J	ı	Credit card fee	<del>)</del>		
	!				ı _				
	Complete ONLY if direct		ficeholder name	Office sout	ght			Office held	
	expenditure to benefit C/OF	Н							
$\vdash$	Date	Payee name	÷						
	12/13/2017	Square							
<del>                                     </del>	Amount (\$)	Payee addre	ess; City; St	tate; Zip Coo	de				
	\$1.46	1455 Marke			-				
	1	Suite 600							
ĺ	1	1	isco, CA 94103						
<u> </u>					(1-X				
	PURPOSE OF	1	See Categories listed at the top of this	s schedule)	(D)	Description  Check if travel out	reide of	Texas. Complete Schedule T.	
l	EXPENDITURE	Fees		J	ı			eholder living expense	
	1			J	ı	Credit card fee		- ,	
	1								
	Complete ONLY if direct		ficeholder name	Office soug	aht			Office held	
i	expenditure to benefit C/OF			-	5				
$\vdash$					—	<del> </del>			
i									

# SCHEDULE F1

Advertising Expense Accounting/Banking

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expense	Salaries/\	xpens Vages	se //Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	IE		-		3	Filer ID	_
	Sch: 19/21 Rpt: 48/57	Bush, Mel							
4	Date	5 Payee nam	е						
	12/21/2017	Square							
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip Co	de	<del></del>			
	\$1.46	1455 Mark	et Street						
İ		Suite 600							
			isco, CA 94103						
Ļ	DUDDOCE				763				
8	PURPOSE OF		See Categories listed at the top of	this schedule)	(13)	Description  Check if travel	ietuo	de of Texas. Complete Schedule T.	
	EXPENDITURE	Fees				<u>  </u>		officeholder living expense	
						Credit card fe			
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ght			Office held	******
Г	Date	Payee nam	<del>=</del>						
ŀ	12/28/2017	Square							
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de	•			_
	\$1.46	1455 Mark		•					
		Suite 600							
			isco, CA 94103						
					(1.3				
	PURPOSE OF		See Categories listed at the top of	this schedule)	(b)	Description	nuteî	da of Tayon, Complete Schodule T	
	EXPENDITURE	Fees				<u></u>		de of Texas. Complete Schedule T. officeholder living expense	
						Credit card fe		• • • • • • • • • • • • • • • • • • • •	
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office held	
L		<u> </u>							_
	Date	Payee name	9						
	12/31/2017	Square							
	Amount (\$)	Payee addr	ess; City;	State; Zip Co	de				
	\$16.03	1455 Mark	et Street						
		Suite 600							
		Saп Franc	isco, CA 94103						
	PURPOSE	(a) Category	See Categories listed at the top of	this schedule)	(b)	Description			
	OF	Fees	see outegories notes at the top of	uno venevare,	•		outsid	de of Texas. Complete Schedule T.	
	EXPENDITURE					<u></u>		officeholder living expense	
						Credit card fe	e		
L									
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office held	
	expenditure to benefit C/OI	4							

# SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment  Total pages Schedule F1: 2 FILER NA		Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Salaries/	Wage	s/Contract Labor	Travel Out of District OTHER (enter a cate	gory not listed above)
1	Total pages Schedule F1:	2 FILER NAM	Ē				3 Filer ID	
L	Sch: 20/21 Rpt: 49/57	Bush, Mela						
4	Date	5 Payee name	1					
Ì	11/20/2017	Texas GOI	P Store					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode		·	
	\$2,503.82	404 I-45 S						
		Huntsville,	TX 77340					
8	PURPOSE	(a) Category (s	iee Categories listed at the to	p of this schedule)	(b)	Description		
	OF EXPENDITURE	Advertising	Expense			<u> </u>	outside of Texas. Complete	
	:					Signs	TX, officeholder living expe	ense
						Signs		
Ļ	Consider CNUV it disease	Constitute to 10th	iceholder name	0#	1		Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		icenoider name	Office so	ugni		Office field	
⊨	Date	Dove a serve						
	09/22/2017	Payee name	ands Republican W	lomen				
L			-				<del></del>	
	Amount (\$)	Payee addre	· -	State; Zip C	oae			
İ	\$50.00	PO Box 72	94					
		The Woodi	ands, TX 77387					
	PURPOSE	(a) Category (s	ee Categories listed at the to	p of this schedule)	(b)	Description		
	OF EXPENDITURE	Advertising	Expense			ш	utside of Texas. Complete TX, officeholder living expe	
	:					Directory adve		ense
						Directory days	ordonig	
$\vdash$	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	l uaht		Office held	
	expenditure to benefit C/OI							
⊨	Date	Dayoo nama	· · · · ·					
	09/13/2017	Payee name	ands Republican W	/omen				
			· · · · · · · · · · · · · · · · · · ·					
	Amount (\$)	Payee addre		State; Zip C	oue			
	\$22.00	PO Box 72	94					
			,					
<u> </u>		The Woodl	ands, TX 77387					· · · · · · · · · · · · · · · · · · ·
1	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description		
	EXPENDITURE	Food/Beve	rage Expense				utside of Texas. Complete TX, officeholder living expe	
						Luncheon tick		ar (or )
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	J Jght		Office held	
	expenditure to benefit C/OI							
$\vdash$		<del></del>						

# SCHEDULE F1

Advertising Expense Accounting/Banking

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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - Gi al Committee Le	od/Beverage Expense ft/Awards/Memorials Expens gal Services he Instruction Guide ex	Salaries/	Expens Wages	se s/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	•				3	Filer ID	
	Sch: 21/21 Rpt: 50/57	Bush, Melanie	e						
4	Date	5 Payee name							
	10/11/2017	The Woodlan	ds Republican Wor	nen					
6	Amount (\$)	7 Payee address	; City;	State; Zip C	ode				
	\$22.00	PO Box 7294	•	·					
		The Woodlan	ds, TX 77387						
8	PURPOSE	(a) Category (See	Categories listed at the top o	f this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Beverag					outsi	de of Texas, Complete Schedule T.	
	EXPENDITORE					니		officeholder living expense	
						Luncheon ticl	ket		
L					<u> </u>				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office H	holder name	Office so	ught			Office held	
F	Date	Payee name							
	11/07/2017	l '	ds Republican Won	nen					
├		Payee address:	·	State; Zip Co					
	Amount (\$) \$22,00	PO Box 7294	City,	State, Zip Ci	Jue				
	\$22.00	PO DUX 1294							
		The Woodlan	ds, TX 77387						
	PURPOSE	(a) Category (See	Categories listed at the top of	f this schedule)	(b)	Description			
	OF EXPENDITURE	Food/Beverag				<u></u>		de of Texas, Complete Schedule T.	
								officeholder living expense	
						Luncheon tick	KEI		
L					<u> </u>				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	holder name	Office sou	ight			Office held	
L				•					
	Date	Payee name							
	09/11/2017	USPS							
┢	Amount (\$)	Payee address;	City;	State; Zip Co	ode				
	\$259.49	9450 Pinecrof	t						
		The Woodland	ds, TX 77380						
Г	PURPOSE	(a) Category (See (	Categories listed at the top of	f this schedule)	(b)	Description			
	OF	Event Expens		,			outsio	le of Texas. Complete Schedule $\top$ .	
	EXPENDITURE	· ·				_		officeholder living expense	
						Labels and S	tam	ps for Invitations	
L									
	Complete ONLY if direct	Candidate/Office	holder name	Office sou	ight			Office held	
1	expenditure to benefit C/OI	-1							
<b></b> -							_		
l									

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 1/7 Rpt: 51/57 Bush, Melanie 4 Date 5 Pavee name 07/31/2017 Facebook 6 Amount (\$) Payee address; State; Zip Code City: \$28.45 1 Hacker Way Reimbursement from political contributions intended ١x١ Menlo Park, CA 94025 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Online campaign advertisements Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/31/2017 Facebook Amount (\$) Payee address; City; State; Zip Code \$5.63 1 Hacker Way Reimbursement from political contributions |X| Menlo Park, CA 94025 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Online advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/QH Date Payee name 09/30/2017 Facebook Amount (\$) Payee address; City; State; Zip Code \$24.96 1 Hacker Way Reimbursement from political contributions intended Menlo Park, CA 94025 **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Online advertising Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

Advertising Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Rolate

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of District OTHER (enter a category not listed above)		
The Instruction Guide explains how to complete this form.							
1	Total pages Schedule G:	2 FILER NA	ME			3	Filer ID
	Sch: 2/7 Rpt: 52/57	Bush, M	elanie				
4	Date	5 Payee na	me				
١.	10/31/2017	Faceboo	k				
6	Amount (\$)	7 Payee ad	dress; City; State	e; Zip C	ode		
	\$77.27	1 Hacke	r Way				
	Reimbursement from political contributions intended	Menlo P	ark, CA 94025				
8	PURPOSE	(a) Category	(See Categories listed at the top of this so	chedule)	(b) Description	=	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Advertisi	ng Expense			_	heck if Austin, TX, officeholder living expense
					Online advertisir	ıg	
					<u></u>		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought		Office held
Г	Date	Payee na	me				
İ	12/31/2017	Faceboo	k				
Г	Amount (\$)	Payee ad	dress; City; State	e; Zip Co	ode	•	
\$89.99 1 Hacker Way							
	Reimbursement from political contributions intended	Menlo Pa	ark, CA 94025				
Г	PURPOSE	Category	(See Categories listed at the top of this so	:hedule)	Description [	<b>⊒</b> '	heck if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE		Advertisi	ng Expense			_	heck if Austin, TX, officeholder living expense
Online advertising							
L		<u> </u>					
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought		Office held
F	Date	Payee na	me				
ŀ	12/31/2017	Home D	epot				
	Amount (\$)	Payee ad	dress; City; State	e; Zip Co	ode		
	\$67.18	6119 FM	1488				
	Reimbursement from						
	x political contributions intended	Magnolia	ı, TX 77354				
Г	PURPOSE	Category	(See Categories listed at the top of this so	hedule)	Description	c	heck if travel outside of Texas, Complete Schedule T.
	OF EXPENDITURE	Advertisi	ng Expense			_	heck if Austin, TX, officeholder living expense
					T-posts for signs	i	
L							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought		Office held
Г					**************************************		
1							

#### SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

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

Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made Candidate/Officeholder/Pol Credit Card Payment		ng Expense Travel Out of District ries/Wages/Contract Labor OTHER (enter a category not listed above)  o complete this form.	
1 Total pages Schedule G Sch: 3/7 Rpt: 53/57	Bush, Melanie	3 Filer ID	
4 Date 10/05/2017	5 Payee name Lake Conroe Area Republican Women		
6 Amount (\$) \$20.0	7 Payee address; City; State; Zip PO Box 737	Code	
Reimbursement from political contributions intended	Montgomery, TX 77356		
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 ticket	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 09/18/2017	Payee name Landry's Seafood House		
Amount (\$) \$3,600.0	Payee address; City; State; Zip 1212 Lake Robbins Dr	Code .	
Reimbursement from political contributions intended The Woodlands, TX 77380			
PURPOSE OF EXPENDITURE	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  Catering for event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
Date 07/19/2017	Payee name MediaGenics		
Amount (\$) \$424.6		Code	
Reimbursement from political contributions intended	Huntsville, TX 77340		
PURPOSE OF EXPENDITURE	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 Invitations to kickoff event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

SCHEDULE G

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Event Expense Fees Food/Beverage Expense

Candidate/Officeholder/Political Committee Credit Card Payment		Legal Services The Instruction G			Vages/Contract Labor omplete this form.		OTHER (enter a category not listed above)			
1	Total pages Schedule G:	2	FILER NAME	 F				3	Filer ID	_
_	Sch: 4/7 Rpt: 54/57		Bush, Mela							_
4	Date	5	Payee name	;			.,			_
	07/28/2017		MediaGenio							
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de	-		
	\$343.00		PO Box 812	22						
	Reimbursement from									
	x political contributions intended		Huntsville,	TX 77340						
8	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sch	nedule)	(b) Description [		Check if travel outside of Texas. Complete Schedule T	
	OF EXPENDITURE		Event Expe	nse			į	ᄀᅄ	Check if Austin, TX, officeholder living expense	
	EXPENDITURE		•				Postage for invit	tatio	ons	
		1				ļ	I			
9	Complete ONLY if direct		ndidate/Officel	holdor namo			Office sought		Office held	_
2	expenditure to benefit	Ļαı	Infrate/Onice	JUluer Harne			Office Sought		Office field	
	С/ОН									
_		=							<del></del>	=
	Date		Payee name							
	07/28/2017		MediaGenic	es						
	Amount (\$)		Payee addres	ess; City;	State	; Zip Co	de			_
	\$141.65		PO Box 812							
	,		1000	<u></u>						
	X Reimbursement from political contributions			<b></b>						
	intended		Huntsville, 7	ΓX 77340						
	PURPOSE		Category (s	ee Categories listed at	the top of this sch	redule)	Description [	Cr	check if travel outside of Texas. Complete Schedule T	
	OF	1	Printing Exp	pense			,	다	check if Austin, TX, officeholder living expense	
EXPENDITURE							Event flyers prin	iting	I	
					'					
	Consider ONLY if direct			h-ider same			Office cought		Office held	_
	Complete <u>ONLY</u> if direct expenditure to benefit	Car	ndidate/Officel	holder name			Office sought		Опісе пеш	
	C/OH									
		=			<del></del>					=
	Date		Payee name							
	08/08/2017	1	MediaGenic	cs						
	Amount (\$)		Payee addres	ess; City;	State	; Zip Co	de			_
	\$2,000.00		PO Box 812							
	Reimbursement from political contributions	1								
	intended		Huntsville, 7	ΓX 77340						
	PURPOSE	Г	Category (se	ee Categories listed at	the top of this sch	iedule)	Description		heck if travel outside of Texas. Complete Schedule T	
	OF		Consulting E	Expense			. [	Cr	theck if Austin, TX, officeholder living expense	
	EXPENDITURE	İ		',		- 1	Campaign consu	ulting	ıa	
	1	ĺ								
	To a contract ONLY if divent		- 1: -t- (Office)	7 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		I	Office cought		Office hold	
	Complete <u>ONLY</u> if direct expenditure to benefit	Car	ndidate/Officeh	tolder name			Office sought		Office held	
	C/OH									
	<del></del>	—			· · · · · ·	<u>.</u>				-

### SCHEDULE G

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

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Polling Expense Printing Expense

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

	Candidate/Officeholder/Political Committee Credit Card Payment		mmittee Legal Services The Instruction Guide ex		Wages/Contract Labor omplete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule G:	2	FILER NAME			3 Filer ID
L	Sch: 5/7 Rpt: 55/57		Bush, Melanie			
4	Date	5	Payee name			
	08/31/2017		MediaGenics			
6	Amount (\$)	7	Payee address; City;	State; Zip Co	ode	
	\$2,000.00		PO Box 8122			
	Reimbursement from					
	X political contributions intended		Huntsville, TX 77340			
8	PURPOSE	(a)	Category (See Categories listed at the top of	f this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Consulting Expense			Check if Austin, TX, officeholder living expense
					Campaign consul	lting
9		Car	ndidate/Officeholder name	· · · · · · · · · · · · · · · · · · ·	Office sought	Office held
	expenditure to benefit C/OH					
L	0/0/1					<del> </del>
Г	Date		Payee name			
l	08/31/2017		MediaGenics			
	Amount (\$)		Payee address; City;	State; Zip Co	ode	
	\$110.89		PO Box 8122			!
	Reimbursement from					İ
	X political contributions intended		Huntsville, TX 77340			
	PURPOSE		Category (See Categories listed at the top of	f this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Advertising Expense		ļ L	Check if Austin, TX, officeholder living expense
					Reimbursement f	or online advertising, signs
<u>.                                    </u>						
		Car	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit C/OH					
	Date		Payee name	•		
	08/31/2017		MediaGenics			
	Amount (\$)		Payee address; City;	State; Zip Co	ode	
	\$233.15		PO Box 8122			
	Reimbursement from					
	x political contributions intended		Huntsville, TX 77340			
	PURPOSE		Category (See Categories listed at the top o	f this schedule)	Description	Check If travel outside of Texas. Complete Schedule T.
	OF EVDENDITUDE		Event Expense			Check if Austin, TX, officeholder living expense
	EXPENDITURE		·		Reimbursement fo	or invitations
	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit					
	C/OH				···	

#### POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Candidate/Officeholder/Political Committee Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID Sch: 6/7 Rpt: 56/57 Bush, Melanie 4 Date 5 Pavee name 07/15/2017 MediaGenics 6 Amount (\$) Payee address; City; State: Zip Code PO Box 8122 \$2,000.00 Reimbursement from political contributions [X] Huntsville, TX 77340 intended **PURPOSE** Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Consulting Expense **EXPENDITURE** Campaign Consulting Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit СЮН Date Payee name 09/17/2017 Michael's Amount (\$) Payee address; City; State; Zip Code \$28.12 19075 IH 45 S Ste 104 Reimbursement from political contributions |X| intended Conroe, TX 77386 PURPOSE Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Event Expense **EXPENDITURE** Decorations for event Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 08/24/2017 Montgomery County Republican Women Amount (\$) Payee address; City; State; Zip Code \$18.00 PO Box 1766 Reimbursement from political contributions intended Conroe, TX 77305 Check if travel outside of Texas. Complete Schedule $\mathsf{T}.$ **PURPOSE** Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Food/Beverage Expense **EXPENDITURE** Luncheon ticket Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

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

Advertising Expense Accounting/Banking

Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		y - al Committee	Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explain:		xpense Nages/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAM	Ē			3 Filer ID
	Sch: 7/7 Rpt: 57/57	Bush, Mela	anie			
4	Date	5 Payee name	<u>.</u>			
	07/14/2017	i '	ry County Young Republica	ans		
6	Amount (\$)	7 Payee addr	ess; City; State	e; Zip Cı	ode	
	\$35.00	300 Metca	lf St			
	Reimbursement from political contributions intended	Conroe, T	K 77301			
8	PURPOSE	(a) Category (	See Categories listed at the top of this so	chedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Dues to Re	epublican Orgs		[	Check if Austin, TX, officeholder living expense
					Dues	
L					<u> </u>	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought	Office held
	Date	Payee name	;			
	09/29/2017	Montgome	ry County Youth Services			
Г	Amount (\$)	Payee addre	ess; City; State	e; Zip Co	ode	
	\$500.00	105 W Lev	ris St			
	Reimbursement from political contributions intended	Conroe, TX	< 77301			
Г	PURPOSE	Category (s	See Categories listed at the top of this so	:hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		ns/Donations Made By Officeholder/Political Comr	mittee	Silent Auction It	Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	   Candidate/Office	holder name		Office sought	Office held
H	Date	Payee name				
	07/29/2017	VistaPrint	•			
⊢	Amount (\$)	Payee addre	ess; City; State	e; Zip Co	<del></del>	And the first of the second
	\$21.22	95 Hayden	•	•		
	Reimbursement from					
	x political contributions intended	Lexington,	MA 02421-7942			
Г	PURPOSE	Category (s	See Categories listed at the top of this so	:hedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Ove	rhead/Rental Expense			Check if Austin, TX, officeholder living expense
					Checks	
$\vdash$	Complete ONLY if direct	Candidate/Office	shoider name		Office sought	Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	noider name		Office sought	Onice nera
		·				