FORM C/OH CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 1 Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. 37 CANDIDATE / MS/MRS/MR FIRST Мі **OFFICEHOLDER** Billy NAME NICKNAME LAST SUFFIX Graff CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** 2405 Winter Trail Dr. MAILING **ADDRESS** Change of Address Conroe, TX 77304 Date Processed Date Imaged MS) MRS/MR FIRST МΙ CAMPAIGN **TREASURER** NAME SUFFIX NICKNAME bannion STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE: ZIP CODE CAMPAIGN TREASURER Lumberton Tx 77657 240 Morris **ADDRESS** (Residence or Business) PHONE NUMBER EXTENSION CAMPAIGN AREA CODE TREASURER 466-4662 PHONE 409 REPORT TYPE January 15 30th day before election 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) 8th day before election Exceeded \$500 limit July 15 PERIOD Month Dav Year Year Month Day COVERED 07/01/2019 THROUGH 12/31/2019 **ELECTION TYPE** 10 ELECTION **ELECTION DATE** Other Month χ Primary Runoff Year Day 03/03/2020 General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) Montgomery County Commissioner District Precinct-None **GO TO PAGE 2** Version V1.1.3a6aaf7d Forms provided by Texas Ethics Commission www.ethics.state.tx.us

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 37

Graff, Billy		14 Filer ID	
candidate / officeholder.	These expenditures may have been made without	t the candidate's or officehold	er's knowledge or
COMMITTEE TYPE	COMMITTEE NAME		
GENERAL	COMMITTEE ADDRESS		
SPECIFIC	COMMITTEE ADDRESS		
	COMMITTEE CAMPAIGN TREASURER NAME.		
	COMMITTEE CAMPAIGN TREASURER ADDRE	ESS	
		THAN PLEDGES, \$	0.00
		JS) \$	14,050.00
`			0.00
4. TOTAL POLITIC	AL EXPENDITURES	\$	18,057.73
		LAST DAY OF THE \$	7,290.35
		S OF THE LAST DAY	5,000.00
	A CONTRACTOR OF THE CONTRACTOR		
JEANNE DUPUIS	true and correct and includes under Title 15, Election Code	all information required to be	
IOTARY PUBLIC STATE OF TE MY COMM. EXP. 5/13/2020 NOTARY ID 12868398-6	Belley	of Candidate or Officeholder	
scribed before me, by the s	aid Billy Graff	, this the15	day
us icer administering	T. Dupuis Printed name of officer administering	Title of officer ad	A ministering oath
	This box is for notice of particle candidate / officeholder. consent. Candidates and COMMITTEE TYPE GENERAL SPECIFIC 1. TOTAL POLITIC LOANS, OR GU, (OTHER THAN F. 3. TOTAL POLITIC REPORTING PE. 6. TOTAL PRINCIPLE OF THE REPORTING PE. 6. TOTAL PRINCIPLE OF THE REPORTION OF T	This box is for notice of political contributions accepted or political expenditions and officeholder. These expenditures may have been made without consent. Candidates and officeholders are required to report this information consent. Candidates and officeholders are required to report this information. COMMITTEE TYPE COMMITTEE NAME	This box is for notice of political contributions accepted or political expenditures made by political contributions accepted or political expenditures made without the candidate's or officieholder consent. Candidates and officeholders are required to report this information only if they receive notice of committee type. COMMITTEE TYPE GENERAL COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED 4. TOTAL POLITICAL EXPENDITURES 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the accommunication required to be under title 15, Election Code. JEANNE DUPUIS JE

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			OVER SI	3 of 37			
18 FILER NAI Graff, Bill		19 Filer ID					
	E SUBTOTALS SCHEDULE		SUBTO	OTAL AMOUNT			
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	14,050.00			
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		s				
4. X	SCHEDULE E: LOANS		\$	5,000.00			
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	17,038.59			
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	energen v	\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	·	\$				
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,019.14			
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	ONS	\$				
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	90.14			
				:			
į							

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/8 Rpt: 4/37 FILER NAME 3 Filer ID Graff, Billy 4 Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 08/05/2019 \$100.00 Bailey, Myla 6 Contributor address; City; State; Zip Code 112 Moonspinner Montgomery, TX 77356 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 07/18/2019 \$10.00 Barnes, Geraldine (Mrs.) Contributor address; City; State; Zip Code PO Box 882 Lumberton, TX 77657 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 11/26/2019 \$1,250.00 Barnes, Gerry (Mr.) Contributor address; City; State; Zip Code PO Box 882 Lumberton, TX 77657 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$10.00 07/18/2019 Barnes, Gerry (Mr.) Contributor address; City; State; Zip Code PO Box 882 Lumberton, TX 77657 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$25.00 09/14/2019 Boaz, Angie (Mrs.) Contributor address; City; State; Zip Code 7416 Circle8 Orange, TX 77632 Principal occupation / Job title (See Instructions) Employer (See Instructions) Director Kings Club

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/8 Rpt: 5/37 Filer ID 2 FILER NAME Graff, Billy 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: 08/16/2019 \$10.00 Callahan, Phyllis (Mrs.) 6 Contributor address; City; State; Zip Code 1823 Sara St Sulphur, LA 70663 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$500.00 07/15/2019 Carter, Marvin Contributor address; City; State; Zip Code 110 Canterbury Montgomery, TX 77356 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$500.00 11/25/2019 Chambers, Marisa (Mrs.) Contributor address; City; State; Zip Code 8960 County Line Rd Willis, TX 77378-4842 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$400.00 08/08/2019 Coats, Robert (Mr.) Contributor address; City; State; Zip Code 152 Golfview Montgomery, TX 77356 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Consultant Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#. \$300.00 08/16/2019 Coker, Gary (Mr.) Contributor address; City; State; Zip Code 1780 Riksan Cr Beaumont, TX 77706 Employer (See Instructions) Principal occupation / Job title (See Instructions) self Attorney Version V1.1.3a6aaf7d Forms provided by Texas Ethics Commission www.ethics.state.tx.us

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/8 Rpt: 6/37 3 Filer ID FILER NAME Graff, Billy 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (iD#: 10/01/2019 \$200.00 Ener, Donald (Mr.) 6 Contributor address; City; State; Zip Code PO Box Sour Lake, TX 77659 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$100.00 08/05/2019 Ener, Margaret (Ms.) Contributor address; City; State; Zip Code 219 N loop 336 E Apt 23102 Conroe, TX 77304 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#: \$100.00 12/06/2019 Ener, Margaret (Ms.) Contributor address; City; State; Zip Code 219 N loop 336 E Apt 23102 Conroe, TX 77304 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#; \$100.00 08/28/2019 Fehnel, Judy (Mr.) Contributor address; City; State; Zip Code 5765 Kathy Lane Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$40.00 07/15/2019 Frank, Mark (Mr.) Contributor address; City; State; Zip Code 1308 S 7th st. Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Bookeeper Owner

SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/8 Rpt: 7/37 2 FILER NAME 3 Filer ID Graff, Billy 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 07/15/2019 \$40.00 Frank, Mark (Mr.) 6 Contributor address; City; State; Zip Code 1308 S 7th st. Conroe, TX 77304 Employer (See Instructions) Principal occupation / Job title (See Instructions) Bookeeper Owner out-of-state PAC (ID#; Amount of Contribution (\$) Full name of contributor Date \$10.00 08/21/2019 Goetschius, Diane (Mrs.) Contributor address; City; State; Zip Code 880 Norwood Beaumont, TX 77706 Principal occupation / Job title (See Instructions) Employer (See Instructions) **BISD** Teacher Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$10.00 07/12/2019 Graff, Jacob (Mr.) Contributor address; City; State; Zip Code 120 Quail Run St Nacogdoches, TX 75965 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Data Analyst Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$10.00 07/12/2019 Graff, Jacob (Mrs.) Contributor address; City; State; Zip Code 120 Quail Run St Nacogdoches, TX 75965 Principal occupation / Job title (See Instructions) Employer (See Instructions) Educator Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$3.000.00 07/22/2019 Graff, Josh (Mr.) Contributor address; City; State; Zip Code 2501 Belton Shores Conroe, TX 77304 Principal occupation / Job title (See Instructions) Employer (See Instructions) Sales/owner Self Version V1.1.3a6aaf7d www.ethics.state.tx.us Forms provided by Texas Ethics Commission

MONETARY POLITICAL CONTRIBUTIONS

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/8 Rpt: 8/37 Filer ID 2 FILER NAME Graff, Billy Date 5 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$6,000.00 12/26/2019 Graff, Josh (Mr.) 6 Contributor address; City; State; Zip Code 2501 Belton Shores Conroe, TX 77304 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Sales/owner Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date \$20.00 08/28/2019 Guidry, Yulia (Mrs.) Contributor address; City; State; Zip Code 385 Bradford Dr Beaumont, TX 77707 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Hairdresser Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$10.00 07/16/2019 Gustason, Teresa (Mrs.) Contributor address; City; State; Zip Code PO Box 457 Coalgate, TX 74538 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$200.00 08/26/2019 Havens, Connie (Mrs.) Contributor address; City; State; Zip Code 3005 Wedgescale Pass leander, TX 78641 Employer (See Instructions) Principal occupation / Job title (See Instructions) Realtor Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$50.00 Jean, Steve (Mr.) 08/17/2019 Contributor address; City; State; Zip Code 12865 Fir Lane Beaumont, TX 77713 Employer (See Instructions) Principal occupation / Job title (See Instructions) Christ Community Church Pastor Version V1.1.3a6aaf7d Forms provided by Texas Ethics Commission www.ethics.state.tx.us

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 6/8 Rpt: 9/37 3 Filer ID FILER NAME Graff, Billy Date Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 07/14/2019 \$10,00 Kaiser, Adrian 6 Contributor address; City; State; Zip Code 9311 Shady In Magnolia, TX 77354 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Welder Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/07/2019 \$10.00 McConathy, Kailey (Mrs.) Contributor address; City; State; Zip Code 510 Fisherman Trail Melissa, TX 77454 Principal occupation / Job title (See Instructions) Employer (See Instructions) MOM self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$10.00 07/30/2019 Molnar, Suzette (Mrs.) Contributor address; City; State; Zip Code 211 Hannah Lane Lumberton, TX 77657 Principal occupation / Job title (See Instructions) Employer (See Instructions) Westgate Memorial Baptist Ministry Assistant Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$10.00 07/21/2019 Moore, Claire (Mrs.) Contributor address; City; State; Zip Code 9161 Black Buck lake Conroe, TX 77303 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Amount of Contribution (\$) Full name of contributor Date out-of-state PAC (ID#:_ 07/22/2019 Moore, William \$750.00 Contributor address; City; State; Zip Code 2818 Chaucer dr Montgomery, TX 77356 Principal occupation / Job title (See Instructions) Employer (See Instructions) The Edge Restaurant Owner

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 7/8 Rpt: 10/37 Filer ID 3 2 FILER NAME Graff, Billy Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#; \$10.00 07/21/2019 Patient, Theresa (Mrs.) 6 Contributor address; City; State; Zip Code 9161 Buck lane Conroe, TX 77303 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$10.00 07/16/2019 Roebuck, MARY (Mrs.) Contributor address; City; State; Zip Code po box 458 Coalgate, OK 74538 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$35.00 07/01/2019 Sadighi, Jeff (Mr.) Contributor address; City; State; Zip Code 1504 Gary Ave. Nederland, TX 77627 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Broker Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#; Date \$10.00 12/05/2019 Shirley, Charles (Mr.) Contributor address; City; State; Zip Code 3226 West Benders Landing Blve Spring, TX 77386 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self Investment Banker Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$25.00 09/11/2019 Streelman, Stanley (Mr.) Contributor address; City; State; Zip Code 12211 Emerald Mist In Conroe, TX 77304-1695 Principal occupation / Job title (See Instructions) Employer (See Instructions) Medical Sales

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/8 Rpt: 11/37 2 FILER NAME 3 Filer ID Graff, Billy Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 08/15/2019 \$25.00 Toman, Sue (Mrs.) 6 Contributor address; City; State; Zip Code 630 Bancroft Beaumont, TX 77706 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Tax manager Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#; \$100.00 10/21/2019 Wessel, Wes (Mr.) Contributor address; City; State; Zip Code 10941 JoAnn St Willis, TX 77318 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Insurance Agent Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#; \$50.00 08/17/2019 Williamson, Sharon (Mrs.) Contributor address; City; State; Zip Code 4100 Binley Dr Richardson, TX 75082 Principal occupation / Job title (See Instructions) Employer (See Instructions) Infection Preventionist Version V1.1.3a6aaf7d Forms provided by Texas Ethics Commission www.ethics.state.tx.us

	LOANS						SCHEDULE E	
	The Instructio	n Guide explains ho	w to c	omplete this f	orm.	ges Schedule E: 2 Rpt: 12/37		
2	FILER NAME Graff, Billy	·	3 Filer ID					
4	TOTAL OF UN	ITEMIZED LOANS		\$				
5	Date of loan 11/12/2019	7 Name of lender Billy, Graff (Dr.)		out-of-state PA	C (ID#:	9 Loan Amo		
6		8 Lender address; City; State; Zip Code 2405 Winter Trail					\$4,000.00 10 Interest Rate 11 Maturity Date	
		Conroe, TX 77304					12/31/2020	
12	Principal occupation							
14	Description of Colli	ateral			15 Check if personal funds we	ere deposited	into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address;	City;	State;	Zip Code			
20	Principal occupation	on			21 Employer (See Instruction	s)		
	Date of loan 07/15/2019	Name of lender Billy, Graff (Dr.)		out-of-state PA	C (ID#:		Loan Amount (\$) \$500.00	
	Is lender a financial institution?	Lender address; 2405 Winter Trail	City;	State;	Zip Code		Interest Rate	
	No	Conroe, TX 77304					Maturity Date 12/31/2020	
	Principal occupation	on / Job title (See Instruction	ns)		Employer (See Instruction	s)		
	Description of Coll	ateral			Check if personal funds w	d into political account (See Instructions)		
	GUARANTOR INFORMATION	Name of guarantor	·			·.··	Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code			
	Principal occupation	on	-		Employer (See Instruction	s)		
		Tayon Ethios Commission			o etoto tv uo		Varcian V1 1 2262247	

	LOANS				SCHEDULE E							
	The Instruction	ne Instruction Guide explains how to complete this form. 1 Total pages Sch: 2/2 R										
2	FILER NAME Graff, Billy		3 Filer ID									
4	TOTAL OF UN	IITEMIZED LOANS	\$									
5	Date of loan 07/16/2019	7 Name of lender	PAC (ID#:)	9 Loan Amount (\$) \$500.00							
	Is lender a financial institution?	8 Lender address; City; State 2405 Winter Trail	; Zip Code		10 Interest Rate 11 Maturity Date							
12	Principal occupation	Conroe, TX 77304 on / Job title (See Instructions)	13 Employer (See Instruction	ns)	12/31/2020							
14	Description of Col	iateral	15 Check if personal funds w	15 Check if personal funds were deposited into political account (See Instructions)								
16	GUARANTOR INFORMATION	17 Name of guarantor	harrest .		19 Amount Guaranteed (\$)							
	X not applicable	18 Guarantor address; City; State										
20	Principal occupati	ion	21 Employer (See Instruction	ns)								
				ı								

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Political	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 1/21 Rpt: 14/37	Graff, Billy
4	Date	5 Payee name
	07/02/2019	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$33.08	PO Box 537104
		Atlanta, GA 30353
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Cell Phone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/01/2019	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.08	PO Box 537104
	·	
		Atlanta, GA 30353
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	LAFLINDITORE	Check if Austin, TX, officeholder living expense Cell Phone
		Centrione
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/03/2019	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$33.08	PO Box 537104
	φου.υυ	
		Atlanta, GA 30353
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Cell Phone
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	
l		
ΕO	orms provided by Texas E	thics Commission www.ethics.state.tx.us Version V1.1.3a6aaf7

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overnead/Rental Expense

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

Polling Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 2/21 Rpt: 15/37 Graff, Billy 4 Date Payee name 09/30/2019 AT&T Amount (\$) Payee address; City; State; Zip Code \$33.08 PO Box 537104 Atlanta, GA 30353 8 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check If Austin, TX, officeholder living expense Cell Phone Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 10/30/2019 AT&T State; Zip Code Payee address; City; Amount (\$) \$33.08 PO Box 537104 Atlanta, GA 30353 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cell Phone Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/29/2019 AT&T Payee address; City; State; Zip Code Amount (\$) \$33,08 PO Box 537104 Atlanta, GA 30353 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Cell Phone Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Political Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	·
Sch: 3/21 Rpt: 16/37	Graff, Billy
1 Date	5 Payee name
12/30/2019	AT&T
6 Amount (\$) \$33.08	7 Payee address; City; State; Zip Code PO Box 537104 Atlanta, GA 30353
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Cell Phone
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/31/2019	Amegy Bank
Amount (\$) \$2.00	Payee address; City; State; Zip Code 2125 West Davis St. Conroe, TX 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Statement fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 08/03/2019	Payee name Amegy Bank
Amount (\$) \$2.00	Payee address; City; State; Zip Code 2125 West Davis St.
	Conroe, TX 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense Statement fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services	Office Over ense Polling Exp als Expense Printing Exp	ense ges/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·			3 Filer ID
_	Sch: 4/21 Rpt: 17/37	Graff, Billy			
_	·				
4	Date	5 Payee name			
	09/30/2019	Amegy Bank			
ô	Amount (\$) \$2.00	7 Payee address; City; 2125 West Davis St. Conroe, TX 77304	State; Zip Cod	e	
	DUDDOCE			L	
В	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed Accounting/Banking	at the top of this schedule)	<u>—</u>	outside of Texas. Complete Schedule T. , TX, officeholder living expense
)	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office soug	ht	Office held
	Date	Payee name	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
	10/31/2019	Amegy Bank			
	Amount (\$)	Payee address; City;	State; Zip Coo		
	\$2.00	2125 West Davis St.	State, Zip oot	C	
		Conroe, TX 77304			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed Fees	at the top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense P
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office soug	ht	Office held
	Date	Payee name			
	11/27/2019	Amegy Bank			
	Amount (\$) \$10.00	Payee address; City; 2125 West Davis St.	State; Zip Cod	e	
		Conroe, TX 77304			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed Accounting/Banking	at the top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sout	ht	Office held
*****			- Andrew Control of the Control of t		
Ö	ms provided by Texas E	hics Commission	www.ethics.state.tx.us	,	Version V1.1.3a6aa

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services The Instruction Gui	Salaries/ ide explains how to c	•	s/Contract Labor ete this form.	OTHER (enter a category not listed abo	ove)
1	Total pages Schedule F1:	2 FILE	R NAME				3 Filer ID	
	Sch: 5/21 Rpt: 18/37	Graf	f, Billy					
4	Date	5 Paye	e name					
	11/29/2019	Ame	gy Bank					
6	Amount (\$) \$2.00		e address; City; 5 West Davis St.	State; Zip C	ode	·		
		Coni	roe, TX 77304					
8	PURPOSE OF EXPENDITURE		gory (See Categories listed at th Dunting/Banking	e top of this schedule)	(b)	المسدا	outside of Texas. Complete Schedule T. , TX, officeholder living expense B	
9	Complete ONLY if direct expenditure to benefit C/O		date/Officeholder name	Office so	ught		Office held	
	Date	Paye	e name			· · · · · · · · · · · · · · · · · · ·		
	12/31/2019		gy Bank					
	Amount (\$)	Paye	e address; City;	State; Zip C	ode			
	\$2.00	2125	West Davis St.					
		Coni	roe, TX 77304					
	PURPOSE OF		GOTY (See Categories listed at th	e top of this schedule)	(b)	Description		
	EXPENDITURE	Acco	ounting/Banking			 1	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
						Statement fe		
	Complete ONLY if direct expenditure to benefit C/O		date/Officeholder name	Office so	ught	.	Office held	
	Date	Paye	e name			······································		
	07/05/2019	Barr	ies, James (Mr.)					
	Amount (\$)	Paye	e address; City;	State; Zip C	ode			
	\$200.00	711	Scarlet Ibis					
		San	Antonio, TX 78245					
	PURPOSE OF		GOTY (See Categories listed at th	e top of this schedule)	(b)	Description		
	EXPENDITURE	Con	sulting Expense				outside of Texas. Complete Schedule T. , TX, officeholder living expense	
							Campaign Sidekick software	
							1 0	
	Complete ONLY if direct	LCandid	date/Officeholder name	Office so	L		Office held	
	expenditure to benefit C/OI			~ mod do	~gt		and a constant of the state	
			. "			· · · · · ·		

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials E Legal Services The Instruction Gui		Vages	s/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 6/21 Rpt: 19/37	2 FILER N Graff, B				3 Filer ID
4	Date 07/07/2019	5 Payee n Campa	ame ign Sidekick LLC			
6	Amount (\$) \$248.00		ddress; City; ld Annetta Road TX 76008	State; Zip Co	ode	
8	PURPOSE OF EXPENDITURE	(a) Category Fees	y (See Categories listed at the	e top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly subscription for block walking software
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol		e/Officeholder name	Office sou	ıght	Office held
	Date 09/19/2019	Payee n Campa	ame ign Sidekick LLC			
	Amount (\$) \$496.00		ddress; City; Id Annetta Road TX 76008	State; Zip Co	ode	
	PURPOSE OF EXPENDITURE		Y (See Categories listed at the Blocking Software	e top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Month subscription, (two months)
	Complete ONLY if direct expenditure to benefit C/O		e/Officeholder name	Office sou	ught	Office held
	Date 10/01/2019	Payee n Campa	ame ign Sidekick LLC			
	Amount (\$) \$248.00		ddress; City; Ild Annetta Road TX 76008	State; Zip C	ode	
	PURPOSE OF EXPENDITURE		Y (See Categories listed at th	ne top of this schedule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software monthly subscription
	Complete ONLY if direct expenditure to benefit C/O		e/Officeholder name	Office so	ught	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		nmittee	Legal Services The Instruction Gu			/ages/	Contract Labor	OTHER (enter a category ne	ot listed above)
		_	EU EE \$111.		inac explains i	IOAN TO COL	inhiei		O Files ID	
1	Total pages Schedule F1:			=					3 Filer ID	
	Sch: 7/21 Rpt: 20/37		Graff, Billy					<u></u>		
4	Date	5	Payee name							
	12/01/2019		Campaign 5	Sidekick LLC			_			
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de			
	\$248.00	1	1550 Old A	nnetta Road						
		1								
			Aledo, TX 7	'6008						
8	PURPOSE	(a)			an ton of the control	adiale)	(b)	Description		<u> </u>
,	OF	(4)	Fees	ee Categories listed at th	e lop of this sche	euule)	,, 		outside of Texas. Complete Sche	dule T.
	EXPENDITURE	ļ	. 555					Check if Austin,	TX, officeholder living expense	
		ļ						Software mor	nthly subscription	
										-
9	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght		Office held	
	expenditure to benefit C/OF	1					_			adaraanii aaan aan aa
==	Date	T =	Payee name						, discontinuolis	The same was
	11/04/2019		~	Sidekick LLC						
	Amount (\$)	 	Payee addre	ess; City;	State;	; Zip Co	de			
	\$248.00		•	nnetta Road	•					
			Aledo, TX 7	76008						
Г	PURPOSE	(a)	Category (S	See Categories listed at t	he top of this sch	edule)	(b)	Description		
	OF EXPENDITURE		Fees	-	·		1	\square	outside of Texas. Complete Sche	dule T.
	EAT ENDITORG		•				1	LI	, TX, officeholder living expense	
ĺ	j							Software sub	SOTIPHON	
<u> </u>	Complete Others !	<u>L</u>	20ndid-+- (20	icoholdor)ffice co	Ch+		Office held	
	Complete ONLY if direct expenditure to benefit C/OI		∪andidate/Ofi	ficeholder name	C	Office sou	ynt		Onice field	
<u>_</u>		_		W						
	Date		Payee name							
L	07/15/2019	L	Coats, Rob	ert (Mr.)						
Ī	Amount (\$)		Payee addre		State;	; Zip Co	ode			
	\$800.00	1	152 Golfvie	; M						
			Conroe, TX	〈 77304						
	PURPOSE	(a	Category (S	See Categories listed at t	the top of this sch	redule)	(b)	Description		
	OF EXPENDITURE		Consulting			ĺ	1		outside of Texas. Complete Sche	edule T.
						ĺ		Check if Austin	n, TX, officeholder living expense	
								AGIGITIEI		
<u> </u>	Complete ONU V. 27 - 1	上	Condidate (C.)	icoholder ====		Office and			Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Canuldate/Of.	ficeholder name	(Office sou	agrit.		Onice Held	
<u> </u>	National Control of the Control of t									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/Officeholder/Political Co

Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense
Salaries/Mages/Co

Candidate/Officenoider/Politics Credit Card Payment	The Instruction Guide explains how to con	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 8/21 Rpt: 21/37	Graff, Billy	
4 Date	5 Payee name	
07/19/2019	Coats, Robert (Mr.)	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	e
\$400.00	152 Golfview	
	Conroe, TX 77304	
8 PURPOSE OF	, (,	b) Description
EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Retainer
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	Н	
Date	Payee name	
07/03/2019	Coats, Robert (Mr.)	
Amount (\$)	Payee address; City; State; Zip Coo	de .
\$1,196.25	152 Golfview	
	Conroe, TX 77304	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Retainer
Complete ONLY if direct	Candidate/Officeholder name Office sou	yht Office held
expenditure to benefit C/C	PH	
Date	Payee name	
07/23/2019	Coats, Robert (Mr.)	
Amount (\$)	Payee address; City; State; Zip Co.	de
\$650.00	152 Golfview	
	Conroe, TX 77304	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense Retainer
		retaile
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/C		grit Cindo nota
	Ethics Commission www.ethics state ty II	s Version V1.1.3a6aaf7

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	1
Gredit Gard Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		ļ
Sch: 9/21 Rpt: 22/37	Graff, Billy	
4 Date	5 Payee name	
07/31/2019	Coats, Robert (Mr.)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$400.00	152 Golfview	
	Conroe, TX 77304	
8 PURPOSE	(a) Category (see Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Consulting Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Retainer	ļ
A Complete ONE Vitalians	Candidate/Officeholder name Office sought Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		

Date	Payee name	
08/13/2019	Direct Texas	
Amount (\$)	Payee address; City; State; Zip Code	
\$162.38	PO Box 312100	
	New Braunfels, TX 78131	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Rack Cards	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
08/05/2019	Fastsigns	
Amount (\$)	Payee address; City; State; Zip Code	
\$48.32	206H South loop 336 W	
Ţ.J.J2		
	Conroe, TX 77304	
PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Small Banner	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
experience to benefit 0/0		
	Vanier VA A Carl	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Auvertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	- Cor	_	xpense orials Expense n Guide explains I	Office Overh- Poliing Exper Printing Exper Salaries/Wag	ead/R nse ense ges/C	Rental Expense	Tr Tr Tr	onclaudor-culturaling Experience ransportation Equipment & ravel in District ravel Out of District THER (enter a category no	Related Expense
1	Total pages Schedule F1:	2	<u> </u>	Janua ompiaino				3 🖂	iler ID	
_	Sch: 10/21 Rpt: 23/37	_	Graff, Billy					J [ROI ID	
4	Date	5	Payee name			_				
	08/30/2019		Greystone Hills							
6	Amount (\$) \$75.00	7	Payee address; City; 2030 Greystone hills dr conroe, TX 77304	State;	; Zip Code	e				
ب	DUDDOCT	_			14	-\ -\				
8	PURPOSE OF EXPENDITURE	(a)	Category (see Categories lister Event Expense	d at the top of this sch	redule) (of Texas. Complete Sched ficeholder living expense	tule T.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Candidate/Officeholder nam	е (Office sough	nt			Office held	
	Date		Payee name							
	10/21/2019		Greystone Hills				-			
	Amount (\$)	<u> </u>	Payee address; City;	State	; Zip Cod	е				
	\$75.00		2030 Greystone hills dr							
L			conroe, TX 77304				•			
	PURPOSE OF EXPENDITURE	(a	Category (See Categories liste Event Expense	ed at the top of this sch	nedule) (, TX, of	of Texas. Complete Scheo fficeholder living expense	dule T.
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder nam	ie (Office soug	ht			Office held	
	Date	Γ	Payee name							
	11/14/2019		Greystone Hills							
	Amount (\$) \$75.00		Payee address; City; 2030 Greystone hills dr		e; Zip Cod	le				
			conroe, TX 77304							
	PURPOSE OF EXPENDITURE	(a) Category (see Categories liste Event Expense	ed at the top of this sol	hedule)	[[<u></u>	n, TX, o	e of Texas. Complete Sche fficeholder living expense	dule T.
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder nam	ne (Office soug	ht			Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		
1	Total pages Schedule F1:		
_	Sch: 11/21 Rpt: 24/37	Graff, Billy	
4	Date	5 Payee name	
	07/22/2019	Intuit "Quickbooks'	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$21.32	2700 Coast Ave	
_		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Accounting Software subscription	
		Accounting Software adoptifution	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
J	expenditure to benefit C/OF		
	Date 09/22/2010	Payee name	
	08/22/2019	Intuit "Quickbooks'	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.32	2700 Coast Ave	
	Ì		
		Mountain View, CA 94043	_
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
		 To Todaman Services (model to 100 of the control of t	
	,	Check if Austin, TX, officeholder living expense	
		Check if Austin, TX, officeholder living expense Accounting software subscription	
	Complete ONLY if direct	Accounting software subscription	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Accounting software subscription Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Accounting software subscription Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held Payee name	
	expenditure to benefit C/Ol- Date 09/23/2019	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks'	
	Date 09/23/2019 Amount (\$)	Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code	-
	expenditure to benefit C/Ol- Date 09/23/2019	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks'	
	Date 09/23/2019 Amount (\$)	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave	
	Date 09/23/2019 Amount (\$)	Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code	
	Date 09/23/2019 Amount (\$) PURPOSE	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) (b) Description	
	Date 09/23/2019 Amount (\$) PURPOSE OF	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	Date 09/23/2019 Amount (\$) PURPOSE	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Date 09/23/2019 Amount (\$) PURPOSE OF	Accounting software subscription Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T.	
	PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting subscription	
	Date 09/23/2019 Amount (\$) PURPOSE OF	Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting subscription Candidate/Officeholder name Office sought Office held	
	Date 09/23/2019 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting subscription Candidate/Officeholder name Office sought Office held	
	Date 09/23/2019 Amount (\$) PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sought Office held Payee name Intuit "Quickbooks' Payee address; City; State; Zip Code 2700 Coast Ave Mountain View, CA 94043 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Accounting subscription Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	
_		
	Sch: 12/21 Rpt: 25/37	Graff, Billy
4	Date	5 Payee name
	10/22/2019	Intuit "Quickbooks'
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$42.64	2700 Coast Ave
		Mountain View, CA 04042
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas, Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Accounting subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oł	1
	Date	Payee name
	11/22/2019	Intuit "Quickbooks'
	Amount (¢)	Payee address; City; State; Zip Code
	Amount (\$)	
	\$42.64	2700 Coast Ave
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Check if Austln, TX, officeholder living expense
		Software subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	-1
==	Data	
	Date	Payee name
	12/23/2019	Intuit "Quickbooks'
	Amount (\$)	Payee address; City; State; Zip Code
	\$42.64	2700 Coast Ave
		Mountain View, CA 94043
<u> </u>	DUDDOSE	
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
		Subscription
1		
<u> </u>	Commists ONLY (Caling)	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	
L	and a second	
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	- Coi	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID
_	Sch: 13/21 Rpt: 26/37	_	Graff, Billy				
4		5	Payee name			<u> </u>	
•	08/06/2019	•	Leadership Institute				
6		7		Zip Cod	Δ		- · · · · · · · · · · · · · · · · · · ·
0	\$51.00	•	1101 N. Highland St. Arlington, VA 22201	Zip Cou	C		
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	adula) (b) Description		
	OF EXPENDITURE	(~)	How to run for office	source)	Check if travel	, TX	side of Texas. Complete Schedule T. f., officeholder living expense ing seminar
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office soug	ht		Office held
	Date		Payee name				
	07/05/2019		Macias Strategies LLC				
	Amount (\$)		Payee address; City; State;	Zip Cod	e		
	\$1,028.00		655 Loop 337				
			Unit 303				
			New Braunfels, TX 78130				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Consulting Expense	edule) (Check if Austin	1, ΤΧ	side of Texas. Complete Schedule T. K, officeholder living expense er and Facebook ads
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office soug	ht		Office held
	Date 08/09/2019		Payee name Macias Strategies LLC				
	Amount (\$) \$1,000.00		Payee address; City; State; 655 Loop 337 Unit 303 New Braunfels, TX 78130	; Zip Cod	le		
	PURPOSE OF EXPENDITURE	(a	Category (see Categories listed at the top of this sch Consulting Expense	edule)		n, T	side of Texas. Complete Schedule T. X, officeholder living expense er
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Officeholder name C	Office soug	ht		Office held
<u> </u>	irms provided by Texas E	thi	cs Commission www.ethics.s	state tv us			Version V1.1.3a6aaf7c

SCHEDULE F1

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

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	- Gift/	d/Beverage Expense Awards/Memorials Expense al Services	Polling Expen Printing Exper Salaries/Wage		Travel in District Travel Out of District OTHER (enter a category not listed above)	
			Instruction Guide explain	s how to comp	lete this form.		
1	Total pages Schedule F1:					3 Filer ID	i
	Sch: 14/21 Rpt: 27/37	Graff, Billy					
4	Date	5 Payee name					
	09/09/2019	Macias Strateg	ies LLC				ı
6	Amount (\$)	7 Payee address;	City; Sta	te; Zip Code			
-	\$1,000.00	655 Loop 337	,	, <u>-</u> -			Í
	42,000,00	Unit 303					
			TV 70120				
		New Braunfels	· · · · · · · · · · · · · · · · · · ·				i
8	PURPOSE OF		ategories listed at the top of this s	schedule) (b) Description		1
	EXPENDITURE	Consulting Exp	pense			outside of Texas. Complete Schedule T. , TX, officeholder living expense	
				İ	Monthly Reta		
	•						
9	Complete ONLY if direct	Candidate/Officeh	older name	Office sough		Office held	
ฮ	expenditure to benefit C/OI		Older Hame	Office sough	L	,	
	Date	Payee name					
	09/09/2019	Montgomery C	ounty Republican part	ty			
	Amount (\$)	Payee address;	City; Sta	te: Zip Code			
	\$250.00	PO Box 1648	,,	, ,			
	φ20.00	, 4 20, 20, 10					
		Canros TV 77	205				
		Conroe, TX 77				MAN COLUMN TO THE COLUMN TO TH	
	PURPOSE OF		ategories listed at the top of this	schedule) (b	Description	outside of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising Ex	pense			, TX, officeholder living expense	
						ser "Golf Tournament"event with Sig	ın
				1	dispĺay	_	
	Complete ONLY if direct	Candidate/Officeh	nolder name	Office sough	t	Office held	
	expenditure to benefit C/O			· · · · · · · · · · · · · · · · · · ·			
							
	Date	Payee name	Saunti Danubliaan nar	4. ,			
	11/15/2019		ounty Republican par				
	Amount (\$)	Payee address;	City; Sta	te; Zip Code	•		
	\$750.00	PO Box 1648					
		Conroe, TX 77	'305				
	PURPOSE	(a) Category (See C	ategories listed at the top of this	schedule) (t	Description		
	OF	Fees				outside of Texas. Complete Schedule T.	
	EXPENDITURE				احببط	n, TX, officeholder living expense	
					Filing fee		
	Complete ONLY if direct	Candidate/Officeh	nolder name	Office sough	nt	Office held	
	expenditure to benefit C/O	1 					
_		thing Commission		o otato ty uo		Vorcion VI 1 226	- 77 -

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
_	T-1-1 O-1	
1	Total pages Schedule F1:	
	Sch: 15/21 Rpt: 28/37	Graff, Billy
4	Date	5 Payee name
	11/22/2019	Montgomery County Tea party
6	Amount (\$)	7 Payee address; City; State; Zip Code
•	\$100.00	2603 E. Bluelake Drive
	φ100.00	2000 E, Diadiano Brivo
		Magnolia, TX 77354
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check If travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Table rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oł	1
	Data	
	Date	Payee name
	12/10/2019	Montgomery County Tea party
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2603 E. Bluelake Drive
	·	Magnolia, TX 77354
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse. (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Table Rental
<u> </u>	Olate ONLY if diseast	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	Carrottato, Circolina in Italia
	- 1	
	Date	Payee name
	07/03/2019	Name Badges International
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.27	4601 Sheridan Street, Suite 300
	400,21	1002 Gristiaan Chook Care
		Hollywood, FL 33021
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPERDITORE	Check if Austin, TX, officeholder living expense
		Name badges
L		
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ĺ	expenditure to benefit C/O	H
Т		
L		thios Commission Version V1 1 3a6aaf7d

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
	T-4-1 C-11-1- F4.		El-JB
7	Total pages Schedule F1:		Filer ID
	Sch: 16/21 Rpt: 29/37	Graff, Billy	
4	Date	5 Payee name	
	11/09/2019	Netbrands Media	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
_	\$2,304.86	14550 Beechnut St.	
	Ψ2,001.00	2 1000 Bookmax Ct.	
		Houston, TX 77083	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outs	ide of Texas. Complete Schedule 干.
	EXI ENDITORE	, , –	officeholder living expense
		Yard Signs	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	iri	
	Date	Payee name	
	08/20/2019	North Shore Republican Women	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	PO Box 1993	
	Φ200,00	LO POX 1992	
		Montgomery, TX 77356	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		ide of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX	, officeholder living expense
		Fundraiser, sign	ı display
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O) 	
	Date	Payee name	
	08/24/2019	Office Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	1.7	1319 W. DAVIS STREET	
	\$110.00	1319 W. DAVIS STREET	
		Conroe, TX 77304	
Т	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outs	side of Texas. Complete Schedule T.
	EXPENDITURE		t, officeholder living expense
		Labels for signs	3
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	DH .	
<u> </u>	uma provided by Tayle - F	"thing Commission	Version VIA A December
rυ	rms provided by Texas E	Ethics Commission www.ethics.state.tx.us	Version V1.1.3a6aaf7d

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		ift/Awards/Memorials Exper egal Services			e /Contract Labor	Travel Out of District OTHER (enter a category not lister	d above)
	Credit Card Payment		he Instruction Guide e	explains how to co	mple	te this form.		
1	Total pages Schedule F1:	2 FILER NAME				3	Filer ID	
	Sch: 17/21 Rpt: 30/37	Graff, Billy						
4	Date	5 Payee name						
	11/24/2019	Office Depot						
6	Amount (\$)	7 Payee address	s; City;	State; Zip Co	de		1 10	
	\$17.30	1319 W. DA	/IS STREET					
								ļ
		Conroe, TX	77304					
8	PURPOSE		Categories listed at the top	of the natural de	(b)	Description		
	OF	Advertising E		or this schedule)	(~,		side of Texas. Complete Schedule T.	
	EXPENDITURE	Advertising E	жропос			Check if Austin, TX	, officeholder living expense	
						Name Badge		ĺ
9	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ight		Office held	
	expenditure to benefit C/OI	1						
	Date	Payee name		<u> </u>				The second state of the second
	12/04/2019	Office Depot						
	Amount (\$)	Payee addres	s; City;	State; Zip Co	ode			
	\$140.00	_	VIS STREET	, ,				
	, , , , , , , , , , , , , , , , , , , ,							
		Conroe, TX	77201					
	SUDDOGE				(b)	D d-tlas		
	PURPOSE OF		e Categories listed at the top	of this schedule)	(1)	Description Check If travel outs	side of Texas. Complete Schedule T	
	EXPENDITURE	Advertising I	Expense			<u></u>	K, officeholder living expense	
						 Labels		
					İ			
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ught		Office held	
	expenditure to benefit C/O	-1						
	Date	Payee name						
	11/25/2019	Print Runne						
-	Amount (\$)	Payee addres	s; City;	State; Zip Co	ode			
	\$90.14	8000 Haske	- · · · · · · · · · · · · · · · · · · ·					
	Ψοσιμή	OUGO HABINO						
		Van Nuys, C	·Δ 01.406					
-	DUDDOGE				T(b)	D		
	PURPOSE OF	Advertising	e Categories listed at the top	p of this schedule)	(10)	Description Check if travel out	side of Texas. Complete Schedule T	
	EXPENDITURE	Advertising	_xpense				X, officeholder living expense	
						Labels		
	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ught		Office held	
	expenditure to benefit C/O	H						
Г								
Ļ		thing Commission	148181	othics state ty	1.0		Vorcion	V1 1 3a6aaf7d

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Political	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 18/21 Rpt: 31/37	Graff, Billy
4	Date	5 Payee name
	08/22/2019	Shirt of my back
6	Amount (\$)	7 Payee address; City; State; Zip Code
Ū	\$199.18	17018 FM1314
	4100120	
		Convo. TV 77303
		Conroe, TX 77302
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check If travel outside of Texas. Complete Schedule T. Check If Austlin, TX, officeholder living expense
		Yard Sign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	08/25/2019	Sticker Mule
	Amount (\$)	Payee address; City; State; Zip Code
	\$59.00	336 forest Ave.
	φ33.00	330 lorest Ave.
		Amsterdam , NY 12010
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Window Stickers
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Ti and the state of the state o
	Date	Payee name
	08/30/2019	Sticker Mule
	Amount (\$)	Payee address; City; State; Zip Code
	\$123.00	336 forest Ave.
		Amsterdam , NY 12010
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
İ	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Window Stickers
<u> </u>	0	Out this to 1000 and the second to 1000 and t
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
_	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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/Political Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 19/21 Rpt: 32/37	Graff, Billy
4	Date	5 Payee name
	09/22/2019	Vernon's Kuntry Katfish
ß	Amount (\$)	7 Payee address; City; State; Zip Code
U	(17	
	\$50.00	5901 W Davis St
		Conroe, TX 77304
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Room Rental
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/Oł	
	Date	Payee name
	07/05/2019	Vici Media
	Amount (\$)	Payee address; City; State; Zip Code
	\$324.75	816 Big Woods
		Longview, TX 75605
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Website monthly subscription
		Website Holiting Subscription
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	expenditure to benefit 6/04	
	Date	Payee name
	09/16/2019	Vici Media
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$320.25	816 Big Woods
	Ψ020,20	To big **oods
		Longview, TX 75605
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Website monthly subscription
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
一		
1		

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Legal Services	ense Printing Exp Salaries/Wa		e /Contract Labor	OTHER (enter a category not	listed above)
	Credit Card Payment		The Instruction Guide	explains how to com	ple		· · · · · · · · · · · · · · · · · · ·	
1	Total pages Schedule F1:	2 FILER NAME				;	3 Filer ID	
	Sch: 20/21 Rpt: 33/37	Graff, Billy						
4	Date	5 Payee name						
	10/16/2019	Vici Media						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Cod	е			
	\$320.25	816 Big Wo	ods				-	
		Longview,	ΓX 75605					
8	PURPOSE	(a) Category (s	ee Categories listed at the to	p of this schedule)	b)	Description		
	OF EXPENDITURE	Fees	•			luma.	utside of Texas. Complete Schedu	ıle T.
	EXPLINITIONE					L	TX, officeholder living expense hly Subscription	
						website mont	Thy Subscription	
_	Constitution of the control of the c	Candidate/Off	iceholder name	Office soug	ht		Office held	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		icendider name	Onice soug	1111		Office field	
		1						
	Date	Payee name						
	11/16/2019	Vici Media						
	Amount (\$)	Payee addre		State; Zip Coo	ie			
	\$320.25	816 Big Wo	oos					
		Longview,	TX 75605					
	PURPOSE OF	1	ee Categories listed at the to	p of this schedule)	(b)	Description	outside of Texas. Complete Sched	ulo T
	EXPENDITURE	Fees				lo-mi	TX, officeholder living expense	uie 1.
		ļ		1		Website mon	thly subscription	
								_
	Complete ONLY if direct		ficeholder name	Office sou	jht		Office held	
	expenditure to benefit C/O)H						
	Date	Payee name						
	12/16/2019	Vici Media						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de			· · · · · · · · · · · · · · · · · · ·
	\$340.50	816 Big W	oods					
		Longview,	TX 75605					
-	PURPOSE	(a) Category /	See Categories listed at the t	on of this schedule)	(b)	Description		***
	OF	Fees	Joe Outogonos iistou de tiio e	op of the constant,		Check if travel	outside of Texas. Complete Scheo	lule T.
	EXPENDITURE						, TX, officeholder living expense	
١.						Website Sub	scription	
lacksquare	OI-t- ONLY 77 -	Condidate 101	finahaldar paras	Office sou	abt		Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/C		ficeholder name	Onice sou	gill		Office field	
<u> </u>		· · · · ·	1.20.					
L							17	ion V1.1.3a6aaf7d
	orms provided by Texas I	-thics Commiss	ነርር ነርር	wernics state IX L	ıs		vers	iuii v ±.±.ad0ddi/(

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By - Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services The Instruction Guide ex		-	ete this form.	OTHER (enter a category not listed	above)
1	Total pages Schedule F1:	2 FILER NAME	-				3 Filer ID	
	Sch: 21/21 Rpt: 34/37	Graff, Billy	authi u i					
4	Date	5 Payee name						
	07/01/2019	Vici Media						
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	de			
	\$1,244.88	816 Big Wo	ods					
		Longview,	TX 75605					
8	PURPOSE OF		ee Categories listed at the top o	of this schedule)	(b)	Description	eutaida of Tougo Correlata Calcadata m	
	EXPENDITURE	Advertising	Expense			la	outside of Texas. Complete Schedule T., , TX, officeholder living expense	
						_	e design and setup	
							•	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ght		Office held	
	expenditure to benefit C/OI							
	Date	Payee name						
	08/20/2019	Vici Media						
****	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de	· · · · · · · · · · · · · · · · · · ·		
	\$320.25	816 Big Wo	oods					
		Longview,	TX 75605					·
	PURPOSE OF		ee Categories listed at the top	of this schedule)	(b)	Description	autoida of Toyon Consults Calad 1	
	EXPENDITURE	Advertising	Expense			<u> </u>	outside of Texas. Complete Schedule T. I, TX, officeholder living expense	
						Website subs		
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ı <u> </u>		Office held	
	expenditure to benefit C/O				-			
	Date	Payee name						
	10/09/2019	1 -	ck Campaign					
_	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode			
	\$50.00	P.O. Box 2		•				
		Conroe, T	(77305		_			
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description		
	OF EXPENDITURE	Contributio	ns/Donations Made I	Зу			outside of Texas. Complete Schedule T.	
	-/ MITELLOIN	Candidate/	Officeholder/Political	Committee		Check if Austir Prayer Break	n, TX, officeholder living expense	
						riayei Dieak	Ması	
	Complete ONLY if divert	Candidata/Of	ficeholder name	Office sou	Job*		Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		псеновен папте	Office SOC	ayı il	•	Onigo Heiu	
Fo	orms provided by Texas E	thics Commiss	ion www.	ethics.state.tx.u	us		Version V	/1.1.3a6aaf7

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

Solicitation/Fundraising Expense

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	Food/Beverage Expense Polling I Gift/Awards/Memorials Expense Printing		ory 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: 1/2 Rpt: 35/37	Graff, Billy		
4	Date	5 Payee name		
	11/13/2019	Kasprzak Campaign		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$30.00	Kasprzakforjudge.com		
	Reimbursement from			
	political contributions intended	Conroe, TX 77304		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)		Texas. Complete Schedule T.
	OF EXPENDITURE	Fund raiser event		
		Ticket to hear guest speaker		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	07/19/2019	Office Depot		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$9.33	1319 W. DAVIS STREET		
	Reimbursement from			
	X political contributions intended	Conroe, TX 77304		
	PURPOSE	Category (See Categories listed at the top of this schedule)		Texas. Complete Schedule T.
OF EXPENDITURE		Printing Expense	Check if Austin, TX, office	enolder living expense
		Precinct map printing		
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office	e held
C/OH				
Date Payee name				
	7/31/2019 Signs on the Cheap			
	Amount (\$) Payee address; City; State; Zip Code			
	\$445.06 11525A Stonehollow Dr			
Cuito 100				
Reimbursement from Suite 100 pointical contributions intended Austin, TX 78758				
			Description Check if trougle utbide of	Texas. Complete Schedule T.
	PURPOSE OF	Category (see Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Check if Austin, TX, office	•
	EXPENDITURE	Advertising Expense	Yard Sign purchase	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OH			
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Advertising Expense Accounting/Banking Fees Office Overhead/Rental Expense Travel in District Consulting Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Travel Out of District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The instruction Guide explains how to complete this form. 3 Filer ID 2 FILER NAME Total pages Schedule G: Sch: 2/2 Rpt: 36/37 Graff, Billy Date Payee name 07/22/2019 Vista Print Payee address; City; State; Zip Code 6 Amount (\$) 275 Wyman Street \$131.80 Reimbursement from political contributions intended |X| Waltham, MA 02451 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Purchase of flyers in Spanish and English Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 08/26/2019 Vista Print Payee address; City; State; Zip Code Amount (\$) 275 Wyman Street \$315,28 Reimbursement from political contributions X Waltham, TX 02451 intended Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) **PURPOSE** Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Purchase push-cards using Personal Discover Card Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/10/2019 Vista Print Payee address; City; State: Zip Code Amount (\$) \$87.67 275 Wyman Street Reimbursement from political contributions intended Waltham, MA 02451 Check if travel outside of Texas. Complete Schedule T. **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if Austin, TX, officeholder living expense OF Advertising Expense **EXPENDITURE Business Card printing** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 37/37 2 FILER NAME 3 Filer ID Graff, Billy 4 Date 8 Amount (\$) 5 Name of person from whom amount is received \$90.14 12/05/2019 Print Runner 6 Address of person from whom amount is received; City; State; Zip Code 8000 Haskell Ave Van Nuys, CA 91406 7 Purpose for which amount is received Check if political contribution returned to filer Return due to lost product in the mail Version V1.1.3a6aaf7d www.ethics.state.tx.us Forms provided by Texas Ethics Commission