CANDIDAT	E / OFFICEHOLD	FR			F	ORM C/OH
	I FINANCE REPO				COVERS	SHEET PG 1
The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID		2 Total pages f	filed:
CANDIDATE /	MS/MRS/MR	FIRST		MI	OFFICE	WSE ONLYON
OFFICEHOLDER NAME	Commissioner	Charlie			Date Received	RELEIVED
	NICKNAME	LAST Riley		SUFFIX	\alpha	JAN 15 2020
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT 31803 CottonWood Lane	/SUITE#; CI	TY;	ZIP CODE	Date Hand delivered	or Date Postmarked
Change of Address	Magnolia, TX 77355				Date Processed Date Imaged	
5 CAMPAIGN TREASURER	MS/MRS/MR	FIRST		Мі	<u></u>	
NAME	NICKNAME MOO	LAST		SUFFIX		·
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO	O BOX PLEASE)		SUITE#; CITY; NH90MCV		773/6
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO 28/ - 7 94	NE NUMBER 6 9	EXTENSION 3			
8 REPORT TYPE	X January 15 July 15	30th day bef	_	Runoff Exceeded \$500 limit	appointment	r campaign treasurer (officeholder only) (Attach C/OH-FR)
9 PERIOD COVERED	Month Day Yea 07/01/2019		THROUGH	Month Day 12/31/20	19	CALL THE CAL
10 ELECTION	ELECTION DATE Month Day Yea	r C	Primary General	ELECTION TYRE Runoff Special	Other W	The second of th
11 OFFICE	OFFICE HELD (if any) Montgomery County Co	ommissioner, P	ct 2 Montgomery	12 OFFICE SOUGH	HT (if known)	
		G	O TO PAGE 2			
Forms provided by	Texas Ethics Commission	wwv	v.ethics.state.tx.u	S		Version V1.1.3a6aaf

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

					2 of 38
13 C / OH NAME	Riley, Charlie (Comn	nissioner)	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 informatio	t the candidate's or office	eholder's kno	owledae or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	ss		
16 CONTRIBUTION TOTALS		I :AL CONTRIBUTIONS OF \$50 OR LESS (OTHER ARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00
l.		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S) .	\$	5,000.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	S ITEMIZED	\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES	<u> </u>	\$	43,519.37
CONTRIBUTION BALANCE	5. TOTAL POLITICATION REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L ERIOD	AST DAY OF THE	\$	57,157.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFADAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	y of perjury, that the acco Ill information required to	ompanying r be reported	eport is I by me
Note Cor	BRITTNEY RANDLE ary Public, State of Texas mm. Expires 04-12-2020 Jotary ID 13062252-0		Delle Candidate or Officehold	der	
	TARY STAMP / SEAL ABOUT SEAL ABOU	Macha Pilea	, this the	`	_ day
Signature of office	zer administering	Brittenty Randle Printed name of Officer administering	AST. BIG Title of officer	administerin	Laraby 1

FORM C/OH SUBTOTALS - C/OH **COVER SHEET PG 3** 3 of 38 19 Filer ID 18 FILER NAME Riley, Charlie (Commissioner) 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 5.000.00 Х SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 2. \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS \$ 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 43,519.37 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 \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 11. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ TO FILER

MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/38
2 FILER NAME Riley, Charl	ie (Commissioner)		3 Filer ID
4 Date 11/09/2019	5 Full name of contributor		7 Amount of Contribution (\$) \$5,000.00
	6 Contributor address; City; State; Zip Code 18 Augusta Pines Dr. #210-C Spring, TX 77389		
8 Principal occi	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V1.1.3a6aaf7

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 1/34 Rpt: 5/38 Riley, Charlie (Commissioner) 4 Date Payee name 10/24/2019 Academy 6 Amount (\$) Payee address; City; State; Zip Code \$108.23 14221 Farm to Market 2920 Tomball, TX 77377 8 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Food for Hoffart Fundraiser Complete QNLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/07/2019 **Animal Parties** City: Amount (\$) Payee address; State; Zip Code \$2,585.00 PO Box 1231 New Caney, TX 77357 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Animals for Christmas Event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/30/2019 Antique Rose Amount (\$) Payee address; City: State; Zip Code \$128.70 10540 Farm to Market Rd 1488 #160 Magnolia, TX 77354 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Funeral Flowers** Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Food/Beverage Expense Gift/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 2/34 Rpt: 6/38 Riley, Charlie (Commissioner) Date 4 Payee name 11/06/2019 Antique Rose City; State; Zip Code Amount (\$) Payee address; \$117.98 10540 Farm to Market Rd 1488 #160 Magnolia, TX 77354 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Funeral Arrangement** Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 12/12/2019 Antique Rose City; State; Zip Code Amount (\$) Payee address; \$101.89 10540 Farm to Market Rd 1488 #160 Magnolia, TX 77354 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Funeral Flowers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/22/2019 Bath & Body Works City; Payee address; State; Zip Code Amount (\$) \$256.88 14333 FM 2920 Tomball, TX 77375 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Christmas Gifts for employees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Poiling Expense Printing Expense Palaries/Mones/Contract Labor

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	/ - d Cor	nmittee L	Sift/Awards/Memorials .egal Services Fhe Instruction G	•		Wages	Contract Labor	Travel Out of Distric OTHER (enter a cat	t egory not listed above)
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4	Date 07/10/2019	5	Payee name Brookshire B	rother's						
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip C	ode			
1	\$46.90		18535 FM 14	188 Ra						
			Magnolia, T	77354						
8	PURPOSE OF	(a)		Categories listed at		hedule)	(b)	Description		e Anto-Autom
11	EXPENDITURE			s/Donations M fficeholder/Po		nittee			itside of Texas, Comple TX, officeholder living ex	
	;			moonolaan o				Donation of Fo	ood for Snr. Cen	
								Celebration		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name		Office so	ught		Office held	· · ·
	Date		Payee name						· · · · · · · · · · · · · · · · · · ·	
	07/11/2019		Brookshire B	rother's						
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			Magnolia, T	₹ 77354						
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	OF	الما		e Categories listed at S/Donations M		thedule)	(10)	Description Check if travel or	utside of Texas. Comple	ete Schedule T.
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								Food for Hoffa	urt Fundraiser	
						- 40	<u> </u>			_
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	eholder name		Office so	ught		Office held	i
_										

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	norials Expense on Guide explains I		/ages	s/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3 Filer 1D
	Sch: 4/34 Rpt: 8/38		Riley, Charlie (Commis	sioner)			
4	Date	5	Payee name				
	10/30/2019		Brookshire Brother's				
6	Amount (\$)	7	Payee address; City;	State;	Zip Co	de	
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			Magnolia, TX 77354				
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8	PURPOSE OF	(a)	Category (See Categories lis		edule)	(b)	Description Shadi formula stable of Taylor Complete Schoolide T
	EXPENDITURE		Contributions/Donatior Candidate/Officeholde	s Made By	ittoo		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Candidate/Officeriolde	/Political Comm	iillee		Food for Magnolia Education Foundation Golf
							Tournament
		<u> </u>	(14 / 20°C 11		>561	[4	Office held
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder na	ne C	Office sou	gnt	Office neid
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	÷		Magnolia, TX 77354				
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	PURPOSE OF	(a)	Category (See Categories lis		edule)	(b)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Gift/Awards/Memorials	Expense			Check if Austin, TX, officeholder living expense
							Turkeys and Hams for Employees
l							
⊢	Complete ONLY if direct	<u> </u>	andidate/Officeholder na	ne C	Office sou	aht	Office held
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┕							
	Date		Payee name				
	07/09/2019		CHS Bass Fishing Tea	ım			
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l	\$250.00		3200 W Davis St				
			Conroe, TX 77304				
H	PURPOSE	(a)	Category (See Categories lis	tod at the tan of this can	edule)	(b)	Description
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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 Salaries/Wanes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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			Exton, PA	19341						
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	OF EXPENDITURE			ns/Donations Ma						Complete Schedule T.
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Riley, Charlie (Commissioner) Sch: 6/34 Rpt: 10/38 4 Date 5 Payee name 07/25/2019 Constant Contact 6 Amount (\$) Payee address; City; State: Zip Code \$47.97 1601 Trapelo Road Waltham, MA 02451 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newsletter Software Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/26/2019 Constant Contact State; Zip Code Amount (\$) Payee address; City; \$47.97 1601 Trapelo Road Waltham, MA 02451 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newsletter Software Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 10/25/2019 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 1601 Trapelo Road Waltham, MA 02451 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Newsletter Software Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH

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/Fundralsing Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica		nmittee	Glft/Awards/Memorials E Legal Services	xpense	Printing Ex Salaries/W	pense	e /Contract Labor	Travel Out of District OTHER (enter a category not listed	d above)
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			Waltham, M	IA 02451						
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SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Food/Beverage Expense Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense OTHER (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule F1: 2 FILER NAME Sch: 8/34 Rpt: 12/38 Riley, Charlie (Commissioner) Date 5 Payee name 10/07/2019 Ellisor Elementary PTO Payee address; Amount (\$) City: State: Zip Code \$250.00 33040 Egypt Ln Magnolia, TX 77354 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF. Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to Fundraiser Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/14/2019 **Energy Entertainment** Payee address; State; Zip Code Amount (\$) City; \$500.00 PO Box 132361 The Woodlands, TX 77393 **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** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee **Bull Mania Sponsor** Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/01/2019 Gilmore's Florist Amount (\$) Payee address; City; State; Zip Code \$119.02 2411 N Frazier St Conroe, TX 77303 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Funeral Flowers** Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Printi	nse Travel Out of District es/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	<u> </u>	3 Filer ID
_	Sch: 9/34 Rpt: 13/38	Riley, Charlie (Commissioner)	
4	Date	Рауее паme	•
	09/05/2019	HEB	
6	Amount (\$)	Payee address; City; State; Zip Code	1
	\$730.58	7988 Farm to Market Road 1488	
		Magnolia, TX 77354	
8	PURPOSE) Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
			Food donation to Lake Creek High School PTO Banquet
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	
_	expenditure to benefit C/OF	Office sough	Onice field
	Date	Payee name	
	10/25/2019	HEB	
_	Amount (\$)	Payee address; City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
	\$32.36	7988 Farm to Market Road 1488	
1	Ì	Manuella TV 7707 (
		Magnolia, TX 77354	
	PURPOSE OF	(D) Description Check if travel outside of Texas, Complete Schedule T
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Salari Sa	Supplies for Hoffart Fundraiser
_			
_	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sough	nt Office held
-	Date	Payee name	
	10/27/2019	HEB	
_	Amount (\$)	Payee address; City; State; Zip Code	•
	\$57.16	7988 Farm to Market Road 1488	
		Magnolia, TX 77354	
	PURPOSE		Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas, Complete Schedule T.
	ì	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Food for Magnolia Education Foundation Golf
	ļ		Tournament
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
	expenditure to benefit C/Oł		
ì			

SCHEDULE F1

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

Event Expense Food/Beverage Expense Gift/Awards/Memorlals Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polking Expense

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

Printing Expense Salaries/Wages/Contract Labor Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID Total pages Schedule F1: 2 FILER NAME Riley, Charlie (Commissioner) Sch: 10/34 Rpt: 14/38 Date 5 Payee name 10/27/2019 HEB Payee address; 6 Amount (\$) City: State: Zip Code \$62,51 7988 Farm to Market Road 1488 Magnolia, TX 77354 **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** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Food for Magnolia Education Foundation Golf Tournament Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/27/2019 **HEB** Payee address; Amount (\$) City: State; Zip Code \$124.11 7988 Farm to Market Road 1488 Magnolia, TX 77354 **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** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Food for Magnolia Education Foundation Golf Tournament Office held Candidate/Officeholder name Complete ONLY if direct Office sought expenditure to benefit C/OH Date Payee name 10/27/2019 HEB Amount (\$) Payee address: City: State; Zip Code \$72.07 7988 Farm to Market Road 1488 Magnolia, TX 77354 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description 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 Food donation Magnolia Education Foundation Golf Tournament Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Glft/Awards/Memorials Expense 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: 11/34 Rpt: 15/38 Riley, Charlie (Commissioner) Date Payee name 12/02/2019 Hoffart, Kevin Payee address; 6 Amount (\$) City; State; Zip Code \$800.00 30606 Sulphur Creek Dr. Magnolia, TX 77355 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to Fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/22/2019 Incredible Events City; Payee address; Amount (\$) State; Zip Code \$808.00 2219 Verona Pearland, TX 77581 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule \top . Event Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Event Entertainment Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 12/07/2019 Incredible Events Amount (\$) Payee address; City: State: Zip Code \$1.616.00 2219 Verona Pearland, TX 77581 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Vendor for Family Fun Day Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donatons 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 Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1. T	otal pages Schedule F1:	2 FILER NAME 3 Filer ID
S	Sch: 12/34 Rpt: 16/38	Riley, Charlie (Commissioner)
	Date	5 Payee name
1	.2/09/2019	Incredible Events
6 A	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,616.00	2219 Verona
		Pearland, TX 77581
8	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	Event Expense Check if travel dutside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
		Vendor for Family Fun Day
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
C	Date	Payee name
1	.0/11/2019	Interfaith of The Woodlands
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	4242 Interfaith Way
		The Woodlands, TX 77381
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
		Donation to Fundraiser
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
C	9/25/2019	JRI Memorial
P	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P.O. Box 698
		Magnolia, TX 77353
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Sponsor Fundraiser
		Sponsor Fundraiser
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
orn	ns provided by Texas E	thics 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/Memoriais Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	u Cor	-		Salaries/\ Jains how to co	-		HER (enter a category not listed a	Dove)
1	Total pages Schedule F1:	2	FILER NAME				3 F	iler ID	
	Sch: 13/34 Rpt: 17/38		Riley, Charlie (Commi	issioner)					
4	Date	5	Payee name					- A-100-1-2-2-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3-3	
	12/02/2019		Judge Phil Grant Cam	npaign					
6	Amount (\$)	7	Payee address; City		State; Zip Co	ode			
	\$250.00		PO Box 558						
			Pinehurst, TX 77362						
8	PURPOSE	(a)	Category (See Categories I	sted at the top of	this schedule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donatio	ns Made By	•		<u> </u>	of Texas. Complete Schedule T.	
	EXI ENDITORE		Candidate/Officeholde	er/Political C	committee		Donation to Fundr	ficeholder living expense	
		ļ					Donation to Fundi	alsei	
9	Complete ONLY if direct	<u>_</u>	Candidate/Officeholder na	ame	Office sou	uaht		Office held	
9	expenditure to benefit C/OI		Sandidator Omocnoidor no	arric	Onide 300	ugiii		Office field	
	Date	Ī	Payee name						
	09/23/2019	ĺ	Judge Wayne Mack C	Campaign					
	Amount (\$)	┝	Payee address; City		State; Zip C	ode			
	\$500.00		PO Box 2234	't	otato, zip o	ouc			
	4000.00		(O BOX 220)						
			Conroe, TX 77305						
	PURPOSE	 				T/b)	B t 41	**************************************	
	OF	الما	Category (See Categories II Contributions/Donatio			(0)	Description Check if travel outside	of Texas. Complete Schedule T.	
	EXPENDITURE		Candidate/Officeholde					fficeholder living expense	
							Donation to Fund	raiser	
		L				ļ <u>.</u>			_
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder na	ame	Office so	ught		Office held	
	experientare to benefit ore	11							
	Date	1	Payee name						
	09/14/2019	L	Lake Conroe Chambe	er 					
	Amount (\$)		Payee address; City		State; Zip C	ode			
	\$325.00	İ	505 W Davis St #287	2					
			Conroe, TX 77301						
	PURPOSE OF	(a)	Category (See Categories I	listed at the top of	this schedule)	(b)	Description		<u> </u>
	EXPENDITURE		Fees					e of Texas. Complete Schedule T. ifficeholder living expense	
		İ					Membership Fees		
	Complete ONLY if direct		Candidate/Officeholder na	ame	Office so	ught		Office held	·
	expenditure to benefit C/O					=			
	rme provided by Tayas F	-+(- <u>:</u>	0		thice state tv			Vorsion V	1 1 22622f7

SCHEDULE F1

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

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

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

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

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

Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 14/34 Rpt: 18/38 Riley, Charlie (Commissioner) Date Payee name 09/26/2019 Lake Conroe Chamber Pavee address: State: Zip Code Amount (\$) City: \$180.00 505 W Davis St #2872 Conroe, TX 77301 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Meeting Fee Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name Liberty Belles Republican Women 12/12/2019 Payee address; City; State; Zip Code Amount (\$) \$55.00 73 Greenbriar Drive Conroe, TX 77304 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership Dues Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/14/2019 Liberty Belles Republican Women Amount (\$) Payee address; City: State; Zip Code \$250.00 73 Greenbriar Drive Conroe, TX 77304 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) 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 Sponsor Fundraiser Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH www.ethics.state.tx.us Version V1.1.3a6aaf7d Forms provided by Texas Ethics Commission

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	r - Gift/Awards/Memorials Expense Printing Expense Travel Out of District I 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.
1 Total pages Schedule F1: Sch: 15/34 Rpt: 19/38	2 FILER NAME Riley, Charlie (Commissioner) 3 Filer ID
4 Date 07/12/2019	5 Payee name Lulu's Loved
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 30606 N Sulphur Creek Dr. Magnolia, TX 77355
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to Benefit for Magnolia Citizen
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 07/31/2019	Payee name MHS Football Booster Club
Amount (\$) \$500.00	Payee address; City; State; Zip Code 13450 FM 1488 Magnolia, TX 77354
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsor Football Booster
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 07/31/2019	Payee name MWHS Football Booster Club
Amount (\$) \$300.00	Payee address; City; State; Zip Code PO Box 1672
	Magnolia, TX 77353
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsor Football Booster
Complete <u>ONLY</u> if direct expenditure to benefit C/O	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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salarles/Wages/Contract Labor OTHER (enter a category not listed above)
L	Gradit Gard F dylllolit	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 16/34 Rpt: 20/38	Riley, Charlie (Commissioner)
4	Date	5 Payee name
	12/29/2019	Magnolia Area Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	PO Box 729
	·	Pinehurst, TX 77362
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Sponsor of 2020 Events
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	
	Date	Payee name
	09/27/2019	Magnolia Chamber
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	18423 Farm to Market Rd 1488 suite c
		Magnolia, TX 77354
<u> </u>	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees Description Check if travel outside of Texas. Complete Schedule T.
ļ	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/04/2019	Magnolia Chamber
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.00	18423 Farm to Market Rd 1488 suite c
		Magnolia, TX 77354
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meeting Fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	7
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SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 17/34 Rpt: 21/38	Riley, Charlie (Commissioner)
4	Date	5 Payee name
	10/04/2019	Magnolia Chamber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,390.00	18423 Farm to Market Rd 1488 suite c
		Magnolia, TX 77354
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check If travel outside of Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense
		Sponsor Bus for Capitol Day
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· .
	Date	Payee name
	10/24/2019	Magnolia Hardware
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.28	7988 Farm to Market Road 1488
		Magnolía, TX 77354
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
Г	Date	Payee name
	10/29/2019	Magnolia Hardware
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$11.71	19025 Farm to Market Rd 1488
	·	
		Magnolia, TX 77355
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Tournament
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
┝		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense 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: 18/34 Rpt: 22/38 Riley, Charlie (Commissioner) Date Payee name Magnolia Histrocial Society 10/30/2019 Payee address; Amount (\$) City: State: Zip Code \$250.00 426 Melton St Magnolia, TX 77354 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to Fundraiser Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 11/08/2019 Magnolia ISD Livestock Show Payee address; State; Zip Code Amount (\$) City; \$3,700.00 14350 Farm to Market Rd 1488 Magnolia, TX 77354 **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** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Donation to Fundraiser Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name Magnolia ISD Livestock Show 10/10/2019 Amount (\$) Payee address; City: State; Zip Code \$200.00 14350 Farm to Market Rd 1488 Magnolia, TX 77354 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Belt Buckle Sponsor Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	Salaries/	Wages	Contract Labor OTHER (er	or district iter a category not listed above)
				The Instruction Guid	e explains how to co	mple	te this form,	
1	Total pages Schedule F1:	2	FILER NAME	Ξ.			3 Filer ID	
	Sch: 19/34 Rpt: 23/38		Riley, Char	lie (Commissioner))			
4	Date	5	Payee name					
	09/24/2019		Magnolia L	ion's Club				
6	Amount (\$)	7	Payee addre	ss; City;	State; Zip Co	ode		
	\$100.00		27010 Con	cho Trail				
			Magnolia, 1	X 77355				
8	PURPOSE	(a)				(h)	B	,
٥	OF	(a)		ee Categories listed at the t		(0)	Description Check if travel outside of Texas.	Complete Schedule T
	EXPENDITURE			ns/Donations Made Officeholder/Politic			Check if Austin, TX, officeholder	·
							Donation to Fundraiser	
9	Complete ONLY if direct		Candidate/Off	iceholder name	Office so	ught	Offic	ce held
	expenditure to benefit C/OI	┥						
	Date		Payee name		·			
	12/18/2019		Magnolia L	ion's Club				
	Amount (\$)		Payee addre	ss; City;	State; Zip C	ode		_
İ	\$180.00		27010 Con	cho Trail				
			Magnolia,	TX 77355				
	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this schedule)	(b)	Description	
	OF EXPENDITURE		Fees				Check if travel outside of Texas	•
							Check if Austin, TX, officeholder 2019 Fees	r living expense
							20101003	
	Complete ONLY if direct		Candidate/Off	iceholder name	Office so	uaht	Offic	ce held
	expenditure to benefit C/O		, ,			5		
H	Date	<u> </u>	Payee name		· · · · · · · · · · · · · · · · · · ·			
	12/01/2019		Magnolia F					
⊢	Amount (\$)	\vdash	Payee addre		State; Zip C	ode		
	\$396.20	I	-	iolia Blvd # M	-mu, zip U	J40		
	4000.20		mag					
			Magnolia, 1	TX 77355				
_	PURPOSE	(2)				(h)	Description	
	OF	(",	Event Expe	See Categories listed at the	top of this schedule)	(5)	Check if travel outside of Texas	. Complete Schedule T.
	EXPENDITURE		Eveni Exp	3,100			Check if Austin, TX, officeholde	r living expense
							Tables, Chairs, Moonwa	alks for Christmas Event
L								
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	iceholder name	Office so	ught	Offi	ce held
L	experientere to benefit C/O	1.1						
_	rme provided by Toyes E	'A - !	0	·	w othion state tv	4		Varaian V1 1 2aCaaf7

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 20/34 Rpt: 24/38	Riley, Charlie (Commissioner)
4	Date	5 Payee name
	10/07/2019	Magnolia Rotary Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	11659 FM 1488 Road
	·	
		Magnolia, TX 77354
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation to Tailgate Fundralser
		Donation to rangate randialos
_	a la auscella	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Canada Cinocito de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la casa de la
	Date	Payee name
	09/17/2019	Magnolia West Softball
_	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	42202 FM 1774
		Magnolia, TX 77355
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Sponsor Softball Team
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/01/2019	Montgomeory County Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 1766
		Conroe, TX 77305
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee
İ		Donation to Fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
		thica Commission Varcion V1 1 3a6aaf70

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

	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: 21/34 Rpt: 25/38	Riley, Charlie (Commissioner)
4	Date	5 Payee name
	12/07/2019	North Main Tool Rental
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$56.31	11210 Farm to Market Rd 1488
	:	Magnolia, TX 77354
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for Magnolia Parade
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/30/2019	North Shore Republican Women
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	PO Box 1993
		Montgomery, TX 77356
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meeting Fee
		g. · cc
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	-
H	Date	Payee name
	12/07/2019	Oliphant, Tyre
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	7815 Green Devon Dr.
		Houston, TX 77095
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Santa for Christmas Event
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experience to belieff C/O	
-	rme provided by Toyas E	thics Commission Washing state tyrus Version V1.1.3363377

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:		3 Filer ID
_	Sch: 22/34 Rpt: 26/38	Riley, Charlie (Commissioner)	
4	Date		
4	07/09/2019	5 Payee name PostNet	
_			
6	Amount (\$) \$35.99	7 Payee address; City; State; Zip Code 18535 Farm to Market Rd 1488	
	და ე.ჟჟ	Suite 230	
		Magnolia, TX 77354	
8	PURPOSE OF		Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Printing Expense	Check if Austin, TX, officeholder living expense
		F	Printing Campaign Finance Report
		·	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/07/2019	PostNet	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$391.77	18535 Farm to Market Rd 1488 Ste 230	
		•	
		Magnolia, TX 77354	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EVDENDITUDE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Signs for Christmas Event
	OI ONII V II -III	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/OI		Office field
	Date	Payee name	
	08/23/2019	Premiere Wedding & Events	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$649.50	700 McCaleb Rd # F	
		Montgomery, TX 77356	
	PURPOSE OF		Description ☐ Check if travel outside of Texas. Complete Schedule ⊤.
	EXPENDITURE	Solicitation/Fundraising Expense	Check if Austin, TX, officeholder living expense
		7	Auction Item for Fundraiser
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	irms provided by Toyas E	thics Commission MANAN ethics state ty us	Version V1 1 3a6aaf7d

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract The Instruction Guide explains how to complete this f	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 23/34 Rpt: 27/38	Riley, Charlie (Commissioner)	
4 Date	5 Payee name	
10/04/2019	Rancho Grande	
6 Amount (\$) \$108.94	7 Payee address; City; State; Zip Code 18914 Farm to Market Rd 1488 Magnolia, TX 77355	
8 PURPOSE		ntion
OF EXPENDITURE	Food/Beverage Expense	puton cck if travel outside of Texas. Complete Schedule T. cck if Austin, TX, officeholder living expense cal Meeting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
07/27/2019	Republic Grille	
Amount (\$) \$316.03	Payee address; City; State; Zip Code 30340 FM2978 #800	
	Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Che	iption ack if travel outside of Texas. Complete Schedule T. ack if Austin, TX, officeholder living expense cal Meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
12/07/2019	Robertson, Olga	
Amount (\$) \$450.00	Payee address; City; State; Zip Code 10519 Clubhouse Circle	
	Magnolia, TX 77354	
PURPOSE OF EXPENDITURE	Che	iption eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense ography for Christmas Event
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought OH	Office held
Forms provided by Texas B	Ethics Commission www.ethics.state.tx.us	Version V1.1.3a6aaf7

SCHEDULE F1

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

Event Expense Loa Fees Offit Food/Beverage Expense Poll Gift/Awards/Memorials Expense Prin

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 24/34 Rpt: 28/38	Riley, Charlie (Commissioner)
4	Date	5 Payee name
	12/07/2019	Robinson, Robin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	32910 Leafy Oak Court
		Magnolia, TX 77354
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		DJ for Christmas Event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
_	expenditure to benefit C/Ol	
_	Date	Power name
	12/18/2019	Payee name STRONG TOWER TROPHIES T-SHIRTS & MORE
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,059.96	18434 Buddy Riley Blvd, Ste 4
		Magnolia, TX 77354
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Gifts for the Senior Citizen community members
	:	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	I Davida sawa
	09/25/2019	Payee name Saltgrass
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$38.51	810 Interstate 45 N
		Conroe, TX 77301
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Political Meeting
		1 ontotal Processing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	• • • • • • • • • • • • • • • • • • • •

SCHEDULE F1

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

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

Candidate/Officeholder/Politica Credit Card Payment	d 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: 25/34 Rpt: 29/38	Riley, Charlie (Commissioner)
4 Date	5 Payee name
09/26/2019	Saltgrass
6 Amount (\$) \$114.71	7 Payee address; City; State; Zip Code 810 Interstate 45 N Conroe, TX 77301
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Meeting
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H
Date	Payee name
07/09/2019	Sam's Club
Amount (\$) \$1,142.46	Payee address; City; State; Zip Code 2000 Westview Blvd
	Conroe, TX 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation of Food for Snr. Center's Freedom Celebration
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/24/2019	Sam's Club
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2000 Westview Blvd
	Conroe, TX 77304
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Membership Fees
Complete ONLY 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 -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 26/34 Rpt: 30/38	Riley, Charlie (Commissioner)
4 Date	5 Payee name
10/24/2019	Sam's Club
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$803.33	2000 Westview Blvd
	Conroe, TX 77304
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Camplete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Hoffart Fundraiser
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
10/02/2019	Society of Samaritans
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	31355 Friendship Dr
	Magnolia, TX 77355
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee
	Candidate/Officeholder/Political Committee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
07/11/2019	Southern Heritage Consulting LLC
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	PO Box 558
	Pinehurst, TX 77362
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.
LA LIBITORE	Check if Austin, TX, officeholder living expense Campaign Mgmt
	Campaign wight
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
÷	
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SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - **Event Expense** Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor 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 F1: |2 FILER NAME Filer ID Riley, Charlie (Commissioner) Sch: 27/34 Rpt: 31/38 Date Payee name 08/02/2019 Southern Heritage Consulting LLC Payee address; City; State; Zip Code 6 Amount (\$) \$750.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense July Campaign Mgmt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/03/2019 Southern Heritage Consulting LLC Payee address; City; State; Zip Code Amount (\$) \$750.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense August Camapaign Mgr Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 10/07/2019 Southern Heritage Consulting LLC Payee address; Amount (\$) City: State; Zip Code \$750.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense September Campaign Mgmt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID 1 Total pages Schedule F1: 2 FILER NAME Sch: 28/34 Rpt: 32/38 Riley, Charlie (Commissioner) 4 Date 5 Payee name 11/02/2019 Southern Heritage Consulting LLC Payee address; City: State; Zip Code Amount (\$) \$750.00 PO Box 558 Pinehurst, TX 77362 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense October Campaign Mgmt Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/02/2019 Southern Heritage Consulting LLC Payee address; City; State; Zip Code Amount (\$) \$750.00 PO Box 558 Pinehurst, TX 77362 PURPOSE (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense November Campaign Management Office held Office sought Candidate/Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 07/15/2019 Storage Stop Amount (\$) Payee address; City; State; Zip Code \$70.00 38201 FM 1774 Magnolia, TX 77355 **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 Storage of Campaign Materials Office sought Office held Candidate/Officeholder name Complete **QNLY** if direct expenditure to benefit C/OH www.ethics.state.tx.us Forms provided by Texas Ethics Commission

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
	Total pages Schedule F1: Sch: 29/34 Rpt: 33/38	2 FILER NAME Riley, Charlie (Commissioner) 3 Filer ID
	Date 08/17/2019	5 Payee name Storage Stop
6	Amount (\$) \$70.00	7 Payee address; City; State; Zip Code 38201 FM 1774 Magnolia, TX 77355
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Storage of Campaign Materials
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 09/17/2019	Payee name Storage Stop
	Amount (\$) \$70.00	Payee address; City; State; Zip Code 38201 FM 1774 Magnolia, TX 77355
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Storage of Campaign Supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 10/11/2019	Payee name Storage Stop
	Amount (\$) \$70.00	Payee address; City; State; Zip Code 38201 FM 1774
		Magnolia, TX 77355
	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 Storage of Campaign Supplies
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Relmbursement Office Overhead/Rental Expense

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services Credit Card Payment The Instruction Guide explains how to complete this form. Filer (D 1 Total pages Schedule F1: 2 FILER NAME Sch: 30/34 Rpt: 34/38 Riley, Charlie (Commissioner) 4 Date Payee name 11/18/2019 Storage Stop Payee address; State; Zip Code 6 Amount (\$) City; \$70.00 38201 FM 1774 Magnolia, TX 77355 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Storage of Campaign Supplies Office sought Office held Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH Date Payee name 12/17/2019 Storage Stop State; Zip Code Amount (\$) Payee address; City; 38201 FM 1774 \$70.00 Magnolia, TX 77355 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Storage of Campaign Supplies Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 12/07/2019 TGR Exotics Payee address; City; State; Zip Code Amount (\$) \$1,300.00 22115 Sherrod Ln Spring, TX 77389 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense **Exotic Animals for Christmas Event** Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		nmitte e	Gift/Awards/Memorials E Legal Services The Instruction Guid	•		/ages/	/Contract Labor	Travel Out of District OTHER (enter a categor	y not listed above)
1	Total pages Schedule F1:	2	FILER NAMI	<u> </u>				13	Filer ID	
_	Sch: 31/34 Rpt: 35/38			lie (Commissione	r)					
4	Date	5	Payee name							
	08/30/2019		TX Federat	ion of Republican	Women					
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Co	de	· · · · · · · · · · · · · · · · · · ·		
	\$250.00		PO Box 17	1146						
	·									
			Austin TV	70717						
			Austin, TX	(8/1/						
8	PURPOSE	(a)	Category (S	ee Categories listed at the	top of this sche	dule)	(b)	Description		
	OF EXPENDITURE			ns/Donations Mad				느	side of Texas. Complete So	
			Candidate/	Officeholder/Politi	cal Commi	ttee		1I	(, officeholder living expens	se
						:		Sponsor Table		
9	Complete ONLY if direct		Candidate/Off	iceholder name	0	ffice sou	ght		Office held	-
	expenditure to benefit C/OI	Ħ								
	Date		Payee name							
	10/17/2019		•	Rae Campaign						
	Amount (\$)	H	Payee addre	, -	State	Zip Co	nda			
	\$250.00		PO Box 31	- · · · · · · · · · · · · · · · · · · ·	Jiaie	Zip Cu	Jue			
	φ230.00		PO BOX 31							
ŀ			Conroe, TX	(77305						
	PURPOSE	(a)	Category (s	see Categories listed at the	top of this sche	edule)	(b)	Description		
	OF EXPENDITURE			ns/Donations Mad		,		Check if travel out	side of Texas. Complete S	chedule T.
	EXPENDITURE		Candidate/	Officeholder/Politi	ical Commi	ittee			K, officeholder living expen	se
								Donation to Fu	ndraiser	
		<u> </u>								
	Complete ONLY if direct		Candidate/Of	ficeholder name	0	ffice sou	ıght		Office held	
	expenditure to benefit C/OI	Н								
_	Date		Payee name	<u> </u>						
	10/10/2019		-	rbread House						
H	Amount (\$)	\vdash	Payee addre		Ctotos	Zip Co	nde			
		1	20444 For	- ·	Siale,	ZIH CC	Juc			
	\$420.00		20 444 FUR	SOLVICAN DI.						
			Magnolia,	TX 77355						
	PURPOSE	(a	Category (s	See Categories listed at the	top of this sche	edule)	(b)	Description		
	OF	l	•	ns/Donations Mad	•	·		Check if travel out	side of Texas. Complete S	chedule T.
	EXPENDITURE			Officeholder/Polit		ittee		Check if Austin, T.	X, officeholder living expen	se
								Cakes for Seni	or Center	
	Complete ONLY if direct		Candidate/Of	ficeholder name	C	Office sou	ught		Office held	· · · · · · · · · · · · · · · · · · ·
	expenditure to benefit C/O	Н								
_										
Ļ		-21-7				44 - 4				
H۲	rms provided by Texas F	-rni	cs Cammiss	acus WW	vw emics s	TATE IV I	115		V	ersion V1 1 3a6aaf7d

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental 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/Politica Credit Card Payment	Committee Legal Services Salarles/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: 32/34 Rpt: 36/38	Riley, Charlie (Commissioner)
4	Date	5 Payee name
	07/26/2019	The Woodlands College Park Football Booster
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,200.00	PO Box 8571
		The Woodlands, TX 77387
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Capplidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Sponsor Football Booster
		Sported 1 Social Social
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	Carladato, Cinconotad name
	Date	Payee name
	09/11/2019	The Woodlands College Park Football Booster
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	PO Box 8571
		The Woodlands, TX 77387
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE		Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule 7.
	EXPERDITORE	Candidate/Officeholder/Political Committee
		Sponsor Football Booster
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to believe eve	
	Date	Payee name
	08/22/2019	Twist It Up
	Amount (\$)	Payee address; City; State; Zip Code
	\$590.00	PO Box 41254
		Houston, TX 77421
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Christmas Event Entertainment
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
\vdash		
	•	
Fo	rms provided by Texas E	thics Commission www.ethics.state.tx.us Version V1.1.3a6aaf70

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment							
1	Total pages Schedule F1:	l l						
	Sch: 33/34 Rpt: 37/38	Riley, Charlie (Commissioner)						
4	Date	5 Payee name						
	12/09/2019	Twist It Up						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
Ü	\$590.00 PO Box 41.254							
	Φ090.00							
		Houston, TX 77241						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Event Expense Check if travel outside of Texas, Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Vendor for Family Fun Day						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OH							
	Date	Payee name						
	09/26/2019	United States Postal Service						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$204.00	815 Goodson Rd						
		Magnolia, TX 77355						
	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						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH								
_	Date	Payee name						
		I						
11/21/2019 Waigreens								
	Amount (\$)	Payee address; City; State; Zip Code						
\$373.40 18850 Farm to Market Rd 1488								
		Magnolia, TX 77355						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Employee Gifts						
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O							
Fo	rms provided by Texas E	thics Commission www.ethics.state.tx.us Version V1.1.3a6aa						

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donation

Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee	Legal Services The Instruction Guide explain	-	es/Contract Labor lete this form.	OTHER (enter a category not li	sted above)		
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID			
	Sch: 34/34 Rpt: 38/38	Riley, Charl	ie (Commissioner)						
4	Date	5 Payee name							
	09/20/2019	Yankee Donuts							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$26.00	327 Magnolia Blvd							
		Magnolia, T	X 77355						
8	PURPOSE	(a) Category (Se	ee Categories listed at the top of this s	schedule) (b) Description				
	OF FOOD/Beverage Expense Check if travel outside of Texas. Complete Sched					. Т.			
	EXPENDITORE				Lucal	, TX, officeholder living expense			
		:			Political Mee	ពេញ			
L		p. 1. 1 . 1		060-	<u> </u>	Office held			
9	Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sough	ī	Omice neid			
_									
	Date	Payee name							
	09/27/2019	Yankee Dor							
	Amount (\$)	Payee addres	•	te; Zip Code					
	\$32.50	327 Magnol	ía Blvd						
			9,						
		Magnolia, T	X 77355						
	PURPOSE	(a) Category (Se	ee Categories listed at the top of this s	schedule) (b) Description				
OF EXPENDITURE		Food/Beverage Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, pfficeholder living expense				
			•		Political Mee				
						~			
_	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sough	t	Office held			
expenditure to benefit C/OH									
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