

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 12	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<div style="border: 2px solid blue; padding: 5px; text-align: center;"> <b>OFFICE USE ONLY</b>  <span style="font-size: 1.2em; color: red;">RECEIVED</span>  <span style="font-size: 1.2em; color: red;">APR 06 2017</span>  <i>City Secretary's Office</i> </div> <div style="margin-top: 5px;"> <small>Date Received</small>  <small>Date Hand-Delivered to Date Postmarked</small>  <small>Receipt #</small>      <small>Amount</small>  <small>Date Processed</small>  <small>Date Imaged</small> </div>
		Kristi		
NICKNAME	LAST	SUFFIX		
	Pena			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	<small>HD 4-677 @ 4:05pm  <small>CC</small> </small>
	408 W. 6th St  Irving, TX 75060			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
		Lynda		
NICKNAME	LAST	SUFFIX		
	Smith			
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;
	500 Ricker Ct  Irving, TX 75061			STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
	(214)	532-9943		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month	Day	Year	THROUGH
	02	17	2017	03/27/2017
10 ELECTION	ELECTION DATE		ELECTION TYPE	
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	05	06	2017	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)	
	None		Irving Mayor	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

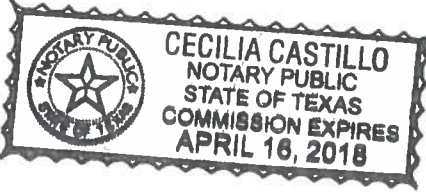
2 of 12

<b>13 C / OH NAME</b> Pena, Kristi	<b>14 Filer ID</b>
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<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>
		<b>COMMITTEE ADDRESS</b>
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	123.13
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,372.39
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	5,600.82
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,522.21
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	8,000.00

**17 AFFIDAVIT**



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Kristi Pena  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristi Pena, this the 6<sup>TH</sup> day of April, 20 17, to certify which, witness my hand and seal of office.

Cecilia Castillo  
Signature of officer administering

Cecilia Castillo  
Printed name of officer administering

Notary  
Title of officer administering oath

# SUBTOTALS - C/OH

18 FILER NAME Pena, Kristi		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,123.13
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 2,249.26
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 8,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 4,318.60
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,282.22
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/4 Rpt: 4/12
<b>2</b> FILER NAME Pena, Kristi		<b>3</b> Filer ID
<b>4</b> Date 03/06/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byers, Kay (Mrs.)	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>6</b> Contributor address; City; State; Zip Code 918 E Tanglewood  Irving, TX 75061		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Jacqualea (Mrs.)	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 511 Campbell Dr  Irving, TX 75061		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/09/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Jacqualea (Mrs.)	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 511 Campbell Dr  Irving, TX 75061		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/14/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debrick, Debbie	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 1600 Boundbrook  Irving, TX 75060		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillard, Chris	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 4905 Canyon Trail #2616  Euless, TX 76040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/12
<b>2</b> FILER NAME Pena, Kristi		<b>3</b> Filer ID
<b>4</b> Date 03/14/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewing, Kenneth	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code 2524 Crestview Cir  Irving, TX 75062		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 03/14/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardesty, Scott	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 4523 Queenswood Dr  Grand Prairie, TX 75052		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamon, Cherie	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 2301 Cochran St  Irving, TX 75062		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lamon, Robert	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 2301 Cochran St  Irving, TX 75062		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMahan, Susan	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1209 Rusdell Dr  Irving, TX 75060		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 3/4 Rpt: 6/12
2 FILER NAME Pena, Kristi		3 Filer ID
4 Date 03/14/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preston, Jessica	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 2213 Druid Dr  Irving, TX 75060		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/14/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Priest, Charity	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1300 Donely Dr  Euless, TX 76039		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/14/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seago, Sheri	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1120 Terry Way  Irving, TX 75060		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/09/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Lynda (Mrs.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 500 Ricker Ct  Irving, TX 75061		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tom Spink Campaign	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1319 N Irving Heights Dr  Irving, TX 75061		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/12
<b>2</b> FILER NAME Pena, Kristi		<b>3</b> Filer ID
<b>4</b> Date 03/14/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tressler, Nancey	<b>7</b> Amount of Contribution (\$) \$50.00
	<b>6</b> Contributor address; City; State; Zip Code 3310 Ridgemont  Irving, TX 75062	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 03/17/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkerson, Eddie	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b> 1514 Franklin St  Irving, TX 75060	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 8/12	
2 FILER NAME Pena, Kristi		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 03/14/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooley, Jacqulea	8 Amount of contribution (\$) \$228.00	9 In-kind contribution description Website Fees
7 Contributor address; City; State; Zip Code 511 Campbell Dr  Irving, TX 75061		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Bobbie and Marvin	Amount of contribution (\$) \$1,010.63	In-kind contribution description Newspaper Advertisement
Contributor address; City; State; Zip Code 500 Farine  Irving, TX 75063		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Bobbie and Marvin	Amount of contribution (\$) \$1,010.63	In-kind contribution description Newspaper Advertisement
Contributor address; City; State; Zip Code 500 Farine  Irving, TX 75063		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			



# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 9/12
<b>2</b> FILER NAME Pena, Kristi		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 02/20/2017	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Jesse	<b>9</b> Loan Amount (\$) \$3,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 408 W 6th St  Irving, TX 75060	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) General Contractor		<b>13</b> Employer (See Instructions) Texas Construction Services
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)
Date of loan 03/20/2017	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Randle, Bobbie and Marvin	Loan Amount (\$) \$5,000.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 500 Farine  Irving, TX 75063	Interest Rate
		Maturity Date
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Irving Countertops
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)
Loan from Bobbie and Marvin Randle paid for Writ of Mandamus Legal Expenses with Wade Emmert, 1701 N Market St, Suite 404, Dallas, TX 75202. (Filed as Loan per Texas Ethics Commission recommendation on 4/6/2017)		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 10/12		2 FILER NAME Pena, Kristi		3 Filer ID	
4 Date 03/21/2017		5 Payee name Chase Bank			
6 Amount (\$) \$17.50		7 Payee address; City; State; Zip Code 111 E Irving Blvd  Irving, TX 75060			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check Order	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/24/2017		Payee name Fast Signs			
Amount (\$) \$1,028.38		Payee address; City; State; Zip Code 4070 N Beltline Rd #118  Irving, TX 75038			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 03/14/2017		Payee name Raise the Money			
Amount (\$) \$6.67		Payee address; City; State; Zip Code PO Box 26466  Little Rock, AR 72221			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees for website donations	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 11/12	<b>2</b> FILER NAME Pena, Kristi	<b>3</b> Filer ID
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<b>4</b> Date 03/24/2017	<b>5</b> Payee name Texas GOP Store
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<b>6</b> Amount (\$) \$2,966.05	<b>7</b> Payee address; City; State; Zip Code 404 I-45 S  Huntsville, TX 77340
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/22/2017	Payee name Water2Wine Design
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 168 Weldon Church Rd  Bernice, LA 71222
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Artwork for campaign
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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**POLITICAL EXPENDITURES FROM PERSONAL FUNDS**

**SCHEDULE G**

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

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 12/12	<b>2</b> FILER NAME Pena, Kristi	<b>3</b> Filer ID
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<b>4</b> Date 03/09/2017	<b>5</b> Payee name Fast Signs
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<b>6</b> Amount (\$) \$524.47 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 4070 N Beltline Rd #118  Irving, TX 75038
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/27/2017	Payee name Fast Signs
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Amount (\$) \$757.75 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 4070 N Beltline Rd #118  Irving, TX 75038
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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