

Official Public Records of Harris County Stan Stanart County Clerk

Campaign Finance Report

FileNo:

2012125

FileDate:

1/17/2012 4:20:00PM

Office:

District Attorney

Candidate:

Friends of Mike Anderson,

Treasurer:

Lucke, David

Category:

Contributions And Expenditures

Type:

COR

Harris County No Fee



Stan Stanart

COUNTY CLERK
HARRIS COUNTY, TEXAS

Page - `

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

	e SPAC INSTRUCTION mplete this form.	Guide explains how to	1 ACCOUNT # (Ethics Commission filers) 12000000	2 PAGE # 1 of 21		
_	COMMITTEE NAME Friends of Mike Anders	son		OFFICE USE ONLY Data Received		
4	COMMITTEE ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 1 E Greenway Plaza Ste 225 Houston, TX 77046	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked		
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST David NICKNAME LAST Lucke	SUFFIX	Receipt # Amount Date Processed Date Imaged		
6	CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT 1 E Greenway Plaza Ste 225 Houston, TX 77046	SUITE #: CITY: STATE:	ZIP CODE		
7	CAMPAIGN TREASURER'S MAILING ADDRESS Change of Address	1 E Greenway Plaza Ste 225 Houston, TX 77046	/SUITE#; CITY; STATE:	ZIP CODE		
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (713) 526-3399	EXTENSION			
9	REPORT TYPE	X January 15 July 15	30th day before election 8th day before election Runoff	Exceeded \$500 limit Dissolution (attach PAC-DR) 10th day after campaign treasurer termination		
10	PERIOD COVERED	Month Day Year 07/01/2011	THROUGH	Month Day Year 12/31/2011		
11	ELECTION	Month Day Year	ION TYPE	General Special		
		GO ·	TO PAGE 2			

Texas Ethics Commission	P.O. Box 120	70 Austin, Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
SPECIFIC-PU PURPOSE &		MMITTEE REPORT:		RM SPAC SHEET PG 2
12 COMMITTEE Frie	ends of Mike And	erson	ACCOUNT # (E 12000000	thics Commission filers)
13 COMMITTEE PURPOSE	X CANDIDATE	CANDIDATE / OFFICEHOLDER NAME Mike Anderson		
(Attach lists on plain paper to complete this report if necessary.)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (office Harris Cty District Attorney	ceholder)	
SUPPORT (Candidate or Measure)		BALLOT IDENTIFICATION / # EI Mon	LECTION DATE th Day Year	
(Candidate or Measure) ASSIST (Officeholder only)	MEASURE	DESCRIPTION		
14 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE		0.00
		OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	152,250.00
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	wized \$	0.00
	4. TOTAL F	OLITICAL EXPENDITURES	\$	16,766.49
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST REPORTING PERIOD	DAY \$	135,333.51
OUTSTANDING LOAN TOTALS	the second secon	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T Y OF THE REPORTING PERIOD	THE \$	0.00
Sworn to and subscrib	_	I swear, or affirm, under per is true and correct and inclume under Title 15 Election Signature E The said David Lucke tify which, witness my hand and seal of office.	des all information required Code of Campaign Treasurer	
Signature of officer admi	nistering oath	Print name of officer administering oath	Title of officer admini	stering oath

Signature of officer administering oath

	The Instruction	Guide explains how to complete this form.		1 PAGE # Schedule: 1/1	3 Report: 3/21	
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor uut-of-state PAC (ID# Alford, Matthew B.		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/22/2011	6 Contributor address; City; State; Zip Code 1018 Preston Suite 200 Houston, TX 77002		\$500.00	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Stradley Chern			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/08/2011	Contributor address; City; State; Zip Code 345 Brentwood Ter. NE Atlanta, GA 30305		\$50,000.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In Delta Airlines	structions)		
	Date	Full name of contributor	,	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/28/2011	Contributor address; City; State; Zip Code 3811 Almond Creek Houston, TX 77059		\$1,000.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Physician	eation / Job title (See Instructions)	Employer (See In Oral Surgery As			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/01/2011	Contributor address; City; State; Zip Code 9121 Elizabeth Road Houston, TX 77055		\$10,000.00	 	
				(If travel outside of	Texas, complete Schedule T)	
		pation / Job title (See Instructions) Real Estate/Investments	Employer (See In John H. Baker I			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/27/2011	Contributor address; City; State; Zip Code 9121 Elizabeth Road Houston, TX 77055		\$10,000.00	 	
				(If travel outside of	Texas, complete Schedule T)	
		pation / Job title (See Instructions)	Employer (See In			
	Commercial	Real Estate/Investments	John H. Baker	interests	;	

5

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

P.O.Box 12070

_							
	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 2/1	13 Report: 4/21		
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Beek, Belinda)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/08/2011	6 Contributor address; City; State; Zip Code 15915 Erin Creek Ct. Houston, TX 77062		\$50.00			
					Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In United States A				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/19/2011	Contributor address; City; State; Zip Code		\$1,000.00	! !		
		Houston, TX 77018			1		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Attorney		Law Offices of L	_ester Blizzard			
-				<u> </u>			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/27/2011	Contributor address; City; State; Zip Code 5506 Lincrest Ln Houston, TX 77056-6808		\$250.00	 		
				L'	Texas, complete Schedule T)		
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Bogar Lawyers				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/18/2011	Contributor address; City; State; Zip Code 4034 Windswept Drive Montgomery, TX 77356	•••••	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Executive Sa	ation / Job title (See Instructions) les	Employer (See In M & B Tools an	structions) d Equipment Inc.			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/01/2011	Contributor address; City; State; Zip Code 2007 Tangle Lake Dr. Kingwood, TX 77339-3357		\$10,000.00	 		
1							
L				<u> </u>	Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Shell Oil Compa				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/	13 Report: 5/21		
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Brown, Kyle	!)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/01/2011	6 Contributor address; City; State; Zip Code 38 Thornblade Circle The Woodlands, TX 77389		\$10,000.00	Texas, complete Schedule T)		
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Harris County S				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/08/2011	Contributor address; City; State; Zip Code 3040 Post Oak Blvd. Houston, TX 77056		\$5,000.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Partner/ Attor	nation / Job title (See Instructions) ney	Employer (See In Pavlas Brown	structions) & York L.L.P.			
	Date	Full name of contributor	,	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/13/2011	Contributor address; City; State; Zip Code 211 Asbury Street Houston, TX 77007-8103		\$1,000.00	! ! !		
		A' 6		(if travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	nation / Job title (See Instructions)	Employer (See In Office of the At	structions) torney General of	Texas		
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/29/2011	Contributor address; City; State; Zip Code 2910 Commercial Center Ste. 103-215 Katy, TX 77494		\$100.00	 		
			•	(if travel outside of	Texas, complete Schedule T)		
	Principal occup Director/ Pres	ation / Job title (See Instructions) sident	Employer (See In Control Works				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/21/2011	Contributor address; City; State; Zip Code 917 Main #401 Houston, TX 77002		\$50.00	 		
				(If travel outside o	f Texas, complete Schedule T)		
	Principal occup Homicide Inv	esticator	Employer (See In Houston Police		·		
	10111121010101111						

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 4/	13 Report: 6/21	
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT# 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Chapa, Tony		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/05/2011	6 Contributor address; City; State; Zip Code 4520 Hazard Street Houston, TX 77098		\$100.00	Texas, complete Schedule T)	
9	Principal occup Retired	eation / Job title (See Instructions)	10 Employer (See In Retired			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/19/2011	Contributor address; City; State; Zip Code 2244 Robinhood Street Houston, TX 77005		\$1,000.00	[
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Self employed	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable) Electronic Media	
	12/22/2011	Contributor address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046		\$150.00	Production	
				(16.4)	Tours commisse Bakedula T\	
	Principal occur	pation / Job title (See Instructions)	Employer (See In	1	Texas, complete Schedule T)	
	PAC	auon 7 Job fille (See Instructions)	PAC	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/16/2011	Contributor address; City; State; Zip Code PO Box 2294 Austin, TX 78768		\$100.00	 -	
		Additi, 17/15/00		(If travel outside of	Texas, complete Schedule T)	
├─	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Total Company Company	
		gislative Affairs	Texas Municipa	al Police Associati	on PAC	
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/02/2011	Contributor address; City; State; Zip Code 18411 Marlin Waters Humble, TX 77346		\$100.00	I []	
		•		(If travel outside of	Texas, complete Schedule T)	
		pation / Job title (See Instructions)	Employer (See In			
	Retired		Houston Police	Department		

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 5/	13 Report: 7/21		
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT# 12000000	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Crowley, James)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/05/2011	6 Contributor address; City; State; Zip Code 4410 Texas Trail Sugar Land, TX 77479		\$100.00	Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Self-employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Darby, Robert Darin		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/19/2011	Contributor address; City; State; Zip Code 18131 Brookes Bend Houston, TX 77094		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occur	eation / Job title (See Instructions)	Employer (See In				
		princy General		al of Texas Office			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/14/2011	Contributor address; City; State; Zip Code 5535 Memorial Drive Suite F204 Houston, TX 77007		\$500.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Inspector Ger	eation / Job title (See Instructions) neral	Employer (See In City of Houston				
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/01/2011	Contributor address; City; State; Zip Code 2817 Tangley Road Houston, TX 77005		\$100.00	 		
ļ				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Accountant	pation / Job title (See Instructions)	Employer (See In Self-employed	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/21/2011	Contributor address; City; State; Zip Code 9715 Stonecross Bend Drive Houston, TX 77070		\$250.00	i 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Physician	Dation / Job title (See Instructions)	Employer (See In Texas Orthopae				
1					· · · · · · · · · · · · · · · · · · ·		

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 6/	13 Report: 8/21	
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Fowler, Melissa	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/13/2011	6 Contributor address; City; State; Zip Code 14711 Treborway Drive Houston, TX 77014-1128		\$100.00	Texas, complete Schedule T)	
9	Principal occup Legal researc	ation / Job title (See Instructions) h	10 Employer (See In Self-employed	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Freeman, Debra S.)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/22/2011	Contributor address; City; State; Zip Code 5316 Chocolate Bayou Dr. Manvel, TX 77578		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Best efforts	ation / Job title (See Instructions)	Employer (See In Best Efforts	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Frels, Jack C.)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/11/2011	Contributor address; City; State; Zip Code 566 Bomar Street Houston, TX 77006		\$500.00	 	
			,	(if travel outside of	Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In U.S. Departmer			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/13/2011	Contributor address; City; State; Zip Code 1110 Sealy Galveston, TX 77550		\$1,000.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Self-empoyed	·	70.00,0011/01.00	
	Date	Full name of contributor	, , , , , , , , , , , , , , , , , , , 	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/19/2011	Contributor address; City; State; Zip Code 10315 Windriver Drive Houston, TX 77070		\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Homemaker	pation / Job title (See Instructions)	Employer (See In Homemaker	structions)		

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 7/	13 Report: 9/21	
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gotschall, Glenn E.)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/08/2011	6 Contributor address; City; State; Zip Code 5418 Valkeith Drive Houston, TX 77096-4036		\$150.00	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Self-employed	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Graham, H.E. Bert)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/29/2011	Contributor address; City; State; Zip Code 6635 Edloe Houston, TX 77005		\$10,000.00	 	
ł				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/22/2011	Contributor address; City; State; Zip Code 1751 Norfolk St Houston, TX 77098		\$2,000.00	 	
				(if travel outside of	f Texas, complete Schedule T)	
		Dation / Job title (See Instructions)	Employer (See In	structions)		
	Attorney		Absolute Lendi	ng Inc.		
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/11/2011	Contributor address; City; State; Zip Code 321 Rolling Hills W. Conroe, TX 77304-1280		\$100.00	[]	
				/if travel outside o	f Texas, complete Schedule T)	
	Principal occup Retired	Dation / Job title (See Instructions)	Employer (See In Retired	<u> </u>	, , , , , , , , , , , , , , , , , , ,	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/15/2011	Contributor address; City; State; Zip Code 4807 Kirby Dr Houston, TX 77098		\$500.00	 	
		•		(if travel outside o	f Texas, complete Schedule T)	
	Principal occup	Dation / Job title (See Instructions)	Employer (See In	nstructions)		
	Auto Dealer	•	River Oaks Chr	ysler/Plymouth/Je	eep/Eagle	

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 8/1	3 Report: 10/21	
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Holmes Jr, John B.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/30/2011	6 Contributor address; City; State; Zip Code PO Box 19 Kinney, TX 77452		\$10,000.00	Texas, complete Schedule T)	
					rexas, complete ochedule i)	
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Isbell, J. J.)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/13/2011	Contributor address; City; State; Zip Code P.O.Box 5339		\$1,000.00	<u> </u>	
		Pasadena, TX 77508-5339				
				(if travel outside of	Texas, complete Schedule T)	
.	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	President		Texas TransEa	stern		
\vdash	Date	Full name of contributor ut-of-state PAC (ID#		Amount of	In-kind contribution	
	Date	Knapp, William M.		contribution (\$)	description (if applicable)	
	12/06/2011	Contributor address; City; State; Zip Code 3814 Almond Creek Dr. Houston, TX 77059-3702		\$5,000.00	 	
		nousion, 1X 77059-3702		(If travel outside of	l Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In			
	Mortgage Bai	nker	Some Trust Mo	rtgage Co.		
	Date	Full name of contributor	1	Amount of	In-kind contribution	
	,,,,,	Langford, Charles R.		contribution (\$)	description (if applicable)	
	12/13/2011	Contributor address; City; State; Zip Code		\$1,000.00		
Į		Houston, TX 77062				
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Sales	ation / Job title (See Instructions)	Employer (See In Spectrum Meta			
	Date	Full name of contributor	١	Amount of	In-kind contribution	
	Bulc	Looper, Don	/	contribution (\$)	description (if applicable)	
	12/21/2011	Contributor address; City; State; Zip Code 1300 Post Oak Boulevard Suite 200 Houston, TX 77056-8000		\$500.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occur	pation / Job title (See Instructions)	Employer (See In			
	Partner/Attori		Looper Reed &			

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 9/1	13 Report: 11/21		
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Lunceford, Erin)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/29/2011	6 Contributor address; City; State; Zip Code 2211 Norfolk Suite 1150 Houston, TX 77401		\$100.00	Taxes, complete Schedule T)		
-	Principal accura	eation / Job title (See Instructions)	10 Employer (See In				
, s	Attorney		Sprott Rigby N	lewsom Robbins			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/30/2011	Contributor address; City; State; Zip Code 18022 Sheldon Pines		\$1,000.00	 		
		Spring, TX 77379			I		
_				V	Texas, complete Schedule T)		
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Self-employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Mehl, Eric S.	,	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/06/2011	Contributor address; City; State; Zip Code 26110 Savory Springs Ln Katy, TX 77494		\$300.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Houston Police				
	Date	Full name of contributor	()	Amount of	In-kind contribution		
		Merrill, Cindy and Stan		contribution (\$)	description (if applicable)		
	12/06/2011	Contributor address; City; State; Zip Code 4401 Acacla Street Bellaire, TX 77401		\$500.00	 		
<u> </u>	Date of the Land	option / los title (Con land)	Empleyee (O	 	Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	istructions)			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/02/2011	Contributor address; City; State; Zip Code 3520 University Blvd Houston, TX 77005		\$100.00	1 		
		*		(If troval autable of	Texas, complete Schedule T)		
_	Principal control	pation / Job title (See Instructions)	Employer (See In	<u> </u>	- 19709 combiate Schedule ()		
	Attorney	salions and the the management	U.S. Departmen				

TDD 1-800-735-2989 SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

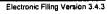
	The Instruction	Guide explains how to complete this form.		1 PAGE# Schedule: 10	/13 Report: 12/21	
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/21/2011	6 Contributor address; City; State; Zip Code 3700 North Main Houston, TX 77009		\$500.00	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Self-employed	structions)		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/07/2011	Contributor address; City; State; Zip Code 721 Skyline Bluff Court Fort Worth, TX 76102		\$250.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Assistant City	etion / Job title (See Instructions) Attorney	Employer (See In City of Grand P	structions) rairie		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/01/2011	Contributor address; City; State; Zip Code 3419 Gillespie Houston, TX 77020		\$500.00	1 	
					Texas, complete Schedule T)	
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Law Offices of I	structions) Murray Newman		
	Date	Full name of contributor ut-of-state PAC (ID# O'Briant, Sheryl	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/19/2011	Contributor address; City; State; Zip Code 10370 Richmond Avenue # 1350 Houston, TX 77042-4141		\$100.00	! ! !	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Thamm & O'Bri	istructions) iant LLP		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/30/2011	Contributor address; City; State; Zip Code RR 1 Box 2959 Dora, MO 65637		\$500.00	! 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	istructions)		

P.O.Box 12070

	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 11	/13 Report: 13/21
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Oden, D. Keith)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
i i	12/20/2011	6 Contributor address; City; State; Zip Code Three Greenway Plaza Suite 1300 Houston, TX 77046		\$10,000.00	Texas, complete Schedule T)
9	Principal occup President	ation / Job title (See Instructions)	10 Employer (See In Camden Proper		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/07/2011	Contributor address; City; State; Zip Code 16921 Larkspur Court Conroe, TX 77385		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/06/2011	Contributor address; City; State; Zip Code 6307 Stoney Creek Dr. Pasadena, TX 77503		\$50.00	
	D-111	Allow Light Allow (One Instructions)	E-view (Pop to	L '	Texas, complete Schedule T)
	Realtor	eation / Job title (See Instructions)	Employer (See In Realty Associat		
	Date	Full name of contributor	<u>‡</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2011	Contributor address; City; State; Zip Code 705 Antelope Cove Cedar Park, TX 78613		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Assistant Dis	pation / Job title (See Instructions) trict Attorney	Employer (See In Williamson Cou	estructions) inty District Attorn	ey's Office
	Date	Full name of contributor ut-of-state PAC (ID) Tandy, Michael E.	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/13/2011	Contributor address; City; State; Zip Code 8606 Ballinger Houston, TX 77064		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Department of I		

	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	/13 Report: 14/21
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Tanner, Allen Mark)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/11/2011	6 Contributor address; City; State; Zip Code 917 Franklin Street Suite 550 Houston, TX 77002-1741		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Law Office of Al		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/19/2011	Contributor address; City; State; Zip Code 10370 Richmond Avenue # 1350 Houston, TX 77042-4141		\$500.00	
					'
	.=			'	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Thamm & O'bria		
	Date	Full name of contributor ut-of-state PAC (ID# Vail, Sandra		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/31/2011	Contributor address; City; State; Zip Code 2306 Oak Links Ave Houston, TX 77059		\$1,000.00	
					Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Homemaker	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Williams, Kathy)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/13/2011	Contributor address; City; State; Zip Code 2709 Blodgett Houston, TX 77004		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In Midtown EMS		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2011	Contributor address; City; State; Zip Code 87 Litchfield Ln. Houston, TX 77024		\$500.00	! !
				(if travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) nent Instructor	Employer (See In Self-employed	L '	, , , , , , , , , , , , , , , , , , , ,
_					

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 1	3/13 Report: 15/21
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Wilson, Michael D.)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/13/2011	6 Contributor address; City; State; Zip Code 16214 Deer Crest San Antonio, TX 78248		\$100.00	Taxas, complete Schedule T)
9		naging Director	10 Employer (See In Integrity Partne		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/15/2011	Contributor address; City; State; Zip Code 121 N. Post Oak Ln #2002 Houston, TX 77024		\$1,000.00	; []
				(If travel outside o	f Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self-employed	structions)	



SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District

Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	Printing Expense Office Overhead/Re The Instruction Guide explains how t	,	er a category not listed above)
1 PAGE#	2 FILER NAME	e veripiete tina territ	3 ACCOUNT # (TEC filers)
Schedule: 1/6 Re	There is a second of the control of		12000000
4 Date	5 Payee name		12000000
12/01/2011	Blakemore & Associates		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$1,500.00	1 E Greenway Plaza Ste 225		
Ψ1,500.50	Houston, TX 77046		
8	(a) Category (See Categories listed at the top of this schedule)	1 1	de of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Web Development	
EXPENDITURE			
O Complete CNI M 3	Candidate / Officeholder name	Office sought:	Office held:
9 Complete ONLY if direct expenditure	Candidate / Officenoider name	Office sought.	Office field.
to benefit C/OH			
Date	Payee name		
12/01/2011	Blakemore & Associates		
Amount (\$)	Payee address City; State; Zip Code		
\$7,500.00	1 E Greenway Plaza Ste 225		
	Houston, TX 77046		
		Description (Manual subst	de at Terres and the Cohodula T\
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outsi	de of Texas, complete Schedule T)
OF	Consularing Expense	Consulting 1 003	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
12/09/2011	Blakemore & Associates		
Amount (\$)	Payee address City; State; Zip Code	 	
\$250.00	1 E Greenway Plaza Ste 225		
\$250.00	Houston, TX 77046		
	Category (See Categories listed at the top of this schedule)		de of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Web & Email Hosting	
EXPENDITURE			
0	Contidate 1055 and alder a con-	Office squabt:	Office held:
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office field.
to benefit C/OH			
Date	Payee name		
11/29/2011	Harris County Republican Party		
Amount (\$)	Payee address City; State; Zip Code		
\$1,250.00	3311 Richmond Suite 218		
	Houston, TX 77098		
	Category (See Categories listed at the top of this schedula)	Description (If travel outsi	de of Texas, complete Schedule T)
PURPOSE	Fees	Filing Fees	ac or roxas, complete consesse 1)
OF EXPENDITURE			
EAFERDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			

SCHEDULE F

(512)463-5800 TDD 1-800-735-2989

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/Rer The INSTRUCTION GUIDE explains how to	
1 PAGE#		3 ACCOUNT # (TEC filers)
Schedule: 2/6 Re	Friends of Miles Andress	12000000
4 Date	5 Payee name	1233333
12/08/2011	Industrial Tape and Label	Y Control of the Cont
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$303.75	7028 Burkett	
*	Houston, TX 77021	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Logoed Promotional Items
OF	Advertising Expense	Logoed Fornotional Rems
EXPENDITURE		
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/21/2011	Minuteman Press - Post Oak	
Amount (\$)	Payee address City; State; Zip Code	
\$582.56	4212 San Felipe Rd PMB 386 Houston, TX 77027	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Courier & Delivery Charges
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Obridiate / Onicoroladi Hamo	Cina dolym.
to benefit C/OH		
Date 12/24/2014	Payee name Minuteman Press - Post Oak	•
12/21/2011 Amount (\$)	Payee address City; State; Zip Code	
	4212 San Felipe Rd PMB 386	
\$2,474.66	Houston, TX 77027	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Solicitation/Fundraising Expense	Invitations
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/01/2011	Moniker.com	
Amount (\$)	Payee address City; State; Zip Code	
\$50.56	20 SW 27th Ave	
	Suite 201 Pompano Beach, FL 33069	
		Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Web & Email Hosting
OF EXPENDITURE		
EXPERDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

Prise
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel in District
Travel Out of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Fees	Printing Expense Office Overhead/Re The Instruction Guide explains how	1 - 1
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 3/6 Re	Trionado of Miles Amelono on	12000000
4 Date	5 Payee name	1200000
12/01/2011	Pat's Keypunch Service	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$325.04	7307 Sawmill Trail	
V 00.10	Houston, TX 77040	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Salaries/Wages/Contract Labor	Contract Labor
EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
	_	
Date	Payee name Piryx	
12/05/2011 Amount (\$)	Payee address City; State; Zip Code	
\$22.50	144 2nd St. 1st Floor	
\$22.5U	San Francisco, CA 94105	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	Merchant Account Fees
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Garididate / Grisconologi Harrio	Ombo dought.
to benefit C/OH		
Date	Payee name	
12/06/2011	Piryx Payee address City; State; Zip Code	
Amount (\$)		
\$31.50	San Francisco, CA 94105	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	Merchant Account Fees
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	California of Fill College File File File File File File File Fil	Onios soughi.
to benefit C/OH		
Date	Payee name	
12/07/2011	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$18.00	144 2nd St. 1st Floor San Francisco, CA 94105	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	Merchant Account Fees
EXPENDITURE	▼	
Complete Chill St V	Condidate / Officeholder name	Office sought: Office held:
Complete ONLY if direct expenditure	Candidate / Officeholder name	Onice sought. Onice neid:
to benefit C/OH		

Page - 20

POLITICAL EXPENDITURES

EXPENDITURE CATEGORIES

Gifts/Awards/Memorial Expense Salaries/Wages/Contract La
Legal Services Solicitation/Fundraising Exp
Food/Beverage Expense Travel In District

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees
Fees
Cifts/Awards/Memorial Exp
Legal Services
Food/Baverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

Event Expense Fees	Polling Expense Travel Out Of District Printing Expense Office Overhead/Re The Instruction Guide explains how to	ntal Expense OTHER (ente	/Officeholder/Political Committee ir a category not listed above)
1 PAGE#	2 FILER NAME	,,,,,, v	3 ACCOUNT # (TEC filers)
Schedule: 4/6 Re	eport: 19/21 Friends of Mike Anderson		12000000
4 Date 12/08/2011	5 Payee name Piryx		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$45.00	144 2nd St. 1st Floor San Francisco, CA 94105		
8	(a) Category (See Categories listed at the top of this schedule)	1	e of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	Merchant Account Fees	
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
12/09/2011	Piryx		
Amount (\$)	Payee address City; State; Zip Code		
\$24.75	144 2nd St. 1st Floor		
	San Francisco, CA 94105		
Ì			
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	Merchant Account Fees	•
EXPENDITURE			
		<u> </u>	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
12/12/2011	Piryx		
Amount (\$)	Payee address City; State; Zip Code		
\$33.75	144 2nd St. 1st Floor		
\$33.73	San Francisco, CA 94105		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	e of Texas, complete Schedule T)
PURPOSE	Accounting/Banking	Merchant Account Fees	_
OF EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
12/13/2011	Piryx	0	
Amount (\$)	Payee address City; State; Zip Code		
, ,	144 2nd St. 1st Floor		
\$4.50	San Francisco, CA 94105		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside	le of Texas, complete Schedule T)
PURPOSE	Accounting/Banking	Merchant Account Fees	
OF EXPENDITURE			
270 270110112			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			

Advertising Expense Accounting/Banking Consulting Expense **Event Expense**

EXPENDITURE

Complete ONLY if

direct expenditure to penefit C/OH

EXPENDITURE

Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

Candidate / Officeholder name

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officaholder/Political Committee OTHER (enter a category not listed above)

Office held:

Office sought:

The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Friends of Mike Anderson 12000000 Schedule: 5/6 Report: 20/21 4 Date 5 Payee name Piryx 12/16/2011 Amount (\$) Payee address City: State: Zip Code 144 2nd St. 1st Floor \$4.50 San Francisco, CA 94105 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Accounting/Banking Merchant Account Fees OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Piryx 12/21/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$40.50 San Francisco, CA 94105 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Merchant Account Fees Accounting/Banking OF

Date	Payee name	
12/27/2011	Piryx	
Amount (\$)	Payee address City: State; Zip Code	
\$13.50	144 2nd St. 1st Floor San Francisco, CA 94105	
PURPOSE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) Merchant Account Fees

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/31/2011	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Co	de	
\$4.50	144 2nd St. 1st Floor San Francisco, CA 94105		

	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Accounting/Banking	Merchant Account Fees
OF EXPENDITURE		

Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officabolds/Political Committee

Event Expense Fees	Polling Expense Travel Out Of District Printing Expense Office Overhead/Rer The Instruction Guide explains how to	ntal Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 6/6 Re	port: 21/21 Friends of Mike Anderson	12000000
4 Date	5 Payee name	
12/08/2011	Rapid Delivery	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$22.74	PO Box 79673 Houston, TX 77279	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (if travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Courier & Delivery Charges
EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Ciliceriologi Hame	Office sought.
Date 12/01/2011	Payee name Sandy King Lankford Photography	
Amount (\$)	Payee address City; State; Zip Code	
\$439.43	2610 Pittsburg	
	Houston, TX 77005	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Advertising Expense	Photography
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/08/2011	The What's Up Program	<u> </u>
Amount (\$)	Payee address City; State; Zip Code	
\$1,500.00	12615 Jones Rd Ste 103 Houston, TX 77070	
BUBBBBB	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Electronic Media Placement Radio
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/08/2011	Tribe Design	
Amount (\$)	Payee address City; State; Zip Code	
\$324.75	PO Box 52683	
	Houston, TX 77052	
	Catagory (See Catagories listed at the tag of this school (see	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Print Advertising Design
OF		
EXPENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held: