



Official Public Records of **Harris County Stan Stanart County Clerk**

Campaign Finance Report



COUNTY CLERK HARRIS COUNTY, TEXAS

FileNo:

2012369

Received By Clerk: 5/21/2012

File Date:

5/21/2012 5:20:31 PM

Office:

Specific-Purpose Committee

Candidate:

Friends of Mike Anderson

Treasurer:

Lucke, David

Category:

Contributions And Expenditures

Delivered By:

Courier

Type:

COR

Harris County No Fee

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#	
3	COMMITTEE NAME					OFFICE U	SE ONLY
	Friends of Mike Anders	on			ŀ	Date Received	
						Daily Hocalifoo	
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;		CITY; STATE; ZIP	CODE		
	Change of Address	1 E Greenway Plaza Ste 225 Houston, TX 77046				Date Hand-delivered or	
5	CAMPAIGN	MS/MRS/MR FIRST David		MI		Receipt #	Amount
	TREASURER NAME	David				Date Processed	
		NICKNAME LAST		SU	IFFIX		
		Lucke				Date (maged	
6	CAMPAICN	STREET ADDRESS (NO PO BOX PLEASE):	APT	T/SUITE#; CITY; ST	ATE;	ZIP CODE	
O	CAMPAIGN TREASURER'S STREET ADDRESS	·					
	(Residence or business)	1 E Greenway Plaza Ste 225 Houston, TX 77046					
			74				
7	CAMPAIGN TREASURER'S	STREET OR PO BOX;	APT	r/SUITE#; CITY; ST	ATE;	ZIP CODE	
	MAILING ADDRESS	1 E Greenway Plaza Ste 225					
	Change of Address	Houston, TX 77046					
						_	
8	CAMPAIGN	AREA CODE PHONE NUMBE	R	EXTENSION			
	TREASURER PHONE	(713) 526-3399					
9	REPORT TYPE	January 15		30th day before election		Exceeded \$5	00 limit
		July 15		X 8th day before election			ttach PAC-DR)
				Runoff		10th day after treasurer termin	r campaign ation
10	PERIOD COVERED	Month Day Ye	18			Month Day	Year
		04/20/2012		THROUGH		05/19/2	N12
		04/20/2012		1111100011			012
11	ELECTION	ELECTION DATE Month Day Year	ELECT	TION TYPE			
		05/29/2012	X	Primary Runoff		General	Special .
		· · · · · · · · · · · · · · · · · · ·					
	GO TO PAGE 2						

FORM SPAC **SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE & TOTALS** COVER SHEET PG 2

12 COMMITTEE Frie	ends of Mike And	erson	ACCOUNT # (Ethics Commission filers) 12000000	
13 COMMITTEE PURPOSE	CANDIDATE	CANDIDATE / OFFICEHOLDER NAME Mike Anderson		
(Attach lists on plain paper to complete this report if necessary.)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeho	older)	
SUPPORT (Candidate or Measure)			TION DATE Day Year	
(Candidate or Measure) ASSIST (Officeholder only)	MEASURE	DESCRIPTION		
14 CONTRIBUTION TOTALS	1. TOTAL P PLEDGE	OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 1,115.89	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 153,343.63	
EXPENDITURE TOTALS	3. TOTAL P	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$ 0.00	
	4. TOTAL F	POLITICAL EXPENDITURES	\$ 265,589.96	
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 20,46			\$ 20,463.44	
OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD				
15 AFFIDAVIT	unin.			

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said PAVIO LUCKE

, this the

20 12 , to certify which, witness my hand and seal of office.

Signature of officer administering oath

ALLEN E. BLAKINORY Print name of officer administering oath your

Title of officer administering oath

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 1/2	9 Report: 3/47		
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# A Mobile Bail Bond Service)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/03/2012	6 Contributor address; City; State; Zip Code 9219 Katy Freeway Ste. 140 Houston, TX 77024		\$200.00	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/18/2012	Contributor address; City; State; Zip Code 700 Louisiana, Suite 4000 Houston, TX 77002		\$500.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Blank Rome LL				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 1018 Preston Suite 200 Houston, TX 77002		\$500.00	 		
				,	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Stradley Chern	structions) off & Alford			
	Date	Full name of contributor ut-of-state PAC (ID# Assaad, Kristin)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/08/2012	Contributor address; City; State; Zip Code 4204 Bissonnet St. Houston, TX 77005		\$100.00	 		
			, 	*	Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Assaad Law	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/18/2012	Contributor address; City; State; Zip Code 5207 Locust Street Bellaire, TX 77401		\$100.00	! ! 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup		Employer (See In				

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The INSTRUCTION	Guide explains how to complete this form.		1 PAGE # Schedule: 2/	29 Report: 4/47			
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# Aungier, Pat)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	05/10/2012	6 Contributor address; City; State; Zip Code 3915 Ruskin Street Houston, TX 77005		\$250.00	Texas, complete Schedule T)			
9	Principal occup Business Ow	ation / Job title (See Instructions) ner	10 Employer (See In Incredible Inves					
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/19/2012	Contributor address; City; State; Zip Code 1600 Augusta, Apt. 438 Houston, TX 77057		\$100.00	i 1 I			
				(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)			
	05/18/2012	Contributor address; City; State; Zip Code 1600 Smith Street Houston, TX 77002		\$500.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Managing Pa	eation / Job title (See Instructions) rtner	Employer (See In Gb-1 Partners (
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/30/2012	Contributor address; Clty; State; Zip Code 1002 N. San Jacinto Houston, TX 77002		\$500.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Bondsman	pation / Job title (See Instructions)	Employer (See In Blackwood Hou	structions) iston Bail Bonds				
	Date	Full name of contributor	<u>*)</u>	Amount of contribution (\$)	In-kind contribution description (If applicable)			
	04/26/2012	Contributor address; City; State; Zip Code 24 Waterway Ave Ste 660 The Woodlands, TX 77381		\$1,000.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self-employed	structions)				

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 3/2	29 Report: 5/47		
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# Bradley, Robert	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/26/2012	6 Contributor address; City; State; Zip Code 1107 N. Nottingham League City, TX 77573		\$100.00	Texas, complete Schedule T)		
9	Principal occup Apprentice El	ation / Job title (See Instructions) ectrician	10 Employer (See In Self-employed	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 2218 Willowby Houston, TX 77008		\$300.00	 		
				· '	Texas, complete Schedule T)		
	Principal occup Administration	ation / Job title (See Instructions) า	Employer (See In St. Andrews Pro	structions) esbyterian Church)		
	Date	Full name of contributor ut-of-state PAC (ID# Brown, Kyle)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/14/2012	Contributor address; City; State; Zip Code 38 Thornblade Circle The Woodlands, TX 77389		\$1,469.70	 		
				(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)		
	05/03/2012	Contributor address; City; State; Zlp Code P.O. Box 890065 Houston, TX 77289	,	\$100.00	 		
				(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 ut-of-state PAC (ID# Burman, Darryl	;	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/01/2012	Contributor address; Clty; State; Zip Code 800 Gessner Suite 500 Houston, TX 77024		\$250.00	 		
L				(if travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) nt & General Counsel	Employer (See In Group 1 Autom		-		

<u> </u>								
	The Instruction	א Guide explains how to complete this form.		1 PAGE# Schedule: 4/2	29 Report: 6/47			
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# Cameron, Donna)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	05/09/2012	6 Contributor address; City; State; Zip Code 14502 Juniper Forest Houston, TX 77062		\$100.00	Texas, complete Schedule T)			
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Donna Walker (
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/08/2012	Contributor address; City; State; Zip Code Three Greenway Plaza Suite 1300 Houston, TX 77046-0391		\$1,000.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Executive	pation / Job title (See Instructions)	Employer (See In Carnden Prope					
!	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/26/2012	Contributor address; City; State; Zip Code 2910 Commercial Center Ste. 103-215 Katy, TX 77494		\$500.00	 			
	Principal occup Director/ Pres	etion / Job title (See Instructions) sident	Employer (See In Control Works	•				
	Date	Full name of contributor ut-of-state PAC (ID# Capitol Bail Bonds	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/03/2012	Contributor address; City; State; Zip Code 607 Houston Ave Houston, TX 77007		\$200.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	in-kind contribution description (if applicable)			
	04/26/2012	Contributor address; City; State; Zip Code 917 Main #401 Houston, TX 77002		\$500.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
Г	Principal occup Homicide Inv	estigator	Employer (See In Houston Police					

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
					29 Report: 7/47
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT#	(Ethics Commission filers)
				12000000	
4	Date	5 Full name of contributor out-of-state PAC (ID# Childers, Kathryn Stasney	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2012	6 Contributor address; City; State; Zip Code 2244 Robinhood Street Houston, TX 77005		\$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 ut-of-state PAC (ID/	1	Amount of	In-kind contribution
	Date	Clinton, Dorothy		contribution (\$)	description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 5915 Inway		\$5,000.00	
		Spring, TX 77389			1
ļ				(If travel outside of	Texas, complete Schedule T)
H	, ,	pation / Job title (See Instructions)	Employer (See In	structions)	
	Retired		Retired		
	Date	Full name of contributor ut-of-state PAC (ID)		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/03/2012	Contributor address; City; State; Zip Code 407 Fannin Street Tomball, TX 77375		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
Γ	•	pation / Job title (See Instructions)	Employer (See In		
L	Bondsman		A Professional	Bondsman	
	Date	Full name of contributor ut-of-state PAC (ID: Cogdell Law Firm PLLC	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/07/2012	Contributor address; City; State; Zip Code 402 Main Street 2nd Floor Houston, TX 77002		\$5,000.00	
ļ				(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In		<u> </u>
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/17/2012	Contributor address; City; State; Zip Code 502 East 11th Street Austin, TX 78701		\$1,000.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See Ir	nstructions)	<u> </u>

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 6/2	29 Report: 8/47		
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# Conservative Republicans of Harris County)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) Print Advertising Design		
	05/07/2012	6 Contributor address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046		\$1,515.50	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable) Voter Contact Mail		
	05/08/2012	Contributor address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046		\$3,724.66	, 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor out-of-state PAC (ID# Conservative Republicans of Harris County		Amount of contribution (\$)	In-kind contribution description (if applicable) Voter Contact Mail		
	05/11/2012	Contributor address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046		\$13,614.30	! 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
i	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable) Voter Contact Mail		
	05/11/2012	Contributor address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046		\$19,064.71	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In				
—	Date	Full name of contribute		Amount of	In-kind contribution		
	Date	Full name of contributor	·	Amount of contribution (\$)	description (if applicable) Voter Contact Mail		
	05/14/2012	Contributor address; City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046		\$7,439.99	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	Dation / Job title (See Instructions)	Employer (See In	<u> </u>			

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	พ Guide explains how to complete this form.		1 PAGE # Schedule: 7/2	29 Report: 9/47		
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# Cookson, Cassandra)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/26/2012	6 Contributor address; City; State; Zip Code 14906 Tallow Forest Ct Houston, TX 77062		\$100.00	Texas, complete Schedule T)		
9	Principal occup Professor	ation / Job title (See Instructions)	10 Employer (See In Lee College	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019		\$500.00	[]]		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Cornelius and S				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019		\$250.00	 		
ļ				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Lawyer	ation / Job title (See Instructions)	Employer (See In Cornelius & Sa				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/03/2012	Contributor address; City; State; Zip Code 2506 Deep Oak Ct. Houston, TX 77059		\$250.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Business Ow	pation / Job title (See Instructions) ner	Employer (See In Self-employed	estructions)			
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/01/2012	Contributor address; City; State; Zip Code 5119 Turnberry Ct. Rasadena, TX 77505	••••	\$250.00	 		
				J	Texas, complete Schedule T)		
	Principal occup Office Manag	pation / Job title (See Instructions) per	Employer (See In Spectrum Meta				

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/2	29 Report: 10/47			
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# Crocker, Harold)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	04/30/2012	6 Contributor address; City; State; Zip Code 18411 Marlin Waters Humble, TX 77346		\$100.00	Texas, complete Schedule T)			
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# Crowley, James	,	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/16/2012	Contributor address; City; State; Zip Code 4410 Texas Trail Sugar Land, TX 77479		\$100.00	l 			
	:			(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)			
	05/19/2012	Contributor address; City; State; Zip Code 1129 A Herkimer Houston, TX 77008		\$500.00	 			
					Taxas, complete Schedule T)			
	Principal occup Clinical Nurse	eation / Job title (See Instructions) Coordinator	Employer (See In UT- Physicians	structions)				
	Date	Full name of contributor ut-of-state PAC (ID)	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/09/2012	Contributor address; City; State; Zip Code 3802 Overbrook Houston, TX 77027		\$250.00	! 1 !			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Vice Presider	nation / Job title (See Instructions)	Employer (See In Davis Holdings					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/18/2012	Contributor address; City; State; Zip Code 5736 Longmont Ln. Houston, TX 77057	.,	\$200.00	1]]			
				(If travel outside of	Texas, complete Schedule T)			
		pation / Job title (See Instructions)	Employer (See In	structions)				
	Owner of Car	Washes	Bobbles Enterp	nses, Ltd.				

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 9/2	29 Report: 11/47			
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) Delongchamps, Pete)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	05/14/2012	6 Contributor address; City; State; Zip Code 11922 Musket Ln Houston, TX 77024-5073		\$500.00	Texas, complete Schedule T)			
9	Principal occup Vice Presider	ation / Job title (See Instructions) t	10 Employer (See In Group 1 Autom					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/23/2012	Contributor address; City; State; Zip Code 2903 Burlwood Drive Arlington, TX 76016		\$500.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Combined Law		ociations of Texas			
	Date	Full name of contributor ut-of-state PAC (ID: Fore, Tom		Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/30/2012	Contributor address; City; State; Zip Code 1410 Aldrich Houston, TX 77055		\$500.00	 			
	1			(If travel outside of	Texas, complete Schedule T)			
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Bubba's Sports					
	Date	Full name of contributor Out-of-state PAC (ID: Frels, Jack C.	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/30/2012	Contributor address; City; State; Zip Code 566 Bornar 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 Retired	structions)				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	05/08/2012	Contributor address; City; State; Zip Code PO Box 219169 Houston, TX 77217		\$500.00	i 1 1			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup CFO	Dation / Job title (See Instructions)	Employer (See In Star Furniture	<u> </u>				
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	The Instruction	พ Guide explains how to comp	plete this form.		1 PAGE# Schedule: 10	/29 Report: 12/47	
2	FILER NAME	Friends of Mike Anderson			3 ACCOUNT# 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor Goodhart, Craig	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/26/2012	6 Contributor address; (13642 Barryknoll Ln Houston, TX 77079-5928	City; State; Zip Code		\$1,000.00	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instructions	3)	10 Employer (See In Self-employed	structions)		
	Date	Full name of contributor Goodwin, Lincoln	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/17/2012	Contributor address; (9722 Blue Cruls Way Spring, TX 77379	City; State; Zip Code		\$200.00	 	
					(if travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	ation / Job title (See Instructions	3)	Employer (See In The Lanier Law			
	Date	Full name of contributor Gotschall, Glenn E.	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
1	04/26/2012	Contributor address; (5418 Valkeith Drive Houston, TX 77096-4036	City; State; Zip Code		\$200.00	i Texas, complete Schedule T)	
<u> </u>		2 1 1 2 20 20		E1		Texas, complete schedule 1)	
	Attorney	eation / Job title (See Instructions	5)	Employer (See In Self-employed	structions)		
	Date	Full name of contributor Graff, Rhonda	out-of-state PAC (ID#	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/07/2012	Contributor address; 511 S. Post Oak Ln 6A Houston, TX 77056	City; State; Zip Code		\$100.00	 	
					(if travel outside of	Texas, complete Schedule T)	
		pation / Job title (See Instructions rogram Mgr/IE	8)	Employer (See In Retired	structions)		
	Date	Full name of contributor Graham, H.E. Bert	☐ out-of-state PAC (ID#	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/27/2012	Contributor address; 6635 Edioe Houston, TX 77005	City; State; Zip Code		\$7,000.00	! 	
					(If trave) outside of	Texas, complete Schedule T)	
	Principal occup Retired	I pation / Job title (See Instructions	s)	Employer (See In Retired	<u> </u>		
				i			

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 11	/29 Report: 13/47		
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# Grandmaison-Warren, Judy	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/03/2012	6 Contributor address; City; State; Zip Code 4803 Katy Freeway Houston, TX 77007		\$250.00	Texas, complete Schedule T)		
9	Principal occup Bail Bonsdma	ation / Job title (See Instructions) an	10 Employer (See In Access Bonding				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/14/2012	Contributor address; City; State; Zip Code 5847 San Felipe Suite 2949 Houston, TX 77057		\$2,500.00	 		
		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(if travel outside of	Texas, complete Schedule T)		
	Principal occup President	pation / Job title (See Instructions)	Employer (See In Kiwi Energy Ltd				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 626 W 19th Street Houston, TX 77008		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Harmon III, Frank	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/30/2012	Contributor address; City; State; Zip Code 2435 Delmonte Houston, TX 77019		\$100.00	1 		
				(If travel outside of	· f Texas, complete Schedule T)		
	Principal occup Attorney	petion / Job title (See Instructions)	Employer (See In Crain Caton &				
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/01/2012	Contributor address; City; State; Zip Code 1730 Jefferson St. Ste 217 Houston, TX 77003		\$2,000.00	[]		
				(if travel outside o	f Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			

	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 12	/29 Report: 14/47		
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# Helfman, Alan)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/20/2012	6 Contributor address; City; State; Zip Code 4807 Kirby Dr Houston, TX 77098		\$500.00	Texas, complete Schedule T)		
ø	Principal occup Auto Dealer	ation / Job title (See Instructions)	10 Employer (See In River Oaks Chr	structions) ysler/Plymouth/Je	ep/Eagle		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/27/2012	Contributor address; City; State; Zip Code 16927 Apple River Dr. Cypress, TX 77433		\$100.00	 		
				(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)		
	05/15/2012	Contributor address; City; State; Zip Code 15507 Oxenford Dr. Tomball, TX 77377		\$500.00	 		
					Texas, complete Schedule T)		
	Principal occup Retired	eation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Hesterberg, Earl	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/01/2012	Contributor address; City; State; Zip Code 800 Gessner Suite 500 Houston, TX 77024		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup President and	ation / Job title (See Instructions)	Employer (See In Group 1 Autom				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/01/2012	Contributor address; City; State; Zip Code 4646 Ingersoll Houston, TX 77057-6706		\$100.00	1 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)			
	Landman		Paloma Resour				

	The Instruction	พ Guide explains how to compl	lete this form.		1 PAGE# Schedule: 13	/29 Report: 15/47	
2	FILER NAME	Friends of Mike Anderson			3 ACCOUNT # 12000000	(Ethics Commission filers)	
4	Date	5 Full name of contributor [Hilder, Philip	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/26/2012	6 Contributor address; C 819 Lovett Blvd. Houston, TX 77010	city; State; Zip Code		\$500.00	Texas, complete Schedule T)	
9	Principal occup Attorney	ation / Job title (See Instructions))	10 Employer (See In: Hilder & Associa			
	Date	Full name of contributor [Hilyard, Alan	□ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/26/2012	Contributor address; C 639 Shartle Cir Houston, TX 77024	City; State; Zip Code		\$500.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup Co-Owner	ation / Job title (See Instructions		Employer (See In Southwest Proc			
	Date	Full name of contributor [Holmes, P. Mark	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/07/2012	Contributor address; C 1237 Archley Dr. Houston, TX 77055-6706	City; State; Zip Code		\$250.00	 	
	i				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Vice Presider	ation / Job title (See Instructions at & CEO)	Employer (See In Tri-C Resource			
	Date	Full name of contributor [Hooper, Karen	□ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/08/2012	Contributor address; C 3632 Timberside Circle Dr. Houston, TX 77025	City; State; Zip Code		\$150.00	[] !	
		Houses, Par Fraze			(If travel outside of	Texas, complete Schedule T)	
		ation / Job title (See Instructions oject Manager)	Employer (See In Kellogg Brown			
	Date	Full name of contributor 【 Houston Police Officers' Un	☐ out-of-state PAC (ID# ion PAC	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/30/2012	Contributor address; C 1900 North Akard Street Dallas, TX 75201-2300	City; State; Zip Code		\$16,500.00	1 1 1	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	l pation / Job title (See Instructions	5)	Employer (See In			

	The Instruction	N Guide explains how to com	plete this form.		1 PAGE# Schedule: 14	/29 Report: 16/47
2	FILER NAME	Friends of Mike Andersor)		3 ACCOUNT # 12000000	(Ethics Commission filers)
4	Date	5 Full name of contributor Isbell, Allen	□ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/30/2012	6 Contributor address; 202 Travis # 208 Houston, TX 77002	City; State; Zip Code		\$250.00	Texas, complete Schedule T)
9		ation / Job title (See Instruction	ns)	10 Employer (See In		
	Attorney			Isbell & Brass		
	Date	Full name of contributor luppenlatz, Mark	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/01/2012	Contributor address; 839 Rosastone Trl Houston, TX 77024	City; State; Zip Code		\$500.00	
		Housion, TATTOLY			Mit well autolds of	Tours assessed Sabadula T\
	Principal occur	etion / Job title (See Instruction	15)	Employer (See In		Texas, complete Schedule T)
	Vice Presider	nt		Group 1 Automo	otive	
	Date	Full name of contributor Jacobson, Kenneth	□ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (If applicable)
	05/17/2012	Contributor address; 2911 Conway Street Houston, TX 77025	City; State; Zlp Code		\$500.00	
				,	(if travel outside of	Texas, complete Schedule T)
	Principal occup Mortage Bani	eation / Job title (See Instruction Ker	ns)	Employer (See In Hometrust Mort		
	Date	Full name of contributor Jessup, Richard	Out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/07/2012	Contributor address; 2400 Westheimer Ste. 223E Houston, TX 77098	City; State; Zip Code	••••	\$100.00	!
ł					(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	pation / Job title (See Instruction	ns)	Employer (See In IHRDC	structions)	
	Date	Full name of contributor Johnson, Kyle	out-of-state PAC (IDa	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/30/2012	Contributor address; 929 Preston #200 Houston, TX 77002	City; State; Zip Code		\$100.00]
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructio	ns)	Employer (See In Self-employed	structions)	

	The instructio	on Guide explains how to complete this form.		1 PAGE# Schedule: 15/	/29 Report: 17/47		
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# Kamins, Duane	t)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/17/2012	6 Contributor address; City; State; Zip Code 111 Ferndale Street Bellaire, TX 77401			Texas, complete Schedule T)		
9	Principal occupa	ation / Job title (See Instructions)	10 Employer (See In Kamins Investm				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 2 Hilshire Oaks Ct Houston, TX 77055		\$500.00	 		
				L.'	Texas, complete Schedule T)		
	Principal occup Environmenta	ation / Job title (See Instructions) al Attorney	Employer (See In Law Offices of				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 600 Travis #7500 Houston, TX 77002		\$100.00	 - -		
L				'	Texas, complete Schedule T)		
	Principal occup Partner	pation / Job title (See Instructions)	Employer (See In McGuire Woods				
	Date	Full name of contributor ut-of-state PAC (ID# Keller, Albert P.	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/15/2012	Contributor address; City; State; Zip Code 5811 Indian Trail Houston, TX 77057-1306	, , , , , , , , , , , , , , , , , , , ,	\$1,000.00	1 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/24/2012	Contributor address; City; State; Zip Code 11943 Waldemar Drive Houston, TX 77077		\$500.00	 		
H	Principal accura	pation / Job title (See Instructions)	Employer (See In	<u> </u>			
	Landman	איניסיים אווים (ספס ווויסונוטטוטווס)	Conoco Phillips				

The Instruction Guide explains how to complete this	form.	1		29 Report: 18/47	
2 FILER NAME Friends of Mike Anderson		3	ACCOUNT # 12000000	(Ethics Commission filers)	
4 Date 5 Full name of contributor □ out-o Kimmons, Rob	f-state PAC (ID#		Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
05/03/2012 6 Contributor address; City; Sta 5906 Dolores Suite 225 Houston, TX 77057	ate; Zlp Code	(17	\$500.00 	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Private Investigator		Employer (See Instru Kimmons Investiga		nc.	
Date Full name of contributor ☐ out-o Knapp, William M.	f-state PAC (ID#) (Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/02/2012 Contributor address; City; Sta 3814 Almond Creek Dr. Houston, TX 77059-3702	ate; Zip Code		\$3,888.88 \$3,888.88		
		(1)	· f travel outside of]	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Mortgage Banker		Employer (See Instru Hometrust Mortgag	ictions)		
Date Full name of contributor out-o	f-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/26/2012 Contributor address; City; St 1433 Freedonia Drive Houston, TX 77055	ate; Zip Code		\$500.00 		
				Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Founder/ Owner		Employer (See Instru DBA Instant Video			
Kubosh, Felix	f-state PAC (ID#	,	Amount of contribution (\$)	In-kind contribution description (if applicable)	
05/03/2012 Contributor address; City; St 1701 Lubbock Houston, TX 77007	ate; Zip Code		\$500.00 		
		(11)	f travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instru Kubosh Bail Bondi			
Date Full name of contributor out-out-out-out-out-out-out-out-out-out-	f-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
04/26/2012 Contributor address; City; St 4236 Oberlin Houston, TX 77005	ate; Zip Code		\$250.00 		
		(1	f travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Owner/ President		Employer (See Instru Forrest Homes	uctions)		

	The Instruction	א Guide explains how to complete this form.		1 PAGE# Schedule: 17/	29 Report: 19/47		
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# Langford, Charles R.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/01/2012	6 Contributor address; City; State; Zip Code 1902 Tangle Pines Court Houston, TX 77062	(\$250.00	Texas, complete Schedule T)		
9	Principal occup Sales	ation / Job title (See Instructions)	10 Employer (See In Spectrum Metal				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/11/2012	Contributor address; City; State; Zlp Code 290 Wood Loop St. Houston, TX 77015-2048		\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Farmer	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)		
	04/30/2012	Contributor address; City; State; Zip Code 5302 La Branch Street Houston, TX 77004		\$100.00	 		
H	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	, <u> </u>		
				•			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/02/2012	Contributor address; City; State; Zip Code 808 Travis Street Ste 1101 Houston, TX 77002-5772		\$250.00	! 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/07/2012	Contributor address; City; State; Zip Code 16023 Rudgewick Lane Spring, TX 77379		\$500.00	 		
L				<u></u>	Texas, complete Schedule T)		
	Principal occup Chairman	pation / Job title (See Instructions)	Employer (See In Bubbles Enterp				

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 18	/29 Report: 20/47		
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# LCLF Southeast Houston)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
9	04/30/2012	6 Contributor address; City; State; Zip Code 17707 Abaft Ct. Crosby, TX 77532		\$100.00	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Lehman, Victor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/18/2012	Contributor address; City; State; Zip Code 25710 Lake Springs Way Spring, TX 77373		\$100.00	 		
				/If travel outside of	Texas, complete Schedula T)		
	Principal occur	eation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule ()		
	Attorney	anon / sob tilla (saa manaciicha)	DHS/ICE				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/14/2012	Contributor address; City; State; Zip Code 2929 Buffalo Speedway #1303 Houston, TX 77098		\$100.00	 		
L					Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/24/2012	Contributor address; City; State; Zip Code 1404 Congress Street Houston, TX 77002		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Bail Bonding	pation / Job title (See Instructions)	Employer (See In 2 Be Free Bond				
	Date	Full name of contributor ut-of-state PAC (ID# Martin, John	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/09/2012	Contributor address; City; State; Zip Code 722 Enford Ct. Katy, TX 77450		\$100.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
H	Principal occup	pation / Job title (See Instructions)	Employer (See Ir				
	Retired	·	Retired				

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 19/	/29 Report: 21/47	
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# McAshan, Karen D.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/23/2012	6 Contributor address; City; State; Zip Code P.O. Box 3172 Houston, TX 77253		\$500.00	Texas, complete Schedule T)	
9	Principal occup Student	ation / Job title (See Instructions)	10 Employer (See In Student	structions)		
	Date	Full name of contributor out-of-state PAC (ID# McAshan Jr, Allen D.		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/02/2012	Contributor address; City; State; Zip Code 2050 Teague Houston, TX 77080-6408		\$200.00		
				(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 ut-of-state PAC (ID) McLemore, Curtis		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/15/2012	Contributor address; City; State; Zip Code 10 Player Pines Ct. The Woodlands, TX 77382		\$1,500.00	 	
				L '	Texas, complete Schedule T)	
	Principal occup Owner	eation / Job title (See Instructions)	Employer (See In McLemore Buil	structions) ding Maintenance	Inc.	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/03/2012	Contributor address; City; State; Zip Code 3207 Acorn Wood Way Houston, TX 77059		\$250.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Retail Store (ation / Job title (See Instructions) Owner	Employer (See In Self Employed	nstructions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (If applicable)	
	04/26/2012	Contributor address; City; State; Zlp Code 4522 W. Alabama St. Houston, TX 77027		\$250.00	1, 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Homebuilder	Leation / Job title (See Instructions)	Employer (See In Moriarty Const	nstructions)		
	Tiomobulido		1			

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 20	/29 Report: 22/47		
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# Moseley, Ann Lee)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	05/07/2012	6 Contributor address; City; State; Zip Code 12827 Sienna Trails Dr. Tomball, TX 77377-6806		\$100.00	Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Law Office of A	structions) nn Lee Moseley			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/07/2012	Contributor address; City; State; Zip Code 3711 Woodvalley Houston, TX 77025		\$500.00	 		
				(If travel outside of	Texas, complete Schedula T)		
	Principal occup Police Officer	ation / Job title (See Instructions)	Employer (See In City of Houston				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/19/2012	Contributor address; City; State; Zip Code 1967 Peden Houston, TX 77019		\$500.00	 		
					Texas, complete Schedule T)		
	Principal occup Technical Se	ation / Job title (See Instructions) rvices	Employer (See In Core Laborator				
	Date	Full name of contributor ut-of-state PAC (ID# Newman, Bobby)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/03/2012	Contributor address; City; State; Zip Code 331 Sugarberry Cir. Houston, TX 77024	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$500.00	1 		
				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Lilly Newman				
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/11/2012	Contributor address; City; State; Zip Code 10370 Richmond Avenue # 1350 Houston, TX 77042-4141		\$250.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Thamm & O'Bri				

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 21/	/29 Report: 23/47		
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: O'Brien, Casey	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/23/2012	6 Contributor address; City; State; Zip Code RR 1 Box 2959 Dora, MO 65637		\$500.00	Texas, complete Schedule T)		
9	Principal occup Retired	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)			
	Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/02/2012	Contributor address; City; State; Zip Code 13902 Oak Spring Rd. Cypress, TX 77429		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) it Human Resources	Employer (See In Group 1 Autom				
•	Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/24/2012	Contributor address; City; State; Zip Code 37842 Clubhouse Lane Magnolia, TX 77355		\$500.00	 		
				(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 ut-of-state PAC (ID Overwatch Security Group LLC	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/17/2012	Contributor address; City; State; Zip Code 2211 Rayford Rd. Ste. 11431 Spring, TX 77386-1555		\$1,000.00	! ! !		
				, , , ,	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ir	structions)			
	Date	Full name of contributor Paul Doyle & Associates	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 600 Travis Street Suite 4700 Houston, TX 77002		\$2,500.00	1 		
1				(If travel outside of	Texas, complete Schedule T)		
L	Principal occur	pation / Job title (See Instructions)	Employer (See Ir	L <u>'</u>	Taxas, complete ochedule ()		
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	The Instruction	พ Guide explains how to complete this form.		1 PAGE# Schedule: 22	/29 Report: 24/47		
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# Phillips, Louis)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/30/2012	6 Contributor address; City; State; Zip Code 2231 Center St. Ste. B-317 Deer Park, TX 77536		\$2,000.00	Texas, complete Schedule T)		
9	Principal occup Owner	ation / Job title (See Instructions)	10 Employer (See In Outlaw Plastics				
-	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 3923 Colquitt Street Houston, TX 77027		\$250.00	1 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In Pacific Usa Hole				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2012	Contributor address; City; State; Zip Code 4400 Post Oak Pkwy Ste. 2580 Houston, TX 77027		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Professional	pation / Job title (See Instructions)	Employer (See In Self-employed	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Reeter, Jeffrey	(Amount of contribution (\$)	In-kind contribution description (if applicable)		
	05/02/2012	Contributor address; City; State; Zip Code 1 Riverway Ste. 900 Houston, TX 77056		\$1,000.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Managing Pa	pation / Job title (See Instructions) rtner	Employer (See In Northwestern M				
	Date	Full name of contributor	<u>‡</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/23/2012	Contributor address; Clty; State; Zip Code 5723 Grape Houston, TX 77096	•••••	\$100.00	t 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)			

The Instruction Guide explains how to complete this form.				1 PAGE# Schedule: 23/	29 Report: 25/47
2	FILER NAME	Friends of Mike Anderson		3 ACCOUNT # 12000000	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/18/2012	6 Contributor address; City; State; Zip Code 2314 Wroxton Rd. Houston, TX 77005		\$100.00	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Harris County	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/01/2012	Contributor address; City; State; Zip Code 150 Stoney Creek Drive Houston, TX 77024		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) CFO Employer (See Instructions) Group 1 Automotive					
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 3331 Las Palmas Houston, TX 77027		\$100.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup Senior Vice F	pation / Job title (See Instructions) President	Employer (See In DePelchin Child	structions) Iren's Center	
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2012	Contributor address; City; State; Zip Code III Congress Avenue # 1700 Austin, TX 78701	.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Counsel	pation / Job title (See Instructions)	Employer (See In Andrews Kurth	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/16/2012	Contributor address; City; State; Zip Code P.O. Box 891046 Houston, TX 77289		\$200.00	
L				<u>1.' </u>	Texas, complete Schedule T)
	Principal occup Instructor Pile	pation / Job title (See Instructions) of	Employer (See Ir FSI	estructions)	

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: 24	/29 Report: 26/47	
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# Schepps, Susan	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/30/2012	6 Contributor address; City; State; Zip Code 1118 S. Shepherd Dr. Houston, TX 77019-3610		\$150.00	Texas, complete Schedule T)	
9	Principal occup Plant Market	ation / Job title (See Instructions) Manager	10 Employer (See In Star Pipe Produ	structions) octs		
	Date	Full name of contributor	,	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/07/2012	Contributor address; City; State; Zip Code P. O. Box 1367 Dickinson, TX 77539		\$1,000.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Bay Oil Compa			
	Date	Full name of contributor ut-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)	
ŀ	05/03/2012	Contributor address; City; State; Zip Code 101 Wescott St. #405 Houston, TX 77007		\$200.00		
					Texas, complete Schedule T)	
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)		
	Date	Full name of contributor ut-of-state PAC (ID) Smith, Larry	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/03/2012	Contributor address; City; State; Zip Code 9219 Katy Freeway Ste. 140 Houston, TX 77024		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Bail Bondsma	pation / Job title (See Instructions) an	Employer (See In Self-employed	structions)		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	05/19/2012	Contributor address; City; State; Zip Code 201 Main Street Unit 7G Houston, TX 77002		\$250.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	Deation / Job title (See Instructions)	Employer (See In Burleson LLP	nstructions)		

_	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 25	i/29 Report: 27/47
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# StackRealty_LLC)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/30/2012	6 Contributor address; City; State; Zip Code 3270 Sul Ross Houston, TX 77098		\$250.00	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Stasney, Dick and Susan	*	Amount of contribution (\$)	In-kind contribution description (if applicable) food and beverage for fundraiser
	05/02/2012	Contributor address; Clty; State; Zip Code 3211 Ferndale Houston, TX 77098		\$2,610.00	
					Texas, complete Schedule T)
	Principal occup Doctor	pation / Job title (See Instructions)	Employer (See In Methodist Hosp		
	Date	Full name of contributor ut-of-state PAC (ID) Stasney, Spencer	*	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 2327 Quenby Houston, TX 77005		\$100.00	 Texas, complete Schedule T)
	Principal occup Oil & Gas	pation / Job title (See Instructions)	Employer (See In Lift Energy Part		
	Date	Full name of contributor ut-of-state PAC (ID: Stewart, William	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/03/2012	Contributor address; City; State; Zip Code 7887 San Felipe Ste. 122 Houston, TX 77063		\$1,000.00	! ! !
				(If travel outside of	f Texas, complete Schedule T)
	Principal occup CPA	pation / Job title (See Instructions)	Employer (See In Stewart & Asso		
	Date	Full name of contributor ut-of-state PAC (ID: Strange, J.	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 800 Gessner Ste 500 Houston, TX 77024	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$500.00	
L					f Texas, complete Schedule T)
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	nstructions)	

	The Instruction	אי Guide explains how to complete this form.		1 PAGE # Schedule: 26	/29 Report: 28/47
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# Stuart, Barry	()	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/17/2012	6 Contributor address; City; State; Zlp Code 2003 Woody Bend Pl. Sugar Land, TX 77479		\$2,000.00	
9		ation / Job title (See Instructions) It Energy Services	10 Employer (See In Conoco-Phillips	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 2221 Brun Street Houston, TX 77019		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Cunningham La		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/11/2012	Contributor address; City; State; Zip Code 10370 Richmond Avenue # 1350 Houston, TX 77042-4141		\$250.00	
				1	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Ir Thamm & O'bri		
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; Clty; State; Zip Code 405 Main Street Ste. 800 Houston, TX 77002		\$500.00	
L			T = (0 - 1	<u> </u>	f Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ir	nstructions)	,
	Date	Full name of contributor	#	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/30/2012	Contributor address; City; State; Zip Code 8413 Winningham Ln. Houston, TX 77055-7531		\$200.00	
				(If travel outside o	f Texas, complete Schedula T)
	Principal occup Accountant	pation / Job title (See Instructions)	Employer (See Ir Self-employed	nstructions)	

	The Instruction	Guide explains how to complete this form.		1 PAGE # Schedule: 27	/29 Report: 29/47
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# Tompkins, Rodney)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	05/03/2012	6 Contributor address; City; State; Zip Code 1210 Preston St. Houston, TX 77002		\$200.00	Texas, complete Schedule T)
9	Principal occup Bondsman	ation / Job title (See Instructions)	10 Employer (See In Am-Mex Bail Bo		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 3001 Del Monte Houston, TX 77019		\$200.00	I I
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Investment M	ation / Job title (See Instructions) lanagement	Employer (See In Andrews Capita		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 1425 N. Durham Dr Houston, TX 77008		\$500.00	
L					Texas, complete Schedule T)
<u> </u>	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Law Office of M		
	Date	Full name of contributor ut-of-state PAC (ID# Van Buren, William	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 300 Main Street Ste. 200 Houston, TX 77002		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occus Attorney	pation / Job title (See Instructions)	Employer (See In DeToto & Van I		
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/18/2012	Contributor address; City; State; Zip Code 20114 Raingate Katy, TX 77449		\$100.00	ι
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Construction	pation / Job title (See Instructions)	Employer (See In Patriot Civil Co		
l I			I		

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 28	/29 Report: 30/47
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# Wareing, Peter)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/30/2012	6 Contributor address; City; State; Zip Code 3355 W. Alabama Suite 630 Houston, TX 77098		\$500.00	Taxas, complete Schedule T)
9	Principal occup Investments	ation / Job title (See Instructions)	10 Employer (See In Wareing Athon		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/09/2012	Contributor address; City; State; Zip Code 6146 Meadow Lake Ln Houston, TX 77057		\$5,000.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In LDW Investmen		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/08/2012	Contributor address; City; State; Zip Code 4515 Silverwood Drive Houston, TX 77035		\$100.00	
		pation / Job title (See Instructions)	Employer (See in	structions)	
	Attorney		Andrew M. Willi	ams & Associates	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 11999 Katy Freeway Suite 210 Houston, TX 77079		\$500.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See In Darrell Williams	structions) State Farm Insul	rance	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/18/2012	Contributor address; City; State; Zip Code 215 Oakhurst La Porte, TX 77571		\$100.00	
				(If travel outside of	f Texas, complete Schedule T)
	Principal occup Technical Wr	L pation / Job title (See Instructions) iter	Employer (See In AcuTech	<u> </u>	. ,

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 29	/29 Report: 31/47
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# Wilson, L.E.)	7 Amount of contribution (\$)	8 In-kind contribution description (If applicable)
	04/30/2012	6 Contributor address; City; State; Zip Code 87 Litchfield Ln. Houston, TX 77024		\$1,000.00	Texas, complete Schedule T)
9		ation / Job title (See Instructions) nent Instructor	10 Employer (See In Self-employed	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
; !	04/26/2012	Contributor address; City; State; Zip Code 16214 Deer Crest San Antonio, TX 78248		\$250.00	
				L'	Texas, complete Schedule T)
	Principal occup Principal Mai	nation / Job title (See Instructions) naging Director	Employer (See In Integrity Partne	structions) rs	
	Date	Full name of contributor	,	Amount of contribution (\$)	In-kind contribution description (if applicable)
	05/19/2012	Contributor address; Clty; State; Zip Code 12426 Moorcreek Houston, TX 77070		\$100.00	! ! !
				<u> </u>	Texas, complete Schedule T)
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Wisner, Victor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2012	Contributor address; City; State; Zip Code 121 N. Post Oak Ln #2002		\$500.00	
		Houston, TX 77024		(if travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Self-employed	structions)	

Advertising Expense Accounting/Banking Consulting Expense

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

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

EXPENDITURE CATEGORIES

Inse
Sataries/Wages/Contract Labor
Solicitation/Fundralsing 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)

Polling Expense Printing Expense **Event Expense** OTHER (enter a category not listed above) Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Friends of Mike Anderson 12000000 Schedule: 1/16 Report: 32/47 4 Date 5 Payee name Anthem Media LLC 04/23/2012 Payee address City: State: 6 Amount (\$) Zip Code 5524 Bee Caves Road Ste B5 \$26,132.00 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Electronic Media Placement Radio Advertising Expense OF EXPENDITURE Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 04/25/2012 Anthem Media LLC Payee address City; State; Zip Code Amount (\$) 5524 Bee Caves Road Ste B5 \$34,126.00 Austin, TX 78746 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Electronic Media Placement Radio Advertising Expense OF **EXPENDITURE** Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Payee name Date Anthem Media LLC 05/03/2012 City; State; Payee address Amount (\$) 5524 Bee Caves Road Ste B5 Austin, TX 78746 \$61,911.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Electronic Media Placement Radio **Advertising Expense** OF **EXPENDITURE** Complete ONLY If Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Anthem Media LLC 05/09/2012 Payee address City: State: Zip Code Amount (\$) 5524 Bee Caves Road Ste B5 \$70,096.00 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** Electronic Media Placement Television Advertising Expense **EXPENDITURE**

Office held:

Office sought:

POLITICAL EXPENDITURES

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 Printing Expense The Instruction Guide explains how	ental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 2/16 R		12000000
4 Date	5 Payee name	
05/14/2012	Anthem Media LLC	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$8,988.00	5524 Bee Caves Road Ste B5 Austin, TX 78746	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Production Costs
EXPENDITURE		
		0/5 1-1-1
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/16/2012	Anthem Media LLC	
Amount (\$)	Payee address Clty; State; Zip Code	
\$39,506.00	5524 Bee Caves Road Ste B5 Austin, TX 78746	
	Category (See Categories listed at the top of this schedule)	Description (if travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Electronic Media Placement Television
OF EXPENDITURE		
		<u>/</u>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/09/2012	Apple Signs	
Amount (\$)	Payee address City; State; Zip Code	
\$81.19	601 Pinemont Houston, TX 77092	
 	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Event Expense	Campaign Event
OF EXPENDITURE		
EAFENDITURE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/11/2012	Bison Signs	
Amount (\$)	Payee address City; State; Zip Code	
\$1,469.70	10100 Clay Ste G	
Ψ1,400.70	Houston, TX 77080	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Yard Signs & 4x8
EXPENDITURE		
		0/5
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Travel In District
Travel Out Of District
Office Overhead/Rental Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Potting Expense Printing Expense Fees OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Friends of Mike Anderson 12000000 Schedule: 3/16 Report: 34/47 4 Date Payee name Bison Signs 05/17/2012 6 Amount (\$) Payee address City: State: Zip Code 10100 Clay Ste G Houston, TX 77080 \$2,230.00 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Yard Signs & 4x8 Advertising Expense OF EXPENDITURE Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 04/25/2012 Blakemore & Associates City; State; Zip Code Payee address Amount (\$) 1 E Greenway Plaza Suite 225 \$4,000.00 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Expense Fundraising Fees OF EXPENDITURE Candidate / Officeholder name Office held: Office sought: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Blakemore & Associates 05/01/2012 City; State; Amount (\$) Pavee address 1 E Greenway Plaza Suite 225 Houston, TX 77046 \$7,500.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Fees Consulting Expense OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Elegant Valet Service 04/25/2012 City; State; Zip Code Amount (\$) Payee address 7600 Burgoyne Suite 140 \$280.00 Houston, TX 77063 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Campaign Event Event Expense EXPENDITURE Office sought: Office held: Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Polling Expense Printing Expense

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)

Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME 2 Friends of Mike Anderson 12000000 Schedule: 4/16 Report: 35/47 Date 5 Payee name 05/09/2012 Fedex 6 Amount (\$) Payee address City; State; Zip Code 3875 Airways Module H3 \$61.04 Memphis, TN 38116 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Courier & Delivery Charges Office Overhead/Rental Expense OF EXPENDITURE 9 Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 04/30/2012 **G&E** Impressions Payee address City: State: Zip Code Amount (\$) 10418 Brighton Lane Houston, TX 77031 \$386.99 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Advertising Expense Logoed Promotional Items OF **EXPENDITURE** Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name Harris County Republican Party 04/23/2012 Amount (\$) Payee address City; State; 3311 Richmond Suite 218 Houston, TX 77098 \$500.00 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) PURPOSE Contributions/Donations Made By Candidate/Officeholder/Political Committee **Public Promotion EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Pavee name Date 04/25/2012 Jewish Herald Voice Amount (\$) Payee address City; State; Zip Code PO Box 153 \$640.00 Houston, TX 77001-0153 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Print Advertising Placement Advertising Expense **EXPENDITURE** Office sought: Office held: Candidate / Officeholder name Complete ONLY If direct expanditure to benefit C/OH

direct expenditure to benefit C/OH

POLITICAL EXPENDITURES

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES Salarles/Wages/Contract Labor Solicitation/Fundralsing Expense

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

Travel In District
Travel Out Of District
Office Overhead/Rental Expense Polling Expense Printing Expense Event Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Friends of Mike Anderson 12000000 Schedule: 5/16 Report: 36/47 Date Payee name Katy Tea Party 04/24/2012 City: State: 6 Amount (\$) Payee address Zip Code 5619 Bear Meadow Lane \$25.00 Katv. TX 77449 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Contributions/Donations Made By Public Promotion OF Candidate/Officeholder/Political Committee EXPENDITURE Office held: Candidate / Officeholder name Office sought: 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name La Griglia 05/09/2012 Payee address City; State; Zip Code Amount (\$) 2002 West Gray Houston, TX 77019 \$1,166.18 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE Event Expense** Campaign Event ÖF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Najvar Law Firm 05/07/2012 Amount (\$) Payee address City; State; One Greenway Plaza Ste 225 Houston, TX 77046 \$200.00 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE Professional Services** Fees OF **EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Pavee name Date Piryx 04/23/2012 Amount (\$) Payee address City; State; Zip Code 144 2nd St 1st Floor \$2.21 San Francisco, CA 94105 (if travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE Merchant Account Fees Accounting/Banking **EXPENDITURE** Office sought: Office held: Candidate / Officeholder name Complete ONLY if

Amount (\$)

Payee address

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Exper Accounting/Bankl Consulting Exper Event Expense Fees	Ing Legal Services Solicitation/Fundraising Exp	abor Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee pense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME Friends of Mike Anderson	3 ACCOUNT# (TEC filers)
Schedule: 6/16 R	teport. 37141	12000000
4 Date 04/23/2012	5 Payee name Piryx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$4.50	144 2nd St 1st Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	[(-)	Description (If travel outside of Texas, complete Schedule T) Merchant Account Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/01/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$29.00	144 2nd St 1st Floor San Francisco, CA 94105	
0.100005	g	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Accounting/Banking	Merchant Account Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/02/2012	Piryx	

\$67.50	144 2nd St 1st Floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside Merchant Account Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:	
Date 05/02/2012	Payee name Piryx			
Amount (\$) \$4.50	Payee address City: State; Zip Code 144 2nd St 1st Floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside Merchant Account Fees	of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:	
		 -	Electronic Filing Version 3.4	

City; State; Zip Code

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

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

Salaries/Wages/Contract Labor Solicitation/Fundralsing 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)

Polling Expense Printing Expense Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Friends of Mike Anderson 12000000 Schedule: 7/16 Report: 38/47 Date 5 Payee name Piryx 05/03/2012 State: 6 Amount (\$) Payee address City: Zip Code 144 2nd St 1st Floor \$67.50 San Francisco, CA 94105 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE** Accounting/Banking Merchant Account Fees OF EXPENDITURE 9 Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 05/07/2012 Piryx Amount (\$) Pavee address City: State; Zip Code 144 2nd St 1st Floor \$47.25 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 held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH Payee name Date Piryx 05/08/2012 Payee address City; State; Zip Code Amount (\$) 144 2nd St 1st Floor San Francisco, CA 94105 \$4.50 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Merchant Account Fees Accounting/Banking **EXPENDITURE** Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Payee name 05/10/2012 Pirvx Amount (\$) Payee address City; State; Zip Code 144 2nd St 1st Floor \$225.00 San Francisco, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Merchant Account Fees Accounting/Banking OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

Advertising Expense	
Accounting/Banking	
Consulting Expense	
Event Expense	

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salarles/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Exper Event Expense Fees	ise Food/Beverage Expense Travel in District 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: 8/16 R	Total	12000000
4 Date	5 Payee name	
05/16/2012	Piryx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$0.45	144 2nd St 1st Floor San Francisco, CA 94105	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
OF	Accounting/Banking	Merchant Account Fees
EXPENDITURE		
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
	D	
Date 05/16/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$31.50	144 2nd St 1st Floor	
\$57.50	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
EXPENDITURE		
	0 1144 1010 4 41	Office sought: Office held:
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/16/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$31.50	144 2nd St 1st Floor San Francisco, CA 94105	
	Salit fallosco, OA 34100	
-	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		
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
05/16/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.21	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		
EAI ERDITORE		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

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

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/Re The Instruction Guide explains how	ental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 9/16 R		12000000
4 Date	5 Payee name	
05/17/2012	Piryx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$22.50	144 2nd St 1st Floor	
\$22.50	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 OF	Accounting/Banking	Merchant Account Fees
EXPENDITURE		
	0 714 400 - 444	Office sought: Office held:
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH	· · · · · · · · · · · · · · · · · · ·	
Date	Payee name	
05/18/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$70.20	144 2nd St 1st Floor	
	San Francisco, CA 94105	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Accounting/Banking	Merchant Account Fees
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		•
to benefit C/OH		
Date	Payee name	
05/18/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.25	144 2nd St 1st Floor San Francisco, CA 94105	
	Gail Francisco, GASA100	
<u> </u>	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		
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
05/18/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.25	144 2nd St 1st Floor	
\$2.25	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
EXPENDITURE		
		Office hold:
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

Advertising Expense Accounting/Banking Consulting Expense

Gifts/Awards/Memorial Expense Legal Services Food/Beverage 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

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 10/16	Educate of Miles Analysis	12000000
4 Date 05/19/2012	5 Payee name Piryx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$1.13	144 2nd St 1st Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Merchant Account Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 05/19/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.25	144 2nd St 1st Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	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 05/19/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.25	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
OF EXPENDITURE	, toodarming barring	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 05/19/2012	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.25	144 2nd St 1st Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	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 expanditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

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

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

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/Officeholder/Political Committee
OTHER (enter a category not listed above)

		The Instruction Guide explains ho	w to complete this form.	
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 11/16	Report: 42/47	Friends of Mike Anderson		12000000
4 Date 05/19/2012	5 Payee name Piryx			
6 Amount (\$)	7 Payee address	City; State; Zip Code		
\$2.25	144 2nd St 1			
8 PURPOSE OF EXPENDITURE	(a) Category (See Accounting/B	Categories listed at the top of this schedule) Banking	(b) Description (If travel outsi Merchant Account Fees	de of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Ot	ficeholder name	Office sought:	Office held:
Date 05/19/2012	Payee name Piryx			
Amount (\$)	Payee address	s City; State; Zip Code		
\$2.25	144 2nd St 1 San Francisc	st Floor co, CA 94105		
PURPOSE	Category (See Accounting/E	Categories tisted at the top of this schedule)	Description (If travel outsi Merchant Account Fees	de of Texas, complete Schedule T)
OF EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name	Office sought:	Office held:
Date	Payee name			
05/19/2012	Piryx			
Amount (\$)	Payee address			
\$2.25	144 2nd St 1 San Francisc	st Floor co, CA 94105		
PURPOSE		Categories listed at the top of this schedule)	,	de of Texas, complete Schedule T)
OF	Accounting/E	sanking	Merchant Account Fees	i
EXPENDITURE				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name	Office sought:	Office held:
Date	Payee name			
05/19/2012	Piryx			
Amount (\$)	Payee address	•		
\$2.25	144 2nd St 1 San Francisc	st Floor co, CA 94105		
PURPOSE	Category (See Accounting/E	e Categories listed at the top of this schedule) Banking	Description (If travel outs Merchant Account Fees	de of Texas, complete Schedule T)
OF EXPENDITURE		-		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name	Office sought:	Office held:

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES

SCHEDULE F

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

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	Ing Legal Services Solicitation/Fundralsi use Food/Beverage Expense Travel In District Polling Expense Travel Out Of District Printing Expense Office Overhead/Rer The Instruction Guide explains how to	tract Labor ing Expense ing Expense ing Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 12/16	F 2 4 2 - 4 - 4	12000000
4 Date	5 Payee name	
05/19/2012	Piryx	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$2.25	144 2nd St 1st Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) Merchant Account Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/19/2012	Piryx	
Amount (\$)	Payee address City; State; Zip Code	
\$2.25	144 2nd St 1st Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	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	Payee name	
05/08/2012	Rapid Delivery Service	
Amount (\$)	Payee address City; State; Zip Code	
\$61.11	PO Box 79673 Houston, TX 77279	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) Courier & Delivery Charges
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
04/25/2012	Right Lists Of Texas	
Amount (\$)	Payee address City; State; Zip Code	
\$324.75	Houston, TX 77046	
BUBBBBB	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Email Distribution
EXPENDITURE		

Office held:

Office sought:

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 Printing Expense

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/Officeholder/Political Committee
OTHER (enter a category not listed above)

	I ne Instruction Guide explains no	
1 PAGE#	2 FILER NAME Penort: 44/47 Friends of Mike Anderson	3 ACCOUNT# (TEC filers)
Schedule: 13/16	Nepole 44/47	12000000
4 Date	5 Payee name	
04/25/2012	Right Lists Of Texas 7 Payee address City; State; Zip Code	
6 Amount (\$)	, · · · · · · · · · · · · · · · · · · ·	
\$447.40	1 E Greenway Plaza Ste 225 Houston, TX 77046	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Email Distribution
OF EXPENDITURE		
		Office holds
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
04/25/2012	Right Lists Of Texas	
Amount (\$)	Payee address City; State; Zip Code	
\$450.73	1 E Greenway Plaza Ste 225	
	Houston, TX 77046	
	Colored (D. Colored Birth Little Colored Birth	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Email Distribution
OF	Auvertising Expense	Ellian Biotisasion
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
04/25/2012	Right Lists Of Texas	
	Payee address City; State; Zip Code	
Amount (\$)	Payee address City; State; Zip Code	
Amount (\$)	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046	
Amount (\$) \$444.57	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Amount (\$) \$444.57 PURPOSE OF	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046	Description (If travel outside of Taxas, complete Schedule T) Email Distribution
Amount (\$) \$444.57 PURPOSE	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule)	
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense	
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule)	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$)	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$)	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225	Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$) \$436.84	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225	Email Distribution Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$) \$436.84	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046	Email Distribution Office sought: Office held:
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$) \$436.84	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule)	Email Distribution Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$) \$436.84 PURPOSE OF EXPENDITURE	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense	Email Distribution Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Email Distribution
Amount (\$) \$444.57 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 05/09/2012 Amount (\$) \$436.84 PURPOSE OF	Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense Candidate / Officeholder name Payee name Right Lists Of Texas Payee address City; State; Zip Code 1 E Greenway Plaza Ste 225 Houston, TX 77046 Category (See Categories listed at the top of this schedule) Advertising Expense	Email Distribution Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

POLITICAL EXPENDITURES

SCHEDULE F

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

Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrals	ntract Labor sing Expense ct
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 14/16	The standard of Ballion Annal and an	12000000
4 Date	5 Payee name	
05/11/2012	Right Lists Of Texas	Y Company
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$434.01	1 E Greenway Plaza Ste 225 Houston, TX 77046	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Email Distribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/17/2012	Right Lists Of Texas	
Amount (\$)	Payee address City; State; Zip Code	
\$426.87	1 E Greenway Plaza Ste 225 Houston, TX 77046	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (if travel outside of Texas, complete Schedule T) Email Distribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/09/2012	San Jacinto Republican Women	
Amount (\$)	Payee address City; State; Zip Code	
\$600.00	PO Box 8218 Pasadena, TX 77580	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) Public Promotion
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
05/16/2012	The Production Companies	
Amount (\$)	Payee address City; State; Zip Code	
\$750.00	One Greenway Plaza Suite 530 Houston, TX 77046	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (if travel outside of Texas, complete Schedule T) Production Costs

Office held:

Office sought:

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out of District Printing Expense Office Overhead/Rer The Instruction Guide explains how to	ital Expense OTHER (enter a	ficeholder/Political Committee category not listed above)
* DAGE #		- I	3 ACCOUNT # (TEC filers)
1 PAGE# Schedule: 15/16	2 FILER NAME Report: 46/47 Friends of Mike Anderson		12000000
4 Date	5 Payee name		
04/30/2012	Tribe Design		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$108.25	PO Box 52683 Houston, TX 77052-2683		
8	(a) Category (See Categories listed at the top of this schedule)		f Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Print Advertising Design	
EXPENDITURE			
O Complete Call V V	Candidate / Officeholder name	Office sought:	Office held:
9 Complete ONLY if direct expenditure	Candidate / Cilicendider hame	Onice sought.	Office field.
to benefit C/OH			
Date	Payee name		
05/09/2012	US Postmaster		
Amount (\$)	Payee address City; State; Zip Code		
\$99.45	14917 El Camino Real		
	Houston, TX 77062		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of	of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Courier & Delivery Charges	
OF EXPENDITURE	Omou Orallodarional Expando		
EXPENDITURE		<u></u>	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
05/09/2012	US Postmaster		<u> </u>
Amount (\$)	Payee address City; State; Zip Code		
\$42.30	14917 El Camino Real Houston, TX 77062		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of	of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Courier & Delivery Charge	
OF EXPENDITURE			
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
to benefit C/OH			
Date	Payee name		
04/23/2012	W. Bradshaw Boney Consulting		
Amount (\$)	Payee address City; State; Zip Code		
\$730.69	7211 Spanish Grant		
	Galveston, TX 77554-7796		
PURPOSE	Category (See Categories listed at the top of this schedule)	The state of the s	of Texas, complete Schedule T)
OF	Advertising Expense	Leadership Mail	
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH	Canada Ca		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

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/Officeholder/Political Committee
OTHER (enter a category not listed above)

	The Instruction Guide explains ho	w to complete this form.	
1 PAGE# Schedule: 16/16	Report: 47/47 2 FILER NAME Friends of Mike Anderson		3 ACCOUNT# (TEC filers) 12000000
4 Date 05/17/2012	5 Payee name W. Bradshaw Boney Consulting		
6 Amount (\$) \$297.69	7 Payee address City; State; Zip Code 7211 Spanish Grant Galveston, TX 77554-7796		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outs Leadership Mail	ide of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:



RECORDER'S MEMORANDUM:
At the time of recordation, this instrument was found to be inadequate for the best photographic reproduction because of illegibility, carbon or photo copy, discolored paper, etc. All blockouts, additions and changes were present at the time the instrument was filed and recorded.