|   | CORRE  | СТ             | ION AFF   | IDAVIT  | FOR   | M COR-PAC   |
|---|--|----------------|---|---|---|---|
|   |  |                | FOR   |   |   |   |
|   | POLITI   | CAI            |   | ITTEE   |   |   |
| 1 ACCOUNT # 000                                     | 051862   |                | 2 PAGE #  | 1 of  | 101   |   |
| 3 COMMITTEE   | Friends of Larry Taylor  |                |   |   | OFFICE  | USE ONLY  |
| 4 TREASURER<br>NAME                                 | FIRST M<br>Holbrook, Ray (Mr.)                                   | II             |   | LAST  | Date Received   |   |
| 5 ORIGINAL<br>REPORT                                | January 15   | F              | Runoff  |   | _   |   |
| TYPE  | July 15  |                | 0th day after campaig<br>reasurer termination                               | n   | Date Hand-delivered or  | Date Postmarked   |
|   | 30th day before election   |                | Dissolution Report  |   | Receipt #   | Amount  |
|   | 8th day before election           Month         Day         Year |                | Other (specify)   | Day Year  | Legal   | Totals  |
| 6 ORIGINAL<br>PERIOD                                |  |                |   |   | Date Processed  | TOLDIS  |
| COVERED   | 07/01/2011   | THRC           | DUGH 12/  | 31/2011   |   |   |
| 7 EXPLANATION OF COR                                |  |                |   |   | Date Imaged   |   |
|   |  |                |   |   |   |   |
| 8 AFFIDAVIT   |  |                | I swear, or affirm report is true and                                       |   | of perjury, that this   | scorrected  |
|   |  |                | Check ONLY if a   | pplicable:  |   |   |
|   |  | X              | annual report <b>due</b><br>is filed on or after t<br>or affirm, that the c | on or after Septe<br>he eighth day afte<br>original report was      | an amendment/corre<br><b>mber 1, 2011.</b> If am<br>r the original report v<br>made in good faith a<br>he information conta | endment/correction<br>vas filed, I swear,<br>and without an |
|   |  |                | 2011): I swear, or the 14th business  | affirm, that I am fili<br>day after the date<br>or incomplete. I sw | al reports due on or a<br>ing this corrected rep<br>I learned that the rep<br>year, or affirm, that a<br>ade in good faith. | port not later than port as originally.                     |
|   |  |                | Ray Holbrook  |   |   |   |
| AFFIX NOTARY STAMP / S                              | -  |                |   | Signature of Can  |   |   |
| Sworn to and subscribed to certify which, witness r | before me by<br>ny hand and seal of office.                      |                |   | this the  | _ day of  | , 20 ,  |
| Signature of officer administering oat              | th Printed nam   | e of officer a | administering oath  | Title   | of officer administering oat  | h   |
| Remen   | nber To Attach Any F<br>Needed To Re                             |                |   |   |   | m   |

complete this form.

# P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 SPECIFIC-PURPOSE COMMITTEE FORM SPAC **CAMPAIGN FINANCE REPORT** COVER SHEET PG 1 1 ACCOUNT # **2** PAGE # The SPAC INSTRUCTION GUIDE explains how to (Ethics Commission filers) 00051862 2 of 101 3 COMMITTEE NAME OFFICE USE ONLY

|    | Friends of Larry Taylor  |  |               |                       |                                    |          |                            |                                    |
|----|--|--|---------------|-----------------------|------------------------------------|----------|----------------------------|------------------------------------|
|    |  |  |               |                       |                                    |          | Date Received              |                                    |
| 4  | COMMITTEE<br>ADDRESS   | ADDRESS / PO BOX; APT / SU   | ITE #;        | CITY;                 | STATE;                             | ZIP CODE |                            |                                    |
|    | X Change of Address  | PO Box 1208<br>Friendswood, TX 77549                                 |               |                       |                                    |          | Date Hand-delivered        | l or Date Postmarked               |
| 5  | CAMPAIGN<br>TREASURER  | ms/mrs/mr<br>Mr. Ray   | FIRST<br>/    |                       |                                    | MI       | Receipt #                  | Amount                             |
|    | NAME   |  | LAST<br>brook |                       |                                    | SUFFIX   | Date Processed Date Imaged |                                    |
| 6  | CAMPAIGN<br>TREASURER'S<br>STREET ADDRESS<br>(Residence or business) | STREET ADDRESS (NO PO BOX PL<br>PO BOX 1208<br>Friendswood, TX 77549 | EASE); A      | PT/SUITE #;           | CITY;                              | STATE;   | ZIP CODE                   |                                    |
| 7  | CAMPAIGN<br>TREASURER'S<br>MAILING ADDRESS                           | STREET OR PO BOX;<br>PO BOX 1208<br>Friendswood, TX 77549            | A             | PT / SUITE #;         | CITY;                              | STATE;   | ZIP CODE                   |                                    |
| 8  | CAMPAIGN<br>TREASURER<br>PHONE                                       | AREA CODE PHONE N<br>(409) 925-7919                                  | UMBER         |                       | EXTENSIO                           | N        |                            |                                    |
| 9  | REPORT TYPE  | X January 15<br>July 15  |               |                       | before election<br>before election |          |                            | n (attach PAC-DR)<br>fter campaign |
| 10 | PERIOD COVERED   | Month Day<br>07/01/201   | Year<br>1     |                       | THROUGH                            |          | Month Da<br>12/31,         | y Year<br>/2011                    |
| 11 | ELECTION   | Month ELECTION DATE<br>Day Year<br>04/03/2012                        |               | CTION TYPE<br>Primary | Runoff                             |          | General                    | Special                            |
|    | GO TO PAGE 2   |  |               |                       |                                    |          |                            |                                    |

#### SPECIFIC-PURPOSE COMMITTEE REPORT: FORM SPAC COVER SHEET PG 2 **PURPOSE & TOTALS** 12 COMMITTEE Friends of Larry Taylor ACCOUNT # (Ethics Commission filers) 00051862 NAME CANDIDATE / OFFICEHOLDER NAME X CANDIDATE **13** COMMITTEE PURPOSE Larry Taylor (Attach lists on plain OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) paper to complete this OFFICEHOLDER report if necessary.) State Senate ELECTION DATE X SUPPORT BALLOT IDENTIFICATION / # Month Day Year (Candidate or Measure) OPPOSE (Candidate or Measure) DESCRIPTION MEASURE (Officeholder only) **14 CONTRIBUTION** 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ 0.00 TOTAL POLITICAL CONTRIBUTIONS 2. \$ 249,652.51 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED 3 TOTALS \$ 1,375.94 TOTAL POLITICAL EXPENDITURES 4. \$ 154,172.45 CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE \$ OF THE REPORTING PERIOD 169,778.08 OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE 6. LOAN TOTALS \$ LAST DAY OF THE REPORTING PERIOD 0.00 **15** AFFIDAVIT I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. Ray Holbrook Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE , this the \_\_\_\_\_ day Sworn to and subscribed before me, by the said \_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office. of\_ Signature of officer administering oath Print name of officer administering oath Title of officer administering oath

SCHEDULE A

|          | The INSTRUCTION | ON GUIDE explains how to complete this form.   |                      | 1 PAGE #<br>Schedule: 1/4      | 40 Report: 4/101                                      |
|----------|-----------------|--|----------------------|--------------------------------|---|
| 2        | FILER NAME      | Friends of Larry Taylor  |                      | 3 ACCOUNT # 00051862           | (Ethics Commission filers)                            |
| 4        | Date            | 5 Full name of contributor ⊠ out-of-state PAC (ID<br>ABBOTT LABORATORIES EMPLOYEE POLITIC<br>COMMITTEE |                      | 7 Amount of contribution (\$)  | 8 In-kind contribution<br>description (if applicable) |
|          | 12/08/2011      | <b>6</b> Contributor address; City; State; Zip Code  |                      | \$1,000.00                     |   |
|          |                 | ABBOTT PARK, IL 60064  |                      |                                |   |
|          |                 |  |                      | (If travel outside of          | Texas, complete Schedule T)                           |
| 9        | Principal occup | ation / Job title (See Instructions)   | 10 Employer (See In  | structions)                    |   |
|          |                 |  |                      |                                |   |
|          | Date            | Full name of contributor ID out-of-state PAC (ID AETNA INC PAC   | <u>≰ C00181826</u> ) | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
|          | 10/04/2011      | Contributor address; City; State; Zip Code   |                      | \$1,000.00                     |   |
|          |                 | WASHINGTON, DC 20001   |                      |                                | I   |
|          |                 |  |                      | (If travel outside of          | Texas, complete Schedule T)                           |
|          | Principal occup | ation / Job title (See Instructions)   | Employer (See In     |                                |   |
|          |                 |  |                      |                                |   |
|          | Date            | Full name of contributor Dut-of-state PAC (ID#   | ŧ)                   | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
|          | 10/24/2011      | Contributor address; City; State; Zip Code   |                      | \$75.00                        |   |
|          |                 | NASSAU BAY, TX 77058   |                      |                                | l   |
|          |                 |  |                      | (If travel outside of          | Texas, complete Schedule T)                           |
|          | Principal occup | ation / Job title (See Instructions)   | Employer (See In     | structions)                    |   |
|          |                 |  |                      |                                |   |
|          | Date            | Full name of contributor  Gut-of-state PAC (ID# ALLEN BOONE HUMPHRIES ROBINSON LLP                     | ŧ)                   | Amount of<br>contribution (\$) | In-kind contribution<br>description (if applicable)   |
|          |                 |  |                      | (+)                            | ,   |
|          | 09/30/2011      | Contributor address; City; State; Zip Code   |                      | \$2,500.00                     | 1   |
|          |                 | HOUSTON, TX 77027  |                      |                                | I   |
|          |                 |  |                      | (If travel outside of          | Texas, complete Schedule T)                           |
|          | Principal occup | ation / Job title (See Instructions)   | Employer (See In     | structions)                    |   |
|          |                 |  |                      |                                |   |
|          | Date            | Full name of contributor D out-of-state PAC (ID#   | ŧ)                   | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
|          | 10/26/2011      | Contributor address; City; State; Zip Code   |                      | \$1,000.00                     |   |
|          |                 | HOUSTON, TX 77019  |                      |                                |   |
|          |                 |  |                      | (If travel outside of          | '<br>Texas, complete Schedule T)                      |
| <u> </u> | Principal occup | ation / Job title (See Instructions)   | Employer (See In     | •                              |   |
|          | INVESTMEN       |  | ALLISON COM          |                                |   |

SCHEDULE A

|   | The Instruction | ON GUIDE explains how to complete this form.  |                       | 1 PAGE #<br>Schedule: 2/4     | 10 Report: 5/101                                   |
|---|-----------------|---|-----------------------|-------------------------------|--|
| 2 | FILER NAME      | Friends of Larry Taylor   |                       | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                         |
| 4 | Date            | 5 Full name of contributor I out-of-state PAC (ID#<br>Allstate Insurance Company PAC          | ŧ C00040253 )         | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
|   | 11/30/2011      | <b>6</b> Contributor address; City; State; Zip Code   |                       | \$4,000.00                    | l  |
|   |                 | Northbrook, IL 60062  |                       |                               | <br>   |
|   |                 |   |                       | -                             | Texas, complete Schedule T)                        |
| 9 | Principal occup | ation / Job title (See Instructions)  | 10 Employer (See In   | structions)                   |  |
|   | Date            | Full name of contributor ID out-of-state PAC (ID#<br>ALTRIA GROUP INC PAC                     | <u>≰_C00089136_</u> ) | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 11/14/2011      | Contributor address; City; State; Zip Code  |                       | \$1,000.00                    |  |
|   |                 | WASHINGTON, DC 20001  |                       |                               | l  |
|   |                 |   |                       | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup | ation / Job title (See Instructions)  | Employer (See In      | structions)                   |  |
|   | Date            | Full name of contributor ID out-of-state PAC (ID#<br>AMERICAN COUNCIL OF LIFE INSURERS PAC    |                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 11/04/2011      | Contributor address; City; State; Zip Code  |                       | \$500.00                      |  |
|   |                 | WASHINGTON, DC 20001  |                       | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup | ation / Job title (See Instructions)  | Employer (See In      |                               | , <b>,</b> <u>,</u>                                |
|   |                 |   |                       |                               |  |
|   | Date            | Full name of contributor  ut-of-state PAC (ID#<br>AMERICAN INSURANCE ASSOCIATION PAC          | ŧ)                    | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 08/04/2011      | Contributor address; City; State; Zip Code<br>AUSTIN, TX 78711                                |                       | \$500.00                      |  |
|   |                 |   |                       | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup | ation / Job title (See Instructions)  | Employer (See In      |                               |  |
|   |                 |   |                       |                               |  |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>AMERICAN NATIONAL INSURANCE COMPAN)<br>PAC |                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 10/21/2011      | Contributor address; City; State; Zip Code  |                       | \$2,500.00                    |  |
|   |                 | GALVESTON, TX 77550   |                       |                               | I  |
|   |                 |   |                       | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup | ation / Job title (See Instructions)  | Employer (See In      | structions)                   |  |

08/04/2011

Contributor address;

Principal occupation / Job title (See Instructions)

Manager

\$1,000.00

#### **POLITICAL CONTRIBUTIONS** SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 3/40 Report: 6/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 4 □ out-of-state PAC (ID# Amount of Date 5 Full name of contributor 7 8 In-kind contribution contribution (\$) description (if applicable) ARMSTRONG, ROBIN 10/26/2011 **6** Contributor address; City; State; Zip Code \$500.00 FRIENDSWOOD, TX 77546 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 PHYSICIAN SELF Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution ) contribution (\$) description (if applicable) ASSOCIATION OF FIRE AND CASUALTY COMPANIES OF **TEXAS PAC**

City; State; Zip Code

|                              | AUSTIN, TX 78701   |                                | l                              |  |
|------------------------------|--|--------------------------------|--------------------------------|--|
|                              |  |                                | (If travel outside of T        | Fexas, complete Schedule T)                      |
| Principal occup              | bation / Job title (See Instructions)  | Employer (See In               | structions)                    |  |
|                              |  |                                |                                |  |
| Date                         | Full name of contributor ID out-of-state PAC (ID#<br>ATMOSENERGYCORPORATIONPAC | <b>≰_C00381954_</b> )          | Amount of<br>contribution (\$) | In-kind contribution description (if applicable) |
| 11/16/2011                   | Contributor address; City; State; Zip Code                                     |                                | \$2,000.00                     |  |
|                              | DALLAS, TX 75240   |                                | I                              |  |
|                              |  |                                | (If travel outside of T        | Fexas, complete Schedule T)                      |
| Principal occup              | bation / Job title (See Instructions)  | Employer (See In               | structions)                    |  |
|                              |  |                                |                                |  |
| Date                         | Full name of contributor D out-of-state PAC (ID# AVERY, CHRIS AND RUTH         | ŧ)                             | Amount of contribution (\$)    | In-kind contribution description (if applicable) |
| 11/04/2011                   | Contributor address; City; State; Zip Code                                     |                                | \$2,000.00                     |  |
|                              | FREDERICKSBURG, TX 78624   |                                | I                              |  |
|                              |  |                                | (If travel outside of T        | Texas, complete Schedule T)                      |
| Principal occup<br>JAMES AVE | pation / Job title (See Instructions)<br>RY                                    | Employer (See In:<br>PRESIDENT | structions)                    |  |
| Date                         | Full name of contributor D out-of-state PAC (ID#<br>Aycox, Rod                 | ŧ)                             | Amount of contribution (\$)    | In-kind contribution description (if applicable) |
| 10/26/2011                   | Contributor address; City; State; Zip Code                                     |                                | \$1,500.00                     |  |
|                              | ALPHARETTA, GA 30022   |                                |                                |  |
|                              |  |                                | (If travel outside of T        | Texas, complete Schedule T)                      |

Employer (See Instructions)

Lone Star Title

| SCHEDULE A |
|------------|
|------------|

|   | The Instruction             | ON GUIDE explains how to complete this form.  |                                   | 1 PAGE #<br>Schedule: 4/4     | 40 Report: 7/101                                      |
|---|-----------------------------|---|-----------------------------------|-------------------------------|---|
| 2 | FILER NAME                  | Friends of Larry Taylor   |                                   | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                            |
| 4 | Date                        | 5 Full name of contributor ☐ out-of-state PAC (ID#<br>BG DISTRIBUTION PARTNERS PAC      | ŧ)                                | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
|   | 11/14/2011                  | 6 Contributor address; City; State; Zip Code  |                                   | \$1,000.00                    | <br>  |
|   |                             | HOUSTON, TX 77040   |                                   |                               | Ι   |
|   |                             |   |                                   | (If travel outside of         | Texas, complete Schedule T)                           |
| 9 | Principal occup             | ation / Job title (See Instructions)  | 10 Employer (See In               | structions)                   |   |
|   | Date                        | Full name of contributor Dout-of-state PAC (ID# BISSETT, WES                            | ŧ)                                | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 10/27/2011                  | Contributor address; City; State; Zip Code  |                                   | \$250.00                      | l   |
|   |                             | BALTIMORE, MD 21210   |                                   |                               | Ι   |
|   |                             |   |                                   |                               | Texas, complete Schedule T)                           |
|   | Principal occup             | ation / Job title (See Instructions)  | Employer (See In                  | structions)                   |   |
|   | Date                        | Full name of contributor Dout-of-state PAC (ID#<br>BLAIR, JIMMY AND NELDA               | ŧ)                                | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 10/19/2011                  | Contributor address; City; State; Zip Code  |                                   | \$500.00                      | l<br>I  |
|   |                             | THE WOODLANDS, TX 77380   |                                   |                               | I   |
|   |                             |   |                                   | -                             | Texas, complete Schedule T)                           |
|   | Principal occup<br>ATTORNEY | ation / Job title (See Instructions)  | Employer (See In<br>BLAIR LAW FIF |                               |   |
|   | Date                        | Full name of contributor D out-of-state PAC (ID#<br>BLOCKER, TREY                       | ŧ)                                | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 08/26/2011                  | Contributor address; City; State; Zip Code<br>HOUSTON, TX 78768                         |                                   | \$1,000.00                    | <br> <br>   |
|   |                             |   |                                   | (If travel outside of         | '<br>Texas, complete Schedule T)                      |
|   | Principal occup             | ation / Job title (See Instructions)  | Employer (See In                  | •                             |   |
|   | ATTORNEY                    |   | SELF                              |                               |   |
|   | Date                        | Full name of contributor Dut-of-state PAC (ID#<br>BLUE CROSS AND BLUE SHIELD OF TEXAS S |                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 08/26/2011                  | Contributor address; City; State; Zip Code  |                                   | \$1,000.00                    |   |
|   |                             | DALLAS, TX 75262  |                                   |                               | I   |
|   |                             |   |                                   | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup             | ation / Job title (See Instructions)  | Employer (See In                  | structions)                   |   |
|   |                             |   |                                   |                               |   |

SCHEDULE A

|                             | ON GUIDE explains how to complete this form.  |                                       | 1 PAGE #<br>Schedule: 5/4     | 10 Report: 8/101                                    |
|-----------------------------|---|---------------------------------------|-------------------------------|---|
| 2 FILER NAME                | Friends of Larry Taylor   |                                       | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                          |
| 4 Date                      | 5 Full name of contributor ☐ out-of-state PAC (ID#<br>BLUE CROSS AND BLUE SHIELD OF TEXAS S |                                       | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)  |
| 11/14/2011                  | <b>6</b> Contributor address; City; State; Zip Code   |                                       | \$1,000.00                    | l   |
|                             | DALLAS, TX 75262  |                                       |                               |   |
| • Principal coour           | action / Joh title (See Instructions)   | 10 Employer (See In                   | -                             | Texas, complete Schedule T)                         |
| 9 Principal occup           | pation / Job title (See Instructions)   | <b>10</b> Employer (See In:           | structions)                   |   |
| Date                        | Full name of contributor ID out-of-state PAC (ID#<br>BNSF RAILPAC                           | # <b>C00235739</b> )                  | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable) |
| 12/08/2011                  | Contributor address; City; State; Zip Code  |                                       | \$1,000.00                    | l   |
|                             | FORT WORTH, TX 76161  |                                       |                               | l   |
|                             |   |                                       | -                             | Texas, complete Schedule T)                         |
| Principal occup             | pation / Job title (See Instructions)   | Employer (See In                      | structions)                   |   |
| Date                        | Full name of contributor D out-of-state PAC (ID#<br>BOND, TOM                               | ¥)                                    | Amount of contribution (\$)   | In-kind contribution description (if applicable)    |
| 08/26/2011                  | Contributor address; City; State; Zip Code  |                                       | \$500.00                      |   |
|                             | GEORGETOWN, TX 78628  |                                       |                               |   |
| Principal occup             | pation / Job title (See Instructions)   | Employer (See In:                     |                               | Texas, complete Schedule T)                         |
| ATTORNEY                    |   | GREENBERG 1                           | FRAURIĜ                       |   |
| Date                        | Full name of contributor D out-of-state PAC (ID#<br>BRETTHAUER, J                           | <b>#)</b>                             | Amount of contribution (\$)   | In-kind contribution description (if applicable)    |
| 11/04/2011                  | Contributor address; City; State; Zip Code  |                                       | \$50.00                       | l   |
|                             | FRIENDSWOOD, TX 77546   |                                       |                               | l   |
|                             |   |                                       | •                             | Texas, complete Schedule T)                         |
| Principal occup             | pation / Job title (See Instructions)   | Employer (See In                      | structions)                   |   |
| Date                        | Full name of contributor D out-of-state PAC (ID#<br>BURNER, BURNIE                          | <b>#)</b>                             | Amount of contribution (\$)   | In-kind contribution description (if applicable)    |
| 09/16/2011                  | Contributor address; City; State; Zip Code  |                                       | \$500.00                      | l   |
|                             | LITTLE ROCK, AR 72201   |                                       |                               | l   |
|                             |   |                                       |                               | Texas, complete Schedule T)                         |
| Principal occup<br>ATTORNEY | pation / Job title (See Instructions)   | Employer (See In:<br>Mitchell William |                               |   |

| SCHEDULE | A |
|----------|---|
|----------|---|

| 2       FILER NAME       Friends of Larry Taylor       3       ACCOUNT # (Ethics Commission filers)<br>00051862         4       Date       5       Full name of contributor<br>CAMMACK, KERRY       Image: contributor<br>CAMMACK, KERRY       Image: contributor<br>CAMMACK, KERRY       File out-of-state PAC (ID#)       7       Amount of<br>contribution (\$)       Image: contributor<br>description (if applicable<br>\$500.00         11/14/2011       6       Contributor address;<br>AUSTIN, TX 78701       City; State; Zip Code<br>AUSTIN, TX 78701       full rareel outside of Texas, complete Schedule T)         9       Principal occupation / Job title (See Instructions)<br>ATTORNEY       10       Employer (See Instructions)<br>SELF       Image: contributor<br>contributor address; City; State; Zip Code<br>DALLAS, TX 75209       Amount of<br>contribution (\$)       Image: contributor<br>description (if applicable<br>\$1,000.00         Principal occupation / Job title (See Instructions)<br>GOVT RELATIONS       Contributor address; City; State; Zip Code<br>DALLAS, TX 75209       Mit travel outside of Texas, complete Schedule T)         Principal occupation / Job title (See Instructions)<br>GOVT RELATIONS       Employer (See Instructions)<br>CAPITOL INSIGHT       Image: contributor<br>description (if applicable<br>contribution (\$)         Date       Full name of contributor ID       out-of-state PAC (ID#)<br>CARR, SNAPPER AND MINDY       Amount of<br>contribution (\$)       Image: contributor<br>description (if applicable<br>contribution (\$)   | e)     |
|--|--------|
| CAMMACK, KERRY       contribution (\$)       description (if applicable         11/14/2011       6       Contributor address;       City; State; Zip Code       \$500.00         AUSTIN, TX 78701       (ff travel outside of Texas, complete Schedule T)         9       Principal occupation / Job title (See Instructions)       10       Employer (See Instructions)         SELF       Amount of contributor address;       City; State; Zip Code       Amount of contribution (\$)       In-kind contribution (\$)         Date       Full name of contributor address;       Out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind contribution (\$)         10/19/2011       Contributor address;       City; State; Zip Code       \$1,000.00       In-kind contribution (\$)         Principal occupation / Job title (See Instructions)       City; State; Zip Code       \$1,000.00       In-kind contribution (\$)         0ALLAS, TX 75209       Inf travel outside of Texas, complete Schedule T)       If travel outside of Texas, complete Schedule T)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       In-kind contribution         GOVT RELATIONS       Employer (See Instructions)       In-kind contribution         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of In-kind contribution  | e)     |
| AUSTIN, TX 78701       Image: construction of the second sec | ,<br>_ |
| 9       Principal occupation / Job title (See Instructions)<br>ATTORNEY       10       Employer (See Instructions)<br>SELF         Date       Full name of contributor       out-of-state PAC (ID#)<br>CAMPBELL, DREW AND JENNIFER       Amount of<br>contribution (\$)       In-kind contribution<br>description (if applicable<br>to the contribution (\$)         10/19/2011       Contributor address;       City;       State;       Zip Code<br>DALLAS, TX 75209       \$1,000.00         Principal occupation / Job title (See Instructions)<br>GOVT RELATIONS       Employer (See Instructions)<br>CAPITOL INSIGHT       In-kind contribution  | ,<br>_ |
| 9       Principal occupation / Job title (See Instructions)<br>ATTORNEY       10       Employer (See Instructions)<br>SELF         Date       Full name of contributor       out-of-state PAC (ID#)<br>CAMPBELL, DREW AND JENNIFER       Amount of<br>contribution (\$)       In-kind contribution<br>description (if applicable<br>pallicable         10/19/2011       Contributor address;       City;       State;       Zip Code<br>DALLAS, TX 75209       \$1,000.00       I         Principal occupation / Job title (See Instructions)<br>GOVT RELATIONS       Employer (See Instructions)<br>CAPITOL INSIGHT       Employer (See Instructions)<br>CAPITOL INSIGHT  | ,<br>_ |
| Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind contribution description (if applicable contribution (\$)         10/19/2011       Contributor address;       City;       State;       Zip Code       \$1,000.00       In-kind contribution (if applicable contribution (if applicable contribution (if applicable contribution (\$)         DALLAS, TX 75209       Intervention       Intervention       Intervention         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Intervention         GOVT RELATIONS       Employer (See Instructions)       Intervention         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of       In-kind contribution   | ,<br>_ |
| CAMPBELL, DREW AND JENNIFER       contribution (\$)       description (if applicable         10/19/2011       Contributor address;       City;       State;       Zip Code       \$1,000.00       I         DALLAS, TX 75209       I       I       I       I       IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII  | ,<br>_ |
| DALLAS, TX 75209     I       Principal occupation / Job title (See Instructions)     Employer (See Instructions)       GOVT RELATIONS     CAPITOL INSIGHT       Date     Full name of contributor     out-of-state PAC (ID#)   |        |
| Image: Construction state       (If travel outside of Texas, complete Schedule T)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         GOVT RELATIONS       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#)         Amount of       In-kind contribution   |        |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         GOVT RELATIONS       CAPITOL INSIGHT         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of       In-kind contribution   |        |
| GOVT RELATIONS     CAPITOL INSIGHT       Date     Full name of contributor     out-of-state PAC (ID#)     Amount of     In-kind contribution   |        |
|  |        |
|  | э)     |
| 08/26/2011 Contributor address; City; State; Zip Code \$250.00   |        |
| AUSTIN, TX 78735   |        |
| (If travel outside of Texas, complete Schedule T)  |        |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)  |        |
| Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind contribution description (if applicable)         CASH AMERICA INTERNATIONAL INC MULTICANDIDATE PAC       Amount of contribution (\$)       In-kind contribution (\$)       In-kind contribution (\$)  | e)     |
| 10/26/2011 Contributor address; City; State; Zip Code \$1,000.00   |        |
| FORT WORTH, TX 76102   |        |
| (If travel outside of Texas, complete Schedule T)  |        |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)  |        |
| Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind contribution description (if applicable)         CENTERPOINT ENERGY INC PAC       Contribution (\$)       In-kind contribution (\$)       In-kind contribution (\$)   | e)     |
| 08/26/2011 Contributor address; City; State; Zip Code \$2,500.00   |        |
| HOUSTON, TX 77210  |        |
| (If travel outside of Texas, complete Schedule T)  |        |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)  |        |

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 7/40 Report: 10/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) CHOCTAW NATION OF OKLAHOMA 10/06/2011 6 Contributor address; City; State; Zip Code \$5,000.00 DURANT, OK 74702 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution contribution (\$) description (if applicable) CIGAINERO, JAMES 12/08/2011 Contributor address; City; State; Zip Code \$50.00 PEARLAND, TX 77581 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor X out-of-state PAC (ID# C00085316 ) Date In-kind contribution Amount of contribution (\$) description (if applicable) CIGNA CORPORATION POLITICAL ACTION COMMITTEE 11/08/2011 Contributor address; City; State; Zip Code \$2,500.00 NATIONAL HARBOR, MD 20745 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) CNA CITIZENS FOR GOOD GOVERNMENT City; State; Zip Code 11/14/2011 Contributor address: \$2,500.00 FORT WORTH, TX 76102 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) COBB, RONALD 08/26/2011 Contributor address; City; State; Zip Code \$200.00 AUSTIN, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

|  | SCH | EDUI | LE | Α |
|--|-----|------|----|---|
|--|-----|------|----|---|

| The INSTRUCTION   | ON GUIDE explains how to complete this form.   |                     | 1 PAGE #<br>Schedule: 8/4      | 40 Report: 11/101                                   |
|-------------------|--|---------------------|--------------------------------|---|
| 2 FILER NAME      | Friends of Larry Taylor  |                     | <b>3</b> ACCOUNT # 00051862    | (Ethics Commission filers)                          |
| 4 Date            | 5 Full name of contributor ⊠ out-of-state PAC (ID# COMCAST CORPORATION PAC           | E C00248716 )       | 7 Amount of contribution (\$)  | 8 In-kind contribution description (if applicable)  |
| 12/01/2011        | <b>6</b> Contributor address; City; State; Zip Code                                  |                     | \$1,500.00                     | l<br>I  |
|                   | PHILADELPHIA, PA 19103   |                     |                                | I   |
|                   |  |                     | •                              | Texas, complete Schedule T)                         |
| 9 Principal occur | pation / Job title (See Instructions)  | 10 Employer (See In | structions)                    |   |
| Date              | Full name of contributor Dout-of-state PAC (ID# CONSERVATIVE REPUBLICANS OF TEXAS PA | ,                   | Amount of<br>contribution (\$) | In-kind contribution<br>description (if applicable) |
|                   |  |                     |                                | ADVERTISING   |
| 11/09/2011        | Contributor address; City; State; Zip Code   |                     | \$200.00                       | ELECTRONIC MEDIA                                    |
|                   | HOUSTON, TX 77056  |                     |                                |   |
|                   |  |                     |                                | Texas, complete Schedule T)                         |
| Principal occup   | pation / Job title (See Instructions)  | Employer (See In    | structions)                    |   |
| Date              | Full name of contributor Out-of-state PAC (ID#                                       | ,                   | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
|                   | CONSERVATIVE REPUBLICANS OF TEXAS PA   |                     |                                | ADVERTISING   |
| 11/09/2011        | Contributor address; City; State; Zip Code   |                     | \$1,156.51                     | EXPENSE / EMAIL<br>DISTRIBUTION                     |
|                   | HOUSTON, TX 77056  |                     |                                | l   |
|                   |  |                     | (If travel outside of          | Texas, complete Schedule T)                         |
| Principal occup   | pation / Job title (See Instructions)  | Employer (See In    | structions)                    |   |
|                   |  |                     |                                |   |
| Date              | Full name of contributor D out-of-state PAC (ID# COOK, ROBERT                        | ŧ)                  | Amount of<br>contribution (\$) | In-kind contribution<br>description (if applicable) |
|                   |  |                     |                                |   |
| 10/26/2011        | Contributor address; City; State; Zip Code   |                     | \$250.00                       | I   |
|                   | EAGLE LAKE, TX 77434   |                     |                                | I   |
| Driveirelese      |  | England (On a la    | •                              | Texas, complete Schedule T)                         |
| Principal occup   | pation / Job title (See Instructions)  | Employer (See In    | structions)                    |   |
| Date              | Full name of contributor D out-of-state PAC (ID# CORBETT, WELDON                     | ŧ)                  | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
| 12/07/2011        | Contributor address; City; State; Zip Code   |                     | \$500.00                       | 1   |
|                   | FRIENDSWOOD, TX 77546  |                     |                                | I   |
|                   |  |                     | (If travel outside of          | Texas, complete Schedule T)                         |
| Principal occup   | pation / Job title (See Instructions)  | Employer (See In    | structions)                    |   |
|                   |  |                     |                                |   |

TDD 1-800-735-2989

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 9/40 Report: 12/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 4 Date 5 Full name of contributor out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) CROWDER, RON 12/13/2011 **6** Contributor address; City; State; Zip Code \$250.00 WEBSTER, TX 77598 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#\_ Amount of Date In-kind contribution contribution (\$) description (if applicable) DALE, ANTHONY AND MARY . 08/26/2011 Contributor address; City; State; Zip Code \$50.00 CEDAR PARK, TX 78613 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) DALE. MITCHELL 10/14/2011 Contributor address; City; State; Zip Code \$1,000.00 DICKINSON, TX 77539 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) MCREE FORD PRESIDENT Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) DC STRATEGIC CONSULTING City; State; Zip Code 10/19/2011 Contributor address: \$500.00 DALLAS, TX 75214 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) DELARGEY, ELIZABETH 09/16/2011 Contributor address; City; State; Zip Code \$500.00 LITTLE ROCK, AR 72201 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTORNEY MITCHELL WILLIAMS Electronically filed using Web Filer Version 1.6

Principal occupation / Job title (See Instructions)

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 10/40 Report: 13/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) DELISI COMMUNICATIONS PAC 11/14/2011 **6** Contributor address; City; State; Zip Code \$2,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) DUDINSKY, LEE 11/06/2011 Contributor address; City; State; Zip Code \$500.00 HOUSTON, TX 77024 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) SELF ATTORNEY Date Full name of contributor out-of-state PAC (ID#) In-kind contribution Amount of description (if applicable) contribution (\$) EBNER. TOMMY 12/01/2011 Contributor address; City; State; Zip Code \$100.00 FRIENDSWOOD, TX 77546 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor I out-of-state PAC (ID# C00082792 Date Amount of In-kind contribution contribution (\$) description (if applicable) ELI LILLY AND COMPANY PAC City; State; Zip Code 11/18/2011 Contributor address: \$1,000.00 INDIANAPOLIS, IN 46285 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) EMERGENCY MEDICINE PAC OF TEXAS 11/14/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78746

#### Electronically filed using Web Filer Version 1.6

(If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

SCHEDULE A

### **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

|   |                 | • •  |                     | Schedule: 11                  | /40 Report: 14/101                                    |
|---|-----------------|--|---------------------|-------------------------------|---|
| 2 | FILER NAME      | Friends of Larry Taylor  |                     | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                            |
| 4 | Date            | 5 Full name of contributor D out-of-state PAC (ID# EMPACT  | )                   | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
|   | 12/09/2011      | 6 Contributor address; City; State; Zip Code   |                     | \$500.00                      | <br>  |
|   |                 | AUSTIN, TX 78701   |                     | <i></i>                       | I<br>   |
|   | <u> </u>        |  |                     | -                             | Texas, complete Schedule T)                           |
| 9 | Principal occup | ation / Job title (See Instructions)   | 10 Employer (See In | structions)                   |   |
|   | Date            | Full name of contributor dut-of-state PAC (ID#<br>ENERGY PAC OF ENERGY FUTURE HOLDING<br>CORPORATION |                     | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 11/18/2011      | Contributor address; City; State; Zip Code<br>DALLAS, TX 75201                                       |                     | \$1,000.00                    | '<br> <br>  |
|   |                 |  |                     | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>ENTERGY CORPORATION PAC                           | )                   | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 11/18/2011      | Contributor address; City; State; Zip Code   |                     | \$1,000.00                    | l<br>I  |
|   |                 | LITTLE ROCK, AR 72201  |                     | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>EVANS, NANCY                                      | )                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 12/01/2011      | Contributor address; City; State; Zip Code   |                     | \$50.00                       | <br>  |
|   |                 | FRIENDSWOOD, TX 77545  |                     |                               | I   |
|   |                 |  |                     | -                             | Texas, complete Schedule T)                           |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |
|   | Date            | Full name of contributor Dout-of-state PAC (ID# EVANS, RICHARD                                       | )                   | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 08/26/2011      | Contributor address; City; State; Zip Code   |                     | \$250.00                      | <br>  |
|   |                 | LAKEWAY, TX 78734  |                     |                               | I   |
|   |                 |  |                     | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |

TDD 1-800-735-2989

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

|                        | ON GUIDE explains how to complete this form.   |                                  | 1 PAGE #<br>Schedule: 12      | /40 Report: 15/101  |
|------------------------|--|----------------------------------|-------------------------------|---|
| 2 FILER NAME           | Friends of Larry Taylor  |                                  | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                                |
| 4 Date                 | 5 Full name of contributor Dout-of-state PAC (ID#<br>EXXON MOBILE CORPORATION - PAC OF TE> |                                  | 7 Amount of contribution (\$) | <b>8</b> In-kind contribution description (if applicable) |
| 12/01/2011             | <b>6</b> Contributor address; City; State; Zip Code  |                                  | \$1,500.00                    | <br>  |
|                        | AUSTIN, TX 78701   |                                  |                               | I   |
|                        |  |                                  | •                             | Texas, complete Schedule T)                               |
| 9 Principal occur      | pation / Job title (See Instructions)  | 10 Employer (See In              | structions)                   |   |
| Date                   | Full name of contributor Dout-of-state PAC (ID#<br>FARMERS EMPLOYEE AND AGENT PAC OF T     | ,                                | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)       |
| 10/26/2011             | Contributor address; City; State; Zip Code   |                                  | \$5,000.00                    | l   |
|                        | AUSTIN, TX 78701   |                                  |                               | I   |
| Dringinglaggur         | action / Joh title (Cas Instructions)  | Employer (See In                 |                               | Texas, complete Schedule T)                               |
|                        | pation / Job title (See Instructions)  | Employer (See In                 |                               |   |
| Date                   | Full name of contributor D out-of-state PAC (ID#<br>FAUST, DON                             | <b>#)</b>                        | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)       |
| 10/19/2011             | Contributor address; City; State; Zip Code<br>HOUSTON, TX 77229                            |                                  | \$1,000.00                    |   |
|                        |  |                                  | -                             | I<br>Texas, complete Schedule T)                          |
| Principal occup<br>CEO | pation / Job title (See Instructions)  | Employer (See In<br>FAUST DISTRI |                               |   |
| Date                   | Full name of contributor D out-of-state PAC (ID#<br>FLAKE, RICHARD                         | ŧ)                               | Amount of contribution (\$)   | In-kind contribution description (if applicable)          |
| 11/07/2011             | Contributor address; City; State; Zip Code   |                                  | \$500.00                      | l   |
|                        | FRIENDSWOOD, TX 77546  |                                  |                               | I   |
|                        |  |                                  | •                             | Texas, complete Schedule T)                               |
| ATTORNEY               | pation / Job title (See Instructions)  | Employer (See In<br>COKINIOS BOS |                               |   |
| Date                   | Full name of contributor D out-of-state PAC (ID#<br>FLANAGAN, MIKE                         | ŧ)                               | Amount of contribution (\$)   | In-kind contribution description (if applicable)          |
| 12/01/2011             | Contributor address; City; State; Zip Code   |                                  | \$50.00                       |   |
|                        | PEARLAND, TX 77584   |                                  |                               | I   |
|                        |  |                                  |                               | Texas, complete Schedule T)                               |
| Principal occup        | pation / Job title (See Instructions)  | Employer (See In                 | structions)                   |   |

#### SCHEDULE A

|   |                             | ON GUIDE explains how to complete this form.                                 |                                  | 1 PAGE #<br>Schedule: 13/40 Report: 16/101 |   |
|---|-----------------------------|--|----------------------------------|--|---|
| 2 | FILER NAME                  | Friends of Larry Taylor  |                                  | <b>3</b> ACCOUNT # 00051862                | (Ethics Commission filers)                          |
| 4 | Date                        | 5 Full name of contributor Dout-of-state PAC (ID#<br>FRASER FOR TEXAS SENATE | ŧ)                               | 7 Amount of contribution (\$)              | 8 In-kind contribution description (if applicable)  |
|   | 10/04/2011                  | 6 Contributor address; City; State; Zip Code                                 |                                  | \$10,000.00                                |   |
|   |                             | AUSTIN, TX 78711   |                                  |  |   |
|   | <u> </u>                    |  |                                  | -  | Texas, complete Schedule T)                         |
| 9 | Principal occup             | ation / Job title (See Instructions)   | 10 Employer (See In:             | structions)                                |   |
|   | Date                        | Full name of contributor Dut-of-state PAC (ID#<br>FRIEDKIN, DAN AND DEBRA    | ŧ)                               | Amount of contribution (\$)                | In-kind contribution<br>description (if applicable) |
|   | 10/26/2011                  | Contributor address; City; State; Zip Code                                   |                                  | \$2,500.00                                 | <br>  |
|   |                             | HOUSTON, TX 77210  |                                  |  | l   |
|   |                             |  |                                  | -  | Texas, complete Schedule T)                         |
|   | Principal occup<br>MANAGEME | ation / Job title (See Instructions)<br>NT                                   | Employer (See In:<br>GULF STATES | structions)<br>TOYOTA                      |   |
|   | Date                        | Full name of contributor D out-of-state PAC (ID#<br>FRIENDS OF BAYLOR MED    | ŧ)                               | Amount of contribution (\$)                | In-kind contribution description (if applicable)    |
|   | 10/26/2011                  | Contributor address; City; State; Zip Code                                   |                                  | \$1,000.00                                 |   |
|   |                             | HOUSTON, TX 77010  |                                  | (If travel outside of                      | Texas, complete Schedule T)                         |
|   | Principal occup             | ation / Job title (See Instructions)   | Employer (See In                 | -  | / <u></u> _   |
|   |                             |  |                                  |  |   |
|   | Date                        | Full name of contributor D out-of-state PAC (ID#<br>FRIENDS OF JOHN DAVIS    | ŧ)                               | Amount of contribution (\$)                | In-kind contribution<br>description (if applicable) |
|   | 11/14/2011                  | Contributor address; City; State; Zip Code                                   |                                  | \$1,000.00                                 |   |
|   |                             | HOUSTON, TX 77046  |                                  |  |   |
|   |                             |  |                                  |  | Texas, complete Schedule T)                         |
|   | Principal occup             | ation / Job title (See Instructions)   | Employer (See In                 | structions)                                |   |
|   | Date                        | Full name of contributor  GANNON, JOHN                                       | ŧ)                               | Amount of contribution (\$)                | In-kind contribution description (if applicable)    |
|   | 10/28/2011                  | Contributor address; City; State; Zip Code                                   |                                  | \$500.00                                   | l   |
|   |                             | KATY, TX 77450   |                                  |  | I   |
|   |                             |  |                                  | (If travel outside of                      | Texas, complete Schedule T)                         |
|   | Principal occup<br>OWNER    | ation / Job title (See Instructions)   | Employer (See In:<br>JGI INC     | structions)                                |   |

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 14/40 Report: 17/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) GARDERE WYNNE SEWELL LLP 12/07/2011 **6** Contributor address: City; State; Zip Code \$1,000.00 DALLAS, TX 75201 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Gardner, Gregory . . . . . . . . . . . . . . . . 12/28/2011 Contributor address; City; State; Zip Code \$250.00 Santa Fe, TX 77510 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID# C00486514 ) Date In-kind contribution Amount of contribution (\$) description (if applicable) Germania Farm Mutual Political Action Committee 12/19/2011 Contributor address; City; State; Zip Code \$1,000.00 Brenham, TX 77834 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) GHBA HOME-PAC City; State; Zip Code 10/26/2011 Contributor address: \$1,000.00 HOUSTON, TX 77064 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#) Date Amount of In-kind contribution contribution (\$) description (if applicable) GIUSTI, JOSEPH 12/14/2011 Contributor address; City; State; Zip Code \$50.00 SANTA FE, TX 77510 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

| SCHEDULE | Α |
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| CONEDULE |   |

|   | The Instruction              | NN GUIDE explains how to complete this form.  |                              | 1 PAGE #<br>Schedule: 15      | /40 Report: 18/101                                    |
|---|------------------------------|---|------------------------------|-------------------------------|---|
| 2 | FILER NAME                   | Friends of Larry Taylor   |                              | 3 ACCOUNT # 00051862          | (Ethics Commission filers)                            |
| 4 | Date                         | 5 Full name of contributor  dut-of-state PAC (ID# GLENN, ERIC                               | )                            | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
|   | 08/26/2011                   | 6 Contributor address; City; State; Zip Code  |                              | \$250.00                      | <br>  |
|   |                              | AUSTIN, TX 78738  |                              | (If travel outside of         | Texas, complete Schedule T)                           |
| 9 | Principal occup              | ation / Job title (See Instructions)  | 10 Employer (See In          |                               |   |
|   |                              | , , , , , , , , , , , , , , , , , , ,   |                              | ,                             |   |
|   | Date                         | Full name of contributor Dout-of-state PAC (ID# GRAY, SHARON                                | )                            | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 12/20/2011                   | Contributor address; City; State; Zip Code  |                              | \$200.00                      |   |
|   |                              | FRIENDSWOOD, TX 77549   |                              |                               | I   |
|   |                              |   |                              | -                             | Texas, complete Schedule T)                           |
|   | Principal occup              | ation / Job title (See Instructions)  | Employer (See In:            | structions)                   |   |
|   | Date                         | Full name of contributor GREENBERG, STEVE   | )                            | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 10/19/2011                   | Contributor address; City; State; Zip Code  |                              | \$500.00                      | 1   |
|   |                              | GALVESTON, TX 77551   |                              |                               | I   |
|   |                              |   |                              | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup<br>GOVT RELA | ation / Job title (See Instructions)<br>ΓΙΟΝS   | Employer (See In:<br>LANDRYS | structions)                   |   |
|   | Date                         | Full name of contributor ID out-of-state PAC (ID#<br>GREENBURG TRAURIG P.A. POLITICAL ACTIO | ,                            | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 11/14/2011                   | Contributor address; City; State; Zip Code  |                              | \$2,000.00                    | <br>  |
|   |                              | ALBANY, NY 12207  |                              |                               | Ι   |
|   |                              |   |                              | (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#  | )                            | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   |                              | GULF STATES TOYOTA INC STATE PAC  |                              | τοητηρητιού (Φ)               |   |
|   | 10/26/2011                   | Contributor address; City; State; Zip Code  |                              | \$500.00                      | 1   |
|   |                              | HOUSTON, TX 77077   |                              |                               | 1   |
|   |                              |   |                              | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup              | ation / Job title (See Instructions)  | Employer (See In             |                               |   |
|   |                              |   |                              |                               |   |
| - |                              |   |                              | E                             | lectronically filed using Web Filer Version 1.6       |

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 16/40 Report: 19/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) HAIGOOD, LYNDELL AND CATHY 11/14/2011 6 Contributor address; City; State; Zip Code \$100.00 WICHITA FALLS, TX 76310 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution contribution (\$) description (if applicable) HARRIS, DAVID 09/16/2011 Contributor address; City; State; Zip Code \$500.00 HOUSON, TX 77019 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) MANHATTAN LIFE INS CO CEO Date Full name of contributor out-of-state PAC (ID#) In-kind contribution Amount of contribution (\$) description (if applicable) Hartman, Edward \$200.00 12/19/2011 Contributor address; City; State; Zip Code League City, TX 77574 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Hayley, Jimmy 12/21/2011 Contributor address; City; State; Zip Code \$100.00 Texas City, TX 77590 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#) Date Amount of In-kind contribution contribution (\$) description (if applicable) HENDERSON, CHUCK 09/30/2011 Contributor address; City; State; Zip Code \$100.00 LAKE JACKSON, TX 77566 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

| SCHEDULE A |
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|   | The INSTRUCTION GUIDE explains how to complete this form. |  | 1 PAGE #<br>Schedule: 17/40 Report: 20/101 |                               |   |
|---|---|--|--|-------------------------------|---|
| 2 | FILER NAME  | Friends of Larry Taylor  |  | 3 ACCOUNT # 00051862          | (Ethics Commission filers)                            |
| 4 | Date  | 5 Full name of contributor D out-of-state PAC (ID#<br>HILLCO PAC | :)   | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
|   | 08/26/2011  | 6 Contributor address; City; State; Zip Code                     |  | \$2,000.00                    |   |
|   |   | AUSTIN, TX 78701   |  | (If travel outside of         | Texas, complete Schedule T)                           |
| 9 | Principal occup   | ation / Job title (See Instructions)                             | 10 Employer (See In                        |                               |   |
|   |   |  |  |                               |   |
|   | Date  | Full name of contributor Dout-of-state PAC (ID# Hinkle, Ronald   | :)   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 08/26/2011  | Contributor address; City; State; Zip Code                       |  | \$250.00                      | <br>  |
|   |   | Austin, TX 78711   |  |                               | l   |
|   |   |  |  | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup<br>Government I                           | ation / Job title (See Instructions)<br>Relations                | Employer (See In<br>Self                   | structions)                   |   |
|   | Date  | Full name of contributor   | !)   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 11/14/2011  | Contributor address; City; State; Zip Code                       |  | \$250.00                      |   |
|   |   | AUSTIN, TX 78711   |  |                               |   |
|   | <b>D</b> · · ·  |  | <b>E 1</b> (2) <b>1</b>                    | -                             | Texas, complete Schedule T)                           |
|   | Principal occup   | ation / Job title (See Instructions)                             | Employer (See In                           | structions)                   |   |
|   | Date  | Full name of contributor Dout-of-state PAC (ID# HoesI, Alice     | ·)   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 12/31/2011  | Contributor address; City; State; Zip Code                       |  | \$100.00                      |   |
|   |   | FRIENDSWOOD, TX 77546  |  |                               | l   |
|   |   |  |  | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup   | ation / Job title (See Instructions)                             | Employer (See In                           | structions)                   |   |
|   | Date  | Full name of contributor  ut-of-state PAC (ID#<br>HOLBROOK, RAY  | :)   | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 12/12/2011  | Contributor address; City; State; Zip Code                       |  | \$100.00                      |   |
|   |   | SANTA FE, TX 77610   |  |                               | l   |
|   |   |  |  | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup   | ation / Job title (See Instructions)                             | Employer (See In                           | structions)                   |   |

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 18/40 Report: 21/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 4 Date 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) HOLMES, NED 10/26/2011 6 Contributor address; City; State; Zip Code \$500.00 HOUSTON, TX 77007 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 NED HOLMES INVESTMENTS CEO Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) HOWARD, JACK 12/01/2011 Contributor address; City; State; Zip Code \$100.00 LAPORTE, TX 77571 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Howard, Jack 12/30/2011 Contributor address; City; State; Zip Code \$100.00 LAPORTE, TX 77571 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Howard, Jay 08/16/2011 Contributor address; City; State; Zip Code \$500.00 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Government Relations** Hilco Partners Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) INDEPENDENT BANKERS ASSOCIATION OF TEXAS PAC 09/30/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 19/40 Report: 22/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID#\_ 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) JACKSON, RICHARD AND PAULA 11/14/2011 **6** Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78730 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 GOVT RELATIONS TEXAS RESTAURANT ASSOC Full name of contributor D out-of-state PAC (ID# Amount of Date In-kind contribution ) contribution (\$) description (if applicable) JEE WONG, MARTHA 10/26/2011 Contributor address; City; State; Zip Code \$250.00 HOUSTON, TX 77019 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) JONES. NEAL T BUDDY 08/26/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **HILCO PARTNERS** ATTORNEY Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) **KEEL. LARA** 08/26/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **GOVERNMENT AFFAIRS TEXAS LOBBY GROUP** Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) KERKHOVE, LARRY 12/06/2011 Contributor address; City; State; Zip Code \$25.00 LEAGUE CITY, TX 77578 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

| SCHEDULE | Α |
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|   | The Instruction             | N GUIDE explains how to complete this form.                                 |                                   | 1 PAGE #<br>Schedule: 20       | /40 Report: 23/101                                  |
|---|-----------------------------|---|-----------------------------------|--------------------------------|---|
| 2 | FILER NAME                  | Friends of Larry Taylor   |                                   | <b>3</b> ACCOUNT # 00051862    | (Ethics Commission filers)                          |
| 4 | Date                        | 5 Full name of contributor ID out-of-state PAC (ID# KOCH INDUSTRIES INC PAC | C00236489)                        | 7 Amount of contribution (\$)  | 8 In-kind contribution description (if applicable)  |
|   | 11/18/2011                  | 6 Contributor address; City; State; Zip Code                                |                                   | \$2,000.00                     |   |
|   |                             | WASHINGTON, DC 20005  |                                   | (If travel outside of          | Texas, complete Schedule T)                         |
| 9 | Principal occup             | ation / Job title (See Instructions)  | 10 Employer (See In               | structions)                    |   |
|   |                             |   |                                   |                                |   |
|   | Date                        | Full name of contributor Dout-of-state PAC (ID# Koncaba, Kenneth            | )                                 | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
|   | 12/30/2011                  | Contributor address; City; State; Zip Code                                  |                                   | \$250.00                       | <br>  |
|   |                             | Friendswood, TX 77546   |                                   |                                | <br>  |
|   | Driveireless                |   | European (Decolor                 | -                              | Texas, complete Schedule T)                         |
|   | Principal occup             | ation / Job title (See Instructions)  | Employer (See In                  | structions)                    |   |
|   | Date                        | Full name of contributor Dout-of-state PAC (ID# Koncaba, Kristina           | )                                 | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
|   | 12/30/2011                  | Contributor address; City; State; Zip Code                                  |                                   | \$250.00                       |   |
|   |                             | FRIENDSWOOD, TX 77545   |                                   |                                | I   |
|   |                             |   |                                   | •                              | Texas, complete Schedule T)                         |
|   | Principal occup             | ation / Job title (See Instructions)  | Employer (See In:                 | structions)                    |   |
|   | Date                        | Full name of contributor Dout-of-state PAC (ID# KROLL, CARRIE AND JOHN      | )                                 | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable) |
|   | 08/26/2011                  | Contributor address; City; State; Zip Code                                  |                                   | \$500.00                       |   |
|   |                             | DRIPPING SPRINGS, TX 78620  |                                   |                                | I   |
|   |                             |   |                                   | (If travel outside of          | Texas, complete Schedule T)                         |
|   | Principal occup<br>ATTORNEY | ation / Job title (See Instructions)  | Employer (See In:<br>HRWK INC     | structions)                    |   |
|   | Date                        | Full name of contributor  dut-of-state PAC (ID#<br>LABOON, R BRUCE          | )                                 | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable) |
|   |                             |   |                                   |                                |   |
|   | 10/26/2011                  | Contributor address; City; State; Zip Code                                  |                                   | \$1,000.00                     | I   |
|   |                             | HOUSTON, TX 77002   |                                   |                                | I   |
|   |                             |   |                                   | •                              | Texas, complete Schedule T)                         |
|   | Principal occup<br>ATTORNEY | ation / Job title (See Instructions)  | Employer (See In:<br>LOCKE LORD I | structions)<br>BISSELL & LIDDE |   |
|   |                             |   |                                   | F                              | lectronically filed using Web Filer Version 1.6     |

| SCHEDULE | Α |
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| CONFEDER |   |

| The INSTRUCTION GUIDE explains how to complete this form. |             |   | 1 PAGE #<br>Schedule: 21          | /40 Report: 24/101             |   |
|---|-------------|---|-----------------------------------|--------------------------------|---|
| 2 FILE  | ER NAME     | Friends of Larry Taylor   |                                   | 3 ACCOUNT # 00051862           | (Ethics Commission filers)                            |
| <b>4</b> D  | ate         | 5 Full name of contributor □ out-of-state PAC (ID#<br>LATIMER, TRUETT                     | ŧ)                                | 7 Amount of contribution (\$)  | 8 In-kind contribution<br>description (if applicable) |
| 11/0  | 04/2011     | <b>6</b> Contributor address; City; State; Zip Code                                       |                                   | \$100.00                       | l<br>I  |
|   |             | HOUSTON, TX 77027   |                                   | <i>"</i>                       | <br>  |
| • Drim  |             | pation / Job title (See Instructions)   | <b>10</b> Employer (See In:       |                                | Texas, complete Schedule T)                           |
| 9 Princ   |             |   |                                   |                                |   |
| D   | ate         | Full name of contributor Dut-of-state PAC (ID#  | ŧ)                                | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
| 11/2  | 20/2011     | Contributor address; City; State; Zip Code  |                                   | \$1,000.00                     | <br>  |
|   |             | FRIENDSWOOD, TX 77546   |                                   | (If travel outside of          | Texas, complete Schedule T)                           |
| Prine   | cipal occup | bation / Job title (See Instructions)   | Employer (See In                  |                                |   |
|   | NAGEMĖ      | NT  | NOVALINK                          |                                |   |
| D   | ate         | Full name of contributor Dout-of-state PAC (ID#   | ŧ)                                | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
| 11/2  | 20/2011     | Contributor address; City; State; Zip Code<br>FRIENDSWOOD, TX 77546                       |                                   | \$1,000.00                     |   |
|   |             |   |                                   | (If travel outside of          | I Texas, complete Schedule T)                         |
| Prine<br>Sale   |             | ation / Job title (See Instructions)  | Employer (See In:<br>IGNITE/STREA |                                |   |
| D   | ate         | Full name of contributor ID out-of-state PAC (ID#<br>LIBERTY MUTUAL INSURANCE COMPANY PAG | ,                                 | Amount of contribution (\$)    | In-kind contribution description (if applicable)      |
| 08/2  | 26/2011     | Contributor address; City; State; Zip Code  |                                   | \$2,000.00                     | <br>  |
|   |             | BOSTON, MA 02117  |                                   |                                |   |
|   |             |   |                                   | (If travel outside of          | Texas, complete Schedule T)                           |
| Princ   | cipal occup | pation / Job title (See Instructions)   | Employer (See In                  | structions)                    |   |
| D   | ate         | Full name of contributor I out-of-state PAC (ID#<br>LIBERTY MUTUAL INSURANCE COMPANY PA   | ,                                 | Amount of<br>contribution (\$) | In-kind contribution description (if applicable)      |
| 11/1  | 4/2011      | Contributor address; City; State; Zip Code  |                                   | \$361.00                       | <br>  |
|   |             | BOSTON, TX 02117  |                                   |                                | I   |
|   |             |   |                                   | (If travel outside of          | Texas, complete Schedule T)                           |
| Princ   | cipal occup | ation / Job title (See Instructions)  | Employer (See In                  | structions)                    |   |

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 22/40 Report: 25/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) LICENSED BEVERAGE DISTRIBUTORS PAC 09/13/2011 6 Contributor address; City; State; Zip Code \$2,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) LIPAC 12/05/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) LOCKE LORD BISSELL & LIDDELL LUNCHEON 10/18/2011 Contributor address; City; State; Zip Code \$1,750.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) MAAZ, SHARON 12/09/2011 Contributor address: City; State; Zip Code \$100.00 LEAGUE CITY, TX 77573 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) MAFRIGE, DON AND NANCY 09/30/2011 Contributor address; City; State; Zip Code \$500.00 GALVESTON, TX 77551 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) OWNER DON MAFRIGE ENTERPRISES

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 23/40 Report: 26/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) MALONE, MARK 08/26/2011 **6** Contributor address; City; State; Zip Code \$250.00 AUSTIN, TX 78768 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 **GOVERNMENT AFFAIRS** Focused Advocacy Full name of contributor D out-of-state PAC (ID# Date In-kind contribution ) Amount of contribution (\$) description (if applicable) MALONE, MARK 10/19/2011 Contributor address; City; State; Zip Code \$250.00 AUSTIN, TX 78768 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) GOVERNMENT AFFAIRS Focused Advocacy Full name of contributor X out-of-state PAC (ID# C00040568 ) Date In-kind contribution Amount of contribution (\$) description (if applicable) MARATHON OIL COMPANY EMPLOYEES PAC (MEDPAC) City; State; Zip Code 11/04/2011 Contributor address; \$1,500.00 DETROIT, MI 48275 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) MASEL. BRENT AND ANN City; State; Zip Code 08/26/2011 Contributor address: \$100.00 GALVESTON, TX 77551 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) MASTERS, RON 10/26/2011 Contributor address; City; State; Zip Code \$1,000.00 DICKINSON, TX 77539 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) OWNER MAXIMGROUP

TDD 1-800-735-2989

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

| SCHEDULE | Α |
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| The        |             | N GUIDE explains how to complete this form.  |                     | 1 PAGE #                       |   |
|------------|-------------|--|---------------------|--------------------------------|---|
|            |             |  |                     |                                | 40 Report: 27/101                                     |
| 2 FILE     | ER NAME     | Friends of Larry Taylor  |                     | <b>3</b> ACCOUNT # 00051862    | (Ethics Commission filers)                            |
| <b>4</b> D | late        | 5 Full name of contributor Dut-of-state PAC (ID#<br>MCANINCH, DOUGLAS                                  | ŧ)                  | 7 Amount of contribution (\$)  | 8 In-kind contribution<br>description (if applicable) |
| 10/2       | 27/2011     | <b>6</b> Contributor address; City; State; Zip Code  |                     | \$25.00                        | <br>  |
|            |             | FRIENDSWOOD, TX 77546  |                     |                                | l   |
|            |             |  |                     | (If travel outside of          | Texas, complete Schedule T)                           |
| 9 Princ    | cipal occup | ation / Job title (See Instructions)   | 10 Employer (See In | structions)                    |   |
| D          | Date        | Full name of contributor Dut-of-state PAC (ID#<br>MCANINCH, Douglas                                    | ŧ)                  | Amount of contribution (\$)    | In-kind contribution description (if applicable)      |
| 12/2       | 27/2011     | Contributor address; City; State; Zip Code   |                     | \$25.00                        | <br>  |
|            |             | FRIENDSWOOD, TX 77546  |                     |                                | I   |
|            |             |  |                     | (If travel outside of          | Texas, complete Schedule T)                           |
| Princ      | cipal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                    |   |
| D          | late        | Full name of contributor Dut-of-state PAC (ID#<br>MCCANDLESS, BRUCE                                    | ŧ)                  | Amount of<br>contribution (\$) | In-kind contribution description (if applicable)      |
| 10/2       | 27/2011     | Contributor address; City; State; Zip Code   |                     | \$150.00                       | 1   |
|            |             | AUSTIN, TX 78746   |                     | (If travel outside of          | Texas, complete Schedule T)                           |
| Princ      | cipal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                    |   |
|            |             |  |                     |                                |   |
| D          | late        | Full name of contributor ID out-of-state PAC (ID#<br>MEDCO HEALTH SOLUTIONS INC POLITICAL<br>COMMITTEE |                     | Amount of<br>contribution (\$) | In-kind contribution<br>description (if applicable)   |
| 11/3       | 30/2011     | Contributor address; City; State; Zip Code   |                     | \$1,000.00                     | 1   |
|            |             | SAN RAFAEL, CA 94901   |                     |                                |   |
|            |             |  |                     |                                | Texas, complete Schedule T)                           |
| Princ      | cipal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                    |   |
| D          | late        | Full name of contributor Dut-of-state PAC (ID#<br>MENDENHALL, MELVIN                                   | ŧ)                  | Amount of contribution (\$)    | In-kind contribution description (if applicable)      |
| 12/0       | )2/2011     | Contributor address; City; State; Zip Code   |                     | \$25.00                        | <br>  |
|            |             | FRIENDSWOOD, TX 77546  |                     |                                | Ι   |
|            |             |  |                     | (If travel outside of          | Texas, complete Schedule T)                           |
| Princ      | cipal occup | ation / Job title (See Instructions)   | Employer (See In    | structions)                    |   |

|    | The Instruction             | ON GUIDE explains how to complete this form.                                      |                                  | 1 PAGE #<br>Schedule: 25       | /40 Report: 28/101                                  |
|----|-----------------------------|---|----------------------------------|--------------------------------|---|
| 2  | FILER NAME                  | Friends of Larry Taylor   |                                  | <b>3</b> ACCOUNT # 00051862    | (Ethics Commission filers)                          |
| 4  | Date                        | 5 Full name of contributor D out-of-state PAC (ID# MICKLER, JEFF                  | ŧ)                               | 7 Amount of contribution (\$)  | 8 In-kind contribution description (if applicable)  |
|    | 11/30/2011                  | <b>6</b> Contributor address; City; State; Zip Code                               |                                  | \$200.00                       | <br>  |
|    |                             | FRIENDSWOOD, TX 77546   |                                  |                                |   |
|    | <u> </u>                    |   |                                  |                                | Texas, complete Schedule T)                         |
| 9  | Principal occup             | pation / Job title (See Instructions)   | 10 Employer (See In              | structions)                    |   |
|    | Date                        | Full name of contributor Dout-of-state PAC (ID#<br>MILLER, ROBERT                 | ŧ)                               | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
|    | 10/26/2011                  | Contributor address; City; State; Zip Code  |                                  | \$1,000.00                     | <br>  |
|    |                             | HOUSTON, TX 77002   |                                  | (If travel outside of          | Texas, complete Schedule T)                         |
|    | Principal occup<br>ATTORNEY | pation / Job title (See Instructions)   | Employer (See In<br>LOCKE LORD I | structions)<br>BISSELL & LIDDE | ELL LLP   |
|    | Date                        | Full name of contributor Dout-of-state PAC (ID#<br>MITCHELL, GEORGE               | ŧ)                               | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable) |
|    | 08/26/2011                  | Contributor address; City; State; Zip Code<br>THE WOODLANDS, TX 77380             |                                  | \$5,000.00                     |   |
|    |                             |   |                                  | (If travel outside of          | I<br>Texas, complete Schedule T)                    |
|    | Principal occup<br>OWNER    | ation / Job title (See Instructions)  | Employer (See In<br>MITCHELL ENE |                                |   |
|    | Date                        | Full name of contributor D out-of-state PAC (ID#<br>MITCHELL, GEORGE              | ŧ)                               | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
|    | 11/17/2011                  | Contributor address; City; State; Zip Code  |                                  | \$500.00                       | <br>  |
|    |                             | THE WOODLANDS, TX 77380   |                                  |                                |   |
|    |                             |   |                                  |                                | Texas, complete Schedule T)                         |
|    | Principal occup<br>OWNER    | pation / Job title (See Instructions)   | Employer (See In<br>MITCHELL ENE | ,                              |   |
|    | Date                        | Full name of contributor Dout-of-state PAC (ID#<br>MORALES, ROLANDO AND ROSALINDA | ŧ)                               | Amount of contribution (\$)    | In-kind contribution description (if applicable)    |
|    | 12/01/2011                  | Contributor address; City; State; Zip Code  |                                  | \$50.00                        | <br>  |
|    |                             | SANTA FE, TX 77510  |                                  |                                | <br>  |
| ┣— | Principal occur             | pation / Job title (See Instructions)   | Employer (See In                 | •                              | Texas, complete Schedule T)                         |
|    |                             |   | piojor (000 in                   |                                |   |

2 FILER NAME

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TDD 1-800-735-2989

SCHEDULE A

# **POLITICAL CONTRIBUTIONS OTHER THAN PLE**

| OTHER           | THAN PLEDGES OR LOAI  | NS                  |                               |   |
|-----------------|---|---------------------|-------------------------------|---|
| The INSTRUCTION | N GUIDE explains how to complete this form.   |                     | 1 PAGE #<br>Schedule: 26      | /40 Report: 29/101                                    |
| FILER NAME      | Friends of Larry Taylor   |                     | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                            |
| Date            | 5 Full name of contributor  dut-of-state PAC (ID#<br>MORRIS LENDAIS HOLLRAH & SNOWDEN | ŧ)                  | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
| 10/26/2011      | <b>6</b> Contributor address; City; State; Zip Code HOUSTON, TX 77056                 |                     | \$500.00                      | <br> <br>   |
|                 |   |                     | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup | ation / Job title (See Instructions)  | 10 Employer (See In | structions)                   |   |
| Date            | Full name of contributor Dout-of-state PAC (ID#<br>Munson, Tom                        | ŧ)                  | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 12/10/2011      | Contributor address; City; State; Zip Code<br>Brownwood, TX 76801                     |                     | \$100.00                      | <br> <br>   |
|                 |   |                     | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup | ation / Job title (See Instructions)  | Employer (See In    | structions)                   |   |
| Date            | Full name of contributor  | ŧ)                  | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 10/19/2011      | Contributor address; City; State; Zip Code  |                     | \$1,000.00                    |   |
|                 | AUSTIN, TX 78701  |                     |                               | I   |
|                 |   |                     | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup | ation / Job title (See Instructions)  | Employer (See In    | structions)                   |   |
| Date            | Full name of contributor Dout-of-state PAC (ID#                                       | ŧ)                  | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |

|                             | NAU, JOHN III  | ,                                 | contribution (\$)              | description (if applicable)                      |
|-----------------------------|--|-----------------------------------|--------------------------------|--|
| 10/26/2011                  | Contributor address; City; State; Zip Code<br>HOUSTON, TX 77219    |                                   | \$2,500.00<br>                 |  |
|                             |  |                                   | (If travel outside of ⊺        | Fexas, complete Schedule T)                      |
| Principal occup<br>MANAGEME | ation / Job title (See Instructions)<br>NT                         | Employer (See Ins<br>SILVER EAGLE | structions)<br>DISTRIBUTING    |  |
| Date                        | Full name of contributor D out-of-state PAC (ID#<br>NEWSOME, CATHY | ŧ)                                | Amount of<br>contribution (\$) | In-kind contribution description (if applicable) |
| 11/20/2011                  | Contributor address; City; State; Zip Code<br>KEMAH, TX 77565      |                                   | \$250.00<br>                   |  |
|                             |  |                                   | (If travel outside of ⊺        | Fexas, complete Schedule T)                      |
| Principal occup             | pation / Job title (See Instructions)                              | Employer (See Ins                 | structions)                    |  |

| SCHEDULE | Α |
|----------|---|
|----------|---|

|   | The Instruction          | N GUIDE explains how to complete this form.                                  |                                   | 1 PAGE #<br>Schedule: 27      | /40 Report: 30/101                                    |
|---|--------------------------|--|-----------------------------------|-------------------------------|---|
| 2 | FILER NAME               | Friends of Larry Taylor  |                                   | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                            |
| 4 | Date                     | 5 Full name of contributor  dut-of-state PAC (ID#<br>NEWSTEAD, COLIN         | <u> </u>                          | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
|   | 12/11/2011               | 6 Contributor address; City; State; Zip Code                                 |                                   | \$50.00                       | l   |
|   |                          | FRIENDSWOOD, TX 77546  |                                   |                               | I<br>   |
| 9 | Principal occur          | ation / Job title (See Instructions)   | 10 Employer (See In:              |                               | Texas, complete Schedule T)                           |
| 9 |                          |  |                                   | 3000003)                      |   |
|   | Date                     | Full name of contributor Dout-of-state PAC (ID# NLASCO PAC                   | E)                                | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   | 11/14/2011               | Contributor address; City; State; Zip Code                                   |                                   | \$1,000.00                    |   |
|   |                          | WACO, TX 76710   |                                   |                               | '<br>I  |
|   |                          |  |                                   | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup          | ation / Job title (See Instructions)   | Employer (See In                  | structions)                   |   |
|   | Date                     | Full name of contributor Dut-of-state PAC (ID#<br>NRG ENERGY PAC             | :)                                | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 11/14/2011               | Contributor address; City; State; Zip Code                                   |                                   | \$1,000.00                    |   |
|   |                          | PRINCETON, NY 77777  |                                   |                               |   |
|   |                          |  |                                   | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup          | ation / Job title (See Instructions)   | Employer (See In                  | structions)                   |   |
|   | Date                     | Full name of contributor Dut-of-state PAC (ID# NUSSBAUM, FRANCES             | :)                                | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 12/14/2011               | Contributor address; City; State; Zip Code                                   |                                   | \$25.00                       |   |
|   |                          | HOUSTON, TX 77058  |                                   |                               | l   |
|   |                          |  |                                   | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup          | ation / Job title (See Instructions)   | Employer (See In                  | structions)                   |   |
|   | Date                     | Full name of contributor  dut-of-state PAC (ID#<br>O'DAY, MICHAEL AND CONNIE | :)                                | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
|   |                          |  |                                   | (*)                           |   |
|   | 09/12/2011               | Contributor address; City; State; Zip Code                                   |                                   | \$1,000.00                    | I   |
|   |                          | PEARLAND, TX 77581   |                                   |                               | Ι   |
|   | <b></b>                  |  | <b>_</b>                          |                               | Texas, complete Schedule T)                           |
|   | Principal occup<br>OWNER | ation / Job title (See Instructions)   | Employer (See In:<br>ODAY DRILLIN |                               |   |
|   |                          |  |                                   | F                             | lectronically filed using Web Filer Version 1.6       |

TDD 1-800-735-2989

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

|   | The INSTRUCTION              | ON GUIDE explains how to complete this form.  |                          | 1 PAGE #<br>Schedule: 28       | /40 Report: 31/101                                    |
|---|------------------------------|---|--------------------------|--------------------------------|---|
| 2 | FILER NAME                   | Friends of Larry Taylor   |                          | <b>3</b> ACCOUNT # 00051862    | (Ethics Commission filers)                            |
| 4 | Date                         | 5 Full name of contributor D out-of-state PAC (ID<br>PAC OF THE INDEPENDENT INSURANCE AGE |                          | 7 Amount of contribution (\$)  | 8 In-kind contribution<br>description (if applicable) |
|   | 08/26/2011                   | <b>6</b> Contributor address; City; State; Zip Code AUSTIN, TX 78768                      |                          | \$1,000.00                     |   |
|   |                              | AUSTIN, 1X 70700  |                          |                                |   |
|   | Dringing agour               | ation / Job title (See Instructions)  | 10 Employer (See In      |                                | Texas, complete Schedule T)                           |
| 9 |                              | pation / Job title (See Instructions)   | 10 Employer (See In      |                                |   |
|   | Date                         | Full name of contributor Dout-of-state PAC (ID;<br>PAC OF THE INDEPENDENT INSURANCE AGE   |                          | Amount of<br>contribution (\$) | In-kind contribution<br>description (if applicable)   |
|   | 10/19/2011                   | Contributor address; City; State; Zip Code  |                          | \$1,000.00                     | <br>  |
|   |                              | AUSTIN, TX 78768  |                          |                                | I   |
|   |                              |   |                          | ,                              | Texas, complete Schedule T)                           |
|   | Principal occup              | pation / Job title (See Instructions)   | Employer (See In         | structions)                    |   |
|   | Date                         | Full name of contributor Dout-of-state PAC (IDa<br>PAC OF THE INDEPENDENT INSURANCE AGE   | ,                        | Amount of contribution (\$)    | In-kind contribution description (if applicable)      |
|   | 11/14/2011                   | Contributor address; City; State; Zip Code  |                          | \$2,500.00                     | <br>  |
|   |                              | AUSTIN, TX 78768  |                          | (If travel outside of          | Texas, complete Schedule T)                           |
|   | Principal occup              | Dation / Job title (See Instructions)   | Employer (See In         |                                | · · · · –   |
|   |                              |   |                          |                                |   |
|   | Date                         | Full name of contributor D out-of-state PAC (ID; PEARSON, GARY                            | <b>#)</b>                | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
|   | 10/26/2011                   | Contributor address; City; State; Zip Code<br>HOUSTON, TX 77027                           |                          | \$50.00                        | <br>  |
|   |                              |   |                          |                                | · · · · · · · · ·                                     |
|   | Principal occur              | ation / Job title (See Instructions)  | Employer (See In         | •                              | Texas, complete Schedule T)                           |
|   |                              |   |                          |                                |   |
|   | Date                         | Full name of contributor D out-of-state PAC (ID)<br>PERRY, BOB                            | <b>#</b> )               | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
|   | 10/04/2011                   | Contributor address; City; State; Zip Code  |                          | \$10,000.00                    | <br>  |
|   |                              | HOUSTON, TX 77234   |                          |                                | I   |
|   |                              |   |                          | •                              | Texas, complete Schedule T)                           |
|   | Principal occup<br>HOMEBUILD | pation / Job title (See Instructions)<br>ER   | Employer (See In<br>SELF | structions)                    |   |

#### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 29/40 Report: 32/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) PERRY, BOB 11/04/2011 6 Contributor address; City; State; Zip Code \$10,000.00 HOUSTON, TX 77234 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) 9 HOMEBUILDER SELF Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) PERRY, BOB 11/14/2011 Contributor address; City; State; Zip Code \$5,000.00 HOUSTON, TX 77234 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) HOMEBUILDER SELF Date Full name of contributor D out-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) PERRY, BOB 11/14/2011 Contributor address; City; State; Zip Code \$10,000.00 HOUSTON, TX 77234 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) HOMEBUILDER SELF Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) PERRY, DOYLENE 11/14/2011 Contributor address; City; State; Zip Code \$5,000.00 HOUSTON, TX 77234 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) HOMEMAKER SELF Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) PFIZER PAC 12/01/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### **POLITICAL CONTRIBUTIONS** SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 30/40 Report: 33/101 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) PROGRESSIVE ACTION PAC 10/04/2011 **6** Contributor address; City; State; Zip Code \$688.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#\_ Date In-kind contribution Amount of PROPERTY CASUALTY INSURERS ASSOCIATION OF contribution (\$) description (if applicable) AMERICA PAC . . . . . . . . . . . . . . . . 08/26/2011 Contributor address; City; State; Zip Code \$1,000.00 DES PLAINES, IL 60018 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor X out-of-state PAC (ID# C00493304 ) Date In-kind contribution Amount of contribution (\$) description (if applicable) PRUDENTIAL FINANCIAL IN - STATE AND FEDERAL PAC City; State; Zip Code 09/30/2011 Contributor address; \$1,000.00 NEWARK, NJ 07102 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution contribution (\$) description (if applicable) RATCLIFF, MICHAEL . . . . . . . . . . . . . . City; State; Zip Code 12/05/2011 Contributor address: \$100.00 FRIENDSWOOD, TX 77546 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

| r incipal occup |  |                  | situctions)                    |  |
|-----------------|--|------------------|--------------------------------|--|
| Date            | Full name of contributor D out-of-state PAC (ID#<br>REITMEYER, WAYNE | ŧ)               | Amount of<br>contribution (\$) | In-kind contribution description (if applicable) |
| 12/15/2011      | Contributor address; City; State; Zip Code                           |                  | \$100.00                       |  |
|                 | LAKE JACKSON, TX 77566   |                  | l                              |  |
|                 |  |                  | (If travel outside of 1        | Texas, complete Schedule T)                      |
| Principal occup | pation / Job title (See Instructions)                                | Employer (See In | structions)                    |  |
|                 |  |                  |                                |  |

SCHEDULE A

| The INSTRUCTION               | ON GUIDE explains how to complete this form.  |                          | 1 PAGE #<br>Schedule: 31      | /40 Report: 34/101                                    |
|-------------------------------|---|--------------------------|-------------------------------|---|
| 2 FILER NAME                  | Friends of Larry Taylor   |                          | 3 ACCOUNT # 00051862          | (Ethics Commission filers)                            |
| 4 Date                        | 5 Full name of contributor I out-of-state PAC (ID#<br>REPUBLIC SVCS. INC. EMPLOYEES FOR BET |                          | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
| 11/03/2011                    | <b>6</b> Contributor address; City; State; Zip Code   |                          | \$1,000.00                    | <br>  |
|                               | PHOENIX, AZ 85054   |                          |                               |   |
|                               |   |                          | •                             | Texas, complete Schedule T)                           |
| 9 Principal occur             | pation / Job title (See Instructions)   | 10 Employer (See In      | structions)                   |   |
| Date                          | Full name of contributor D out-of-state PAC (ID# SANDER, LEE                                | ŧ)                       | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 12/12/2011                    | Contributor address; City; State; Zip Code  |                          | \$25.00                       | <br>  |
|                               | HITCHCOCK, TX 77563   |                          |                               | Ι   |
|                               |   |                          | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup               | pation / Job title (See Instructions)   | Employer (See In         | structions)                   |   |
| Date                          | Full name of contributor I out-of-state PAC (ID#<br>SANOFI-AVENTIS US INC EMPLOYEES PAC     | E C00144345 )            | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 11/04/2011                    | Contributor address; City; State; Zip Code  |                          | \$500.00                      | I<br>   |
|                               | BRIDGEWATER, NJ 08807   |                          | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup               | pation / Job title (See Instructions)   | Employer (See In         | structions)                   |   |
|                               |   |                          |                               |   |
| Date                          | Full name of contributor D out-of-state PAC (ID#<br>Sauls, Cheryl                           | ŧ)                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
| 12/28/2011                    | Contributor address; City; State; Zip Code  |                          | \$100.00                      | <br>  |
|                               | Friendswood, TX 77546   |                          |                               | Ι   |
|                               |   |                          |                               | Texas, complete Schedule T)                           |
| Principal occup               | pation / Job title (See Instructions)   | Employer (See In         | structions)                   |   |
| Date                          | Full name of contributor D out-of-state PAC (ID#<br>SCHLUETER, STAN                         | ŧ)                       | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
| 08/26/2011                    | Contributor address; City; State; Zip Code  |                          | \$1,000.00                    |   |
|                               | AUSTIN, TX 78768  |                          |                               | Ι   |
|                               |   |                          | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup<br>Consulting | pation / Job title (See Instructions)   | Employer (See In<br>Self | structions)                   |   |

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SCHEDULE A

|   | The INSTRUCTION          | ON GUIDE explains how to complete this form.                                      |                                      | 1 PAGE #<br>Schedule: 32      | /40 Report: 35/101                                    |
|---|--------------------------|---|--------------------------------------|-------------------------------|---|
| 2 | FILER NAME               | Friends of Larry Taylor   |                                      | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                            |
| 4 | Date                     | 5 Full name of contributor D out-of-state PAC (ID# Schneider, Joe                 | ·)                                   | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
|   | 12/28/2011               | 6 Contributor address; City; State; Zip Code                                      |                                      | \$2,500.00                    | <br>  |
|   |                          | Alvin, TX 77511   |                                      |                               |   |
| _ |                          |   |                                      |                               | Texas, complete Schedule T)                           |
| 9 | Principal occup<br>Owner | ation / Job title (See Instructions)  | 10 Employer (See In<br>Holmes Road R |                               |   |
|   | Date                     | Full name of contributor D out-of-state PAC (ID#<br>SCHWARTZ, AR                  | !)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 11/14/2011               | Contributor address; City; State; Zip Code  |                                      | \$250.00                      | <br>  |
|   |                          | AUSTIN, TX 78701  |                                      |                               | l   |
|   | Drinoinal accur          | ation / Joh title (Cap Instructions)  | Employer (Cools                      | -                             | Texas, complete Schedule T)                           |
|   | Principal occup          | ation / Job title (See Instructions)  | Employer (See In                     | structions)                   |   |
|   | Date                     | Full name of contributor dut-of-state PAC (ID#<br>SEIDENSTICKER, JOHN AND CYNTHIA | ·)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 09/13/2011               | Contributor address; City; State; Zip Code  |                                      | \$50.00                       | <br>  |
|   |                          | LEAGUE CITY, TX 77573   |                                      |                               | I<br>   |
|   | Driverie et erece        |   | E                                    | •                             | Texas, complete Schedule T)                           |
|   | Principal occup          | ation / Job title (See Instructions)  | Employer (See In                     | structions)                   |   |
|   | Date                     | Full name of contributor Dout-of-state PAC (ID#<br>SHAH, KIRTIKUMAR               | ·)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 10/26/2011               | Contributor address; City; State; Zip Code  |                                      | \$10.00                       | <br>  |
|   |                          | HOUSTON, TX 77024   |                                      |                               | <br>  |
|   | Principal occur          | ation / Job title (See Instructions)  | Employer (See In                     |                               | Texas, complete Schedule T)                           |
|   |                          |   |                                      |                               |   |
|   | Date                     | Full name of contributor Dout-of-state PAC (ID#<br>Sherrill, Charles Jr           | :)                                   | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
|   | 12/26/2011               | Contributor address; City; State; Zip Code  |                                      | \$50.00                       | <br>  |
|   |                          | Friendswood, TX 77546   |                                      |                               | I   |
|   |                          |   |                                      | (If travel outside of         | Texas, complete Schedule T)                           |
|   | Principal occup          | ation / Job title (See Instructions)  | Employer (See In                     |                               |   |
|   | 1                        | ```'  |                                      | ,                             |   |

| SCHEDULE  | Α |
|-----------|---|
| CONFRONCE |   |

| The INSTRUCTION GUIDE explains how to complete this form.       1 PAGE #         Schedule: 33/40 Report: 36/1   |           |
|---|-----------|
|   | 01        |
| 2 FILER NAME       Friends of Larry Taylor       3 ACCOUNT # (Ethics Commiss 00051862)  |           |
| 4       Date       5       Full name of contributor       Image: Out-of-state PAC (ID#)       7       Amount of contribution (\$)       8       In-kind cor description (if descriptin (if descriptin (if descriptin (if descriptin                                     |           |
| 12/04/2011 6 Contributor address; City; State; Zip Code \$102.00<br>HOUSTON, TX 77358   |           |
|   | _         |
| Generation / Job title (See Instructions)     IO Employer (See Instructions)  | hedule T) |
|   |           |
| Date       Full name of contributor       I out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind cor         SIBLEY, HOBART       SIBLEY, HOBART       Amount of contribution (\$)       I description (if  |           |
| 12/01/2011 Contributor address; City; State; Zip Code \$150.00  |           |
| LEAGUE CITY, TX 77573   |           |
| (If travel outside of Texas, complete So  | hedule T) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |           |
| Date       Full name of contributor       I out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind cor description (if descriptin (if description (if descriptin (if description (if de |           |
| 11/18/2011 Contributor address; City; State; Zip Code \$1,000.00  |           |
| HOUSTON, TN 77229   | hedule T) |
| Principal occupation / Job title (See Instructions) PRINCIPAL Employer (See Instructions) MYRON F STEVES  |           |
| Date       Full name of contributor       out-of-state PAC (ID#)       Amount of contribution (\$)       In-kind cor contribution (\$)         STRICKLIN, GERRY       description (if   |           |
| 12/08/2011 Contributor address; City; State; Zip Code \$1,000.00  |           |
| FRIENDSWOOD, TX 77546   |           |
| (If travel outside of Texas, complete So  | hedule T) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |           |
| Date       Full name of contributor       Image: out-of-state PAC (ID#)       Amount of contribution (\$)       Image: In-kind contribution (\$)         TEXANS FOR LAWSUIT REFORM PAC       Amount of contribution (\$)       Image: In-kind contribution (\$)       Image: In-kind contribution (\$)  |           |
| 08/26/2011 Contributor address; City; State; Zip Code \$25,000.00   |           |
| AUSTIN, TX 78701  |           |
| (If travel outside of Texas, complete Sc  | hedule T) |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |           |

SCHEDULE A

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

|   | The Instruction | ON GUIDE explains how to complete this form.   |                      | 1 PAGE #<br>Schedule: 34      | /40 Report: 37/101                                 |
|---|-----------------|--|----------------------|-------------------------------|--|
| 2 | FILER NAME      | Friends of Larry Taylor  |                      | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                         |
| 4 | Date            | 5 Full name of contributor Dout-of-state PAC (ID#<br>TEXAS ASSOC OF HEALTH UNDERWRITERS F              |                      | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
|   | 10/21/2011      | 6 Contributor address; City; State; Zip Code<br>DUNCANVILLE, TX 75137                                  |                      | \$2,000.00                    |  |
|   |                 |  |                      | (If travel outside of         | I<br>Texas, complete Schedule T)                   |
| 9 | Principal occup | ation / Job title (See Instructions)   | 10 Employer (See Ins | structions)                   |  |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>TEXAS CANCER PAC                                    | )                    | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 10/26/2011      | Contributor address; City; State; Zip Code<br>HOUSTON, TX 77008  |                      | \$500.00                      |  |
|   |                 |  |                      | -                             | l<br>Texas, complete Schedule T)                   |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In:    | structions)                   |  |
|   | Date            | Full name of contributor  dut-of-state PAC (ID#<br>TEXAS DENTAL ASSOCIATION POLITICAL ACT<br>COMMITTEE |                      | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 10/26/2011      | Contributor address; City; State; Zip Code   |                      | \$1,000.00                    |  |
|   |                 | AUSTIN, TX 78704   |                      | (If travel outside of         | <br>Texas, complete Schedule T)                    |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In:    | structions)                   |  |
|   | Date            | Full name of contributor Dut-of-state PAC (ID#<br>TEXAS EVENTS PAC                                     | )                    | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 10/19/2011      | Contributor address; City; State; Zip Code<br>FORT WORTH, TX 76107                                     |                      | \$2,500.00                    |  |
|   |                 |  |                      | (If travel outside of         | I<br>Texas, complete Schedule T)                   |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In     | structions)                   |  |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>TEXAS FRIENDS OF TIME WARNER CABLE PA               |                      | Amount of contribution (\$)   | In-kind contribution description (if applicable)   |
|   | 10/19/2011      | Contributor address; City; State; Zip Code   |                      | \$5,000.00                    |  |
|   |                 | HOUSTON, TX 77056  |                      | (If travel outside of         | Texas, complete Schedule T)                        |
|   | Principal occup | ation / Job title (See Instructions)   | Employer (See In     | •                             | -, ,,,,  |
|   |                 |  |                      |                               |  |

### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 35/40 Report: 38/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 5 Full name of contributor D out-of-state PAC (ID# 4 Date 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) TEXAS LAND TITLE ASSOCIATION PAC 08/26/2011 6 Contributor address: City; State; Zip Code \$250.00 AUSTIN, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor D out-of-state PAC (ID#\_ Date In-kind contribution Amount of contribution (\$) description (if applicable) TEXAS MANUFACTURED HOUSING ASSOCIATION COMMITTE FOR RESPONSIBLE GOVERNMENT 12/01/2011 Contributor address; City; State; Zip Code \$1,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) TEXAS STATE FARM AGENTS PAC 08/26/2011 Contributor address; City; State; Zip Code \$5,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) THE BEER ALLIANCE OF TEXAS PAC City; State; Zip Code 08/04/2011 Contributor address: \$1,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) THE BEER ALLIANCE OF TEXAS PAC 10/19/2011 Contributor address; City; State; Zip Code \$5,000.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

| The INSTRUCTION   | ON GUIDE explains how to complete this form.  |                     | 1 PAGE #<br>Schedule: 36      | /40 Report: 39/101                                    |
|-------------------|---|---------------------|-------------------------------|---|
| 2 FILER NAME      | Friends of Larry Taylor   |                     | <b>3</b> ACCOUNT # 00051862   | (Ethics Commission filers)                            |
| 4 Date            | 5 Full name of contributor I out-of-state PAC (ID#<br>The Hartford Advocates Fund   | £_C00168864)        | 7 Amount of contribution (\$) | 8 In-kind contribution<br>description (if applicable) |
| 12/20/2011        | <b>6</b> Contributor address; City; State; Zip Code                                 |                     | \$1,000.00                    | l<br>I  |
|                   | Hartford, CT 05155  |                     |                               | Ι   |
|                   |   |                     | -                             | Texas, complete Schedule T)                           |
| 9 Principal occur | pation / Job title (See Instructions)   | 10 Employer (See In | structions)                   |   |
| Date              | Full name of contributor 🛛 out-of-state PAC (ID#<br>The Travelers Companies Inc PAC | ŧ_C00376376)        | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 12/14/2011        | Contributor address; City; State; Zip Code  |                     | \$1,000.00                    | l   |
|                   | Hartford, CT 06183  |                     |                               | I   |
|                   |   |                     | -                             | Texas, complete Schedule T)                           |
| Principal occup   | pation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |
| Date              | Full name of contributor Dout-of-state PAC (ID#<br>THOMPSON COE COUSINS & IRONS LLP | ŧ)                  | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 08/26/2011        | Contributor address; City; State; Zip Code  |                     | \$1,000.00                    | l<br>I  |
|                   | DALLAS, TX 75201  |                     |                               | I   |
|                   |   |                     | -                             | Texas, complete Schedule T)                           |
| Principal occup   | pation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |
| Date              | Full name of contributor Dout-of-state PAC (ID#<br>TORRES, GERRARD                  | ŧ)                  | Amount of contribution (\$)   | In-kind contribution<br>description (if applicable)   |
| 08/26/2011        | Contributor address; City; State; Zip Code  |                     | \$350.00                      | I   |
|                   | AUSTIN, TX 78749  |                     |                               | I   |
|                   |   |                     |                               | Texas, complete Schedule T)                           |
| Principal occup   | pation / Job title (See Instructions)   | Employer (See In    | structions)                   |   |
| Date              | Full name of contributor Dout-of-state PAC (ID# TOWNER, JOHN AND PAULA              | ŧ)                  | Amount of contribution (\$)   | In-kind contribution description (if applicable)      |
| 12/01/2011        | Contributor address; City; State; Zip Code  |                     | \$100.00                      | <br>  |
|                   | LEAGUE CITY, TX 77573   |                     |                               | I   |
|                   |   |                     | (If travel outside of         | Texas, complete Schedule T)                           |
| Principal occup   | ation / Job title (See Instructions)  | Employer (See In    | structions)                   |   |

### **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

|  | SCH | ED | UL | Е | Α |
|--|-----|----|----|---|---|
|--|-----|----|----|---|---|

|   |                 | N GUIDE explains how to complete this form.   |                                 | 1 PAGE #                       | /40 Report: 40/101                                    |
|---|-----------------|---|---------------------------------|--------------------------------|---|
| 2 | FILER NAME      | Friends of Larry Taylor   |                                 | 3 ACCOUNT #                    | (Ethics Commission filers)                            |
|   |                 |   |                                 | 00051862                       |   |
| 4 | Date            | 5 Full name of contributor D out-of-state PAC (ID#<br>TRABULSI, RICHARD                   | ŧ)                              | 7 Amount of contribution (\$)  | 8 In-kind contribution<br>description (if applicable) |
|   | 10/26/2011      | <b>6</b> Contributor address; City; State; Zip Code                                       |                                 | \$250.00                       | <br>  |
|   |                 | HOUSTON, TX 77019   |                                 |                                | I   |
|   |                 |   |                                 | (If travel outside of          | Texas, complete Schedule T)                           |
| 9 | Principal occup | pation / Job title (See Instructions)   | 10 Employer (See In             | structions)                    |   |
|   |                 |   |                                 |                                |   |
|   | Date            | Full name of contributor D out-of-state PAC (ID# UNDERWOOD, DAVID                         | ŧ)                              | Amount of contribution (\$)    | In-kind contribution description (if applicable)      |
|   | 10/26/2011      | Contributor address; City; State: Zip Code  |                                 | \$500.00                       |   |
|   | 10/20/2011      | HOUSTON, TX 77010   |                                 | \$000.00                       |   |
|   |                 |   |                                 |                                |   |
|   |                 |   |                                 | •                              | Texas, complete Schedule T)                           |
|   | FINANCIAL A     | bation / Job title (See Instructions)<br>ADVISORS   | Employer (See In<br>WELLS FARGO | structions)<br>) ADVISORS LLC  | ;   |
|   |                 |   |                                 |                                |   |
|   | Date            | Full name of contributor ID out-of-state PAC (ID#<br>UNITED PARCEL SERVICE INC PAC        | E_C00064766)                    | Amount of contribution (\$)    | In-kind contribution<br>description (if applicable)   |
|   | 08/06/2011      |   |                                 | ¢1 500 00                      | I   |
|   | 00/00/2011      |   |                                 | \$1,500.00                     |   |
|   |                 | ATLANTA, GA 30328   |                                 |                                |   |
|   |                 |   |                                 | •                              | Texas, complete Schedule T)                           |
|   | Principal occup | pation / Job title (See Instructions)   | Employer (See In                | structions)                    |   |
|   |                 |   |                                 |                                |   |
|   | Date            | Full name of contributor ☐ out-of-state PAC (ID#<br>USAA EMPLOYEE PAC - MULTI-CANDIDATE C |                                 | Amount of<br>contribution (\$) | In-kind contribution<br>description (if applicable)   |
|   |                 |   | OMMITTEE                        | (*)                            | I I ( -4-I)   |
|   | 08/26/2011      | Contributor address; City; State; Zip Code  |                                 | \$3,000.00                     | 1   |
|   |                 | SAN ANTONIO, TX 78288   |                                 |                                | 1   |
|   |                 |   |                                 | (If the second sector into a f |   |
|   | Principal occur | pation / Job title (See Instructions)   | Employer (See In                |                                | Texas, complete Schedule T)                           |
|   |                 |   |                                 | 511001013/                     |   |
|   | Date            | Full name of contributor D out-of-state PAC (ID#  | ŧ )                             | Amount of                      | In-kind contribution                                  |
|   |                 | USAA EMPLOYEE PAC - MULTI-CANDIDATE C   |                                 | contribution (\$)              | description (if applicable)                           |
|   | 10/01/0014      |   |                                 | #0.000.00                      | I   |
|   | 12/01/2011      | Contributor address; City; State; Zip Code  |                                 | \$2,000.00                     | I   |
|   |                 | SAN ANTONIO, TX 78288   |                                 |                                | I   |
|   |                 |   |                                 | (If travel outside of          | Texas, complete Schedule T)                           |
|   | Principal occup | pation / Job title (See Instructions)   | Employer (See In                | structions)                    |   |
|   |                 |   |                                 |                                |   |

### **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

| SCHEDULE A |
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|   | The INSTRUCTION | ON GUIDE explains how to complete this form.  |                                 | 1 PAGE #<br>Schedule: 38        | /40 Report: 41/101                                    |
|---|-----------------|---|---------------------------------|---------------------------------|---|
| 2 | FILER NAME      | Friends of Larry Taylor   |                                 | <b>3</b> ACCOUNT # 00051862     | (Ethics Commission filers)                            |
| 4 | Date            | 5 Full name of contributor D out-of-state PAC (ID# VALERO PAC                         | ·)                              | 7 Amount of contribution (\$)   | 8 In-kind contribution<br>description (if applicable) |
|   | 12/01/2011      | 6 Contributor address; City; State; Zip Code  |                                 | \$2,500.00                      |   |
|   |                 | SAN ANTONIO, TX 78269   |                                 |                                 | I   |
|   | <u> </u>        |   |                                 | •                               | Texas, complete Schedule T)                           |
| 9 | Principal occup | pation / Job title (See Instructions)   | 10 Employer (See In             | structions)                     |   |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>VAN EETEN, THEODORUS               | :)                              | Amount of contribution (\$)     | In-kind contribution<br>description (if applicable)   |
|   | 08/26/2011      | Contributor address; City; State; Zip Code  |                                 | \$500.00                        | <br>  |
|   |                 | HOUSON, TX 78759  |                                 |                                 | I   |
|   |                 |   |                                 |                                 | Texas, complete Schedule T)                           |
|   | GOVT RELA       | bation / Job title (See Instructions)<br>TIONS  | Employer (See In<br>TEXANS MEDI | structions)<br>CAL LIABILITY TI | RUST  |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>WALLINGFORD, ALMEDA                | :)                              | Amount of contribution (\$)     | In-kind contribution<br>description (if applicable)   |
|   | 12/02/2011      | Contributor address; City; State; Zip Code  |                                 | \$100.00                        |   |
|   |                 | KEMAH, TX 77565   |                                 | (If travel outside of           | Texas, complete Schedule T)                           |
|   | Principal occup | ation / Job title (See Instructions)  | Employer (See In                | structions)                     |   |
|   | Date            | Full name of contributor D out-of-state PAC (ID#<br>WEEKLY, RICHARD                   | <u> </u>                        | Amount of contribution (\$)     | In-kind contribution<br>description (if applicable)   |
|   | 08/26/2011      | Contributor address; City; State; Zip Code<br>HOUSTON, TX 77055                       |                                 | \$1,000.00                      | <br> <br>   |
|   |                 |   |                                 |                                 | Texas, complete Schedule T)                           |
|   | Principal occup | pation / Job title (See Instructions)   | Employer (See In                | ·                               |   |
|   | OWNER           |   | WEEKLY PROP                     |                                 |   |
|   | Date            | Full name of contributor Dout-of-state PAC (ID#<br>WEST GULF MARITIME ASSOCIATION PAC | !)                              | Amount of<br>contribution (\$)  | In-kind contribution<br>description (if applicable)   |
|   | 10/26/2011      | Contributor address; City; State; Zip Code  |                                 | \$1,000.00                      | 1   |
|   |                 | HOUSTON, TX 77029   |                                 |                                 |   |
|   |                 |   |                                 | (If travel outside of           | Texas, complete Schedule T)                           |
| ⊢ | Principal occup | pation / Job title (See Instructions)   | Employer (See In                | •                               | · · · ·   |
|   |                 |   |                                 |                                 |   |

### POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** PAGE # 1 The INSTRUCTION GUIDE explains how to complete this form. Schedule: 39/40 Report: 42/101 **3** ACCOUNT # (Ethics Commission filers) 2 FILER NAME Friends of Larry Taylor 00051862 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 Amount of 8 | In-kind contribution contribution (\$) description (if applicable) WHITE, BOB 11/18/2011 **6** Contributor address; City; State; Zip Code \$100.00 GALVESTON, TX 77554 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) q Full name of contributor D out-of-state PAC (ID#\_ Date Amount of In-kind contribution contribution (\$) description (if applicable) WHITE, GRACE 10/21/2011 Contributor address; City; State; Zip Code \$100.00 PASADENA, TX 77508 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) WITTENBURG, MICHELLE 11/14/2011 Contributor address; City; State; Zip Code \$250.00 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) WRIGHT. BRADFIELD AND LOIS City; State; Zip Code 10/19/2011 Contributor address; \$500.00 HOUSTON, TX 77019 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) ATTORNEY SELF Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) YOUNG, CHRIS 08/26/2011 Contributor address; City; State; Zip Code \$500.00 AUSTIN, TX 78760 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant LINEBARGER GOGGAN BLAIR & SAMPSON LLP

SCHEDULE A

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

|   | The INSTRUCTION | ON GUIDE explains how to complete this form.                                 |                     | 1 PAGE #<br>Schedule: 40/40 Report: 43/101  |
|---|-----------------|--|---------------------|---|
| 2 | FILER NAME      | Friends of Larry Taylor  |                     | <b>3</b> ACCOUNT # (Ethics Commission filers)<br>00051862                           |
| 4 | Date            | 5 Full name of contributor  dut-of-state PAC (ID# ZINNECKER, LOIS            | )                   | 7 Amount of 8 In-kind contribution<br>contribution (\$) description (if applicable) |
|   | 12/01/2011      | <b>6</b> Contributor address; City; State; Zip Code<br>FRIENDSWOOD, TX 77546 |                     | \$10.00<br>I  |
|   |                 |  |                     | (If travel outside of Texas, complete Schedule T)                                   |
| 9 | Principal occup | ation / Job title (See Instructions)   | 10 Employer (See In | structions)   |

# **POLITICAL EXPENDITURES**

| SCHEDULE F |
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|------------|

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundra   | ontract Labor Loan Repa<br>aising Expense Transporta<br>Contributio<br>rict Candida<br>Rental Expense OTHER (er | yment/Reimbursement<br>tion Equipment & Related Expense<br>ns/Donations Made By<br>te/Officeholder/Political Committee<br>nter a category not listed above) |
|---|--|---|---|
| 1 PAGE #<br>Schedule: 1/56 F  | Report: 44/101 2 FILER NAME<br>Friends of Larry Taylor   |   | 3 ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>07/19/2011  | 5 Payee name<br>ABELS ON THE LAKE  |   |   |
| 6 Amount (\$)<br>\$300.00   | 7 Payee address City; State; Zip Code<br>3825 LAKE AUSTIN BLVD<br>AUSTIN, TX 78703             |   |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense      |   | side of Texas, complete Schedule T)   |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name  | Office sought:  | Office held:  |
| Date<br>08/16/2011  | Payee name<br>ABELS ON THE LAKE  |   |   |
| Amount (\$)<br>\$1,899.03   | Payee address City; State; Zip Code<br>3825 LAKE AUSTIN BLVD<br>AUSTIN, TX 78703               |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense          |   | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:  |
| Date  | Payee name   |   |   |
| 12/05/2011  | ACC FOUNDATION   |   |   |
| Amount (\$)<br>\$100.00   | Payee address City; State; Zip Code<br>3110 Mustang Road<br>ALVIN, TX 77511                    |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                  | Description (If travel outs<br>DISTRICT EVENT   | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:  |
| Date<br>11/18/2011  | Payee name<br>Aloha Moving   |   |   |
| Amount (\$)   | Payee address City; State; Zip Code  |   |   |
| \$250.00  | 3919 Todd Lane<br>AUSTIN, TX 78744   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | Description (If travel outs<br>Moving Fee   | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:  |

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

## **POLITICAL EXPENDITURES**

| SCHEDULE | F |
|----------|---|
| SCHEDULE |   |

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundra<br>nse Food/Beverage Expense Travel In District<br>Polling Expense Travel Out Of Dist<br>Printing Expense Office Overhead/F<br>The Instruction Guide explains how | contract Labor Loan Repa<br>aising Expense Transporta<br>Contributio<br>trict Candida<br>Rental Expense OTHER (er | yment/Reimbursement<br>tion Equipment & Related Expense<br>ns/Donations Made By<br>te/Officeholder/Political Committee<br>ter a category not listed above) |
|---|--|---|--|
| 1 PAGE #  | 2 FILER NAME   |   | <b>3</b> ACCOUNT # (TEC filers)  |
| Schedule: 2/56 F  | Report: 45/101 Friends of Larry Taylor   |   | 00051862   |
| 4 Date  | 5 Payee name   |   |  |
| 11/14/2011  | ALONTI CAFE  |   |  |
| 6 Amount (\$)   | 7 Payee address City; State; Zip Code  |   |  |
| \$186.50  | 701B South Lamar Blvd<br>Austin, TX 78704  |   |  |
| 8   | (a) Category (See Categories listed at the top of this schedule)   | (b) Description (If travel outs   | ide of Texas, complete Schedule T)   |
| PURPOSE   | Food/Beverage Expense  | Food & Beverage for E   | vent   |
| OF<br>EXPENDITURE   |  | _   |  |
| EXPENditone   |  |   |  |
| 9 Complete ONLY if  | Candidate / Officeholder name  | Office sought:  | Office held:   |
| direct expenditure  |  | -   |  |
| to benefit C/OH   |  |   |  |
| Date  | Payee name   |   |  |
| 12/21/2011  | ALVIN AREA REPUBLICAN WOMEN  |   |  |
| Amount (\$)   | Payee address City; State; Zip Code  |   |  |
| \$15.00   | 18 Kenny Court<br>Alvin, TX 77511  |   |  |
| PURPOSE   | Category (See Categories listed at the top of this schedule)<br>Fees   | Description (If travel outs<br>CLUB DUES  | ide of Texas, complete Schedule T)   |
| EXPENDITURE   |  |   |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:   |
| Date  | Payee name   |   |  |
| 11/02/2011  | ALVIRI, NICK   |   |  |
| Amount (\$)   | Payee address City; State; Zip Code  |   |  |
| \$1,000.00  | PO Box 231432<br>Houston, TX 77223   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   | Description (If travel outs<br>CAMPAIGN OFFICE R  | ide of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:   |
| Date  | Payee name   |   |  |
| 12/01/2011  | ALVIRI, NICK   |   |  |
| Amount (\$)   | Payee address City; State; Zip Code  |   |  |
| \$1,000.00  | PO Box 231432<br>Houston, TX 77223   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense   | Description (If travel outs<br>CAMPAIGN OFFICE R  | ide of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:   |

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

### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 3/56 Report: 46/101 5 Payee name 4 Date AT&T 07/11/2011 Amount (\$) Payee address City; State; Zip Code 6 7 PO BOX 6463 \$76.67 CAROL STREAM, IL 60197 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE **TELEPHONE SERVICES** Office Overhead/Rental Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name AT&T 08/02/2011 Payee address Amount (\$) City; State; Zip Code PO BOX 6463 \$259.92 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AT&T 08/05/2011 Zip Code Amount (\$) Payee address City; State; PO BOX 6463 \$76.62 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AT&T 08/11/2011 Amount (\$) Payee address City; State; Zip Code PO BOX 6463 \$76.67 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

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

### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 4/56 Report: 47/101 5 Payee name 4 Date AT&T 08/23/2011 Amount (\$) Payee address City; State; Zip Code 6 7 PO BOX 6463 \$307.02 CAROL STREAM, IL 60197 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE **TELEPHONE SERVICES** Office Overhead/Rental Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name AT&T 09/23/2011 Payee address Amount (\$) City; State; Zip Code PO BOX 6463 \$191.19 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AT&T 10/04/2011 Zip Code Amount (\$) Payee address City; State; PO BOX 6463 \$85.48 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AT&T 10/28/2011 Amount (\$) Payee address City; State; Zip Code PO BOX 6463 \$191.38 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

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

### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 5/56 Report: 48/101 5 Payee name 4 Date AT&T 11/15/2011 Amount (\$) Payee address City; State; Zip Code 6 7 PO BOX 6463 \$191.27 CAROL STREAM, IL 60197 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE **TELEPHONE SERVICES** Office Overhead/Rental Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name AT&T 11/18/2011 Amount (\$) Payee address City; State; Zip Code PO BOX 6463 \$81.11 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AT&T 12/08/2011 Amount (\$) Payee address City; State; Zip Code 208 SOUTH AKARD ST \$81.77 DALLAS, TX 75202 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AT&T 12/15/2011 Amount (\$) Payee address City; State; Zip Code PO BOX 6463 \$93.12 CAROL STREAM, IL 60197 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

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

### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 6/56 Report: 49/101 5 Payee name 4 Date AT&T 12/23/2011 6 Amount (\$) Payee address City; State; Zip Code 7 PO BOX 6463 \$191.38 CAROL STREAM, IL 60197 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Office Overhead/Rental Expense TELEPHONE SERVICES OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name AUSTIN ENERGY 10/05/2011 Payee address Amount (\$) City; State; Zip Code 721 Barton Springs Road \$68.21 AUSTIN, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense UTILITIES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name AUSTIN ENERGY 10/24/2011 Amount (\$) Payee address City; State; Zip Code 721 Barton Springs Road \$45.36 AUSTIN, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense UTILITIES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date AUSTIN LAND & CATTLE 09/06/2011 Amount (\$) Payee address City; State; Zip Code 1205 N LAMAR \$95.55 AUSTIN, TX 78703 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE MEAL WITH STAFF TO DISCUSS CAMPAIGN Food/Beverage Expense OF AND OFFICEHOLDER ISSUES **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

00051862

Office held:

Office held:

Office held:

SCHEDULE F

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor Schedule: 7/56 Report: 50/101 5 Payee name 4 Date AUSTIN LAND & CATTLE 11/09/2011 Amount (\$) Payee address City; State; Zip Code 6 7 1205 N LAMAR \$143.05 AUSTIN, TX 78703 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE MEETING TO DISCUSS CAMPAIGN/OFFICE Food/Beverage Expense OF HOLDER ISSUES EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name BAY AREA COUNCIL BOY SCOUTS OF AMERICA 07/20/2011 Payee address Amount (\$) City; State; Zip Code 3020 53rd Street \$150.00 GALVESTON, TX 77551 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By DONATION TO TROOP OF Candidate/Officeholder/Political Committee EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name BEST BUY 10/02/2011 Amount (\$) Payee address City; State; Zip Code 19425 GULF FREEWAY FRONTAGE ROAD \$64.94 WEBSTER, TX 77598 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense COMPUTER SOFTWARE OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date **BLAKEMORE & ASSOCIATES** 08/01/2011 Amount (\$) Payee address City; State; Zip Code 1 Greenway Plz # 225 \$300.00

HOUSTON, TX 77046

Accounting/Banking

Candidate / Officeholder name

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Category (See Categories listed at the top of this schedule)

Electronically filed using Web Filer Version 1.6

Office held:

(If travel outside of Texas, complete Schedule T)

Description

Accounting Fees

Office sought:

# **POLITICAL EXPENDITURES**

| SCHEDULE F |
|------------|
|------------|

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundra  | ontract Labor Loan Repa<br>aising Expense Transporte<br>Contributic<br>rict Candida<br>Rental Expense OTHER (e | ayment/Reimbursement<br>tion Equipment & Related Expense<br>ins/Donations Made By<br>tac/Officeholder/Political Committee<br>nter a category not listed above) |
|---|---|--|--|
| 1 PAGE #<br>Schedule: 8/56 F  |   |  | 3 ACCOUNT # (TEC filers)<br>00051862   |
| 4 Date<br>08/24/2011  | 5 Payee name<br>BLAKEMORE & ASSOCIATES  |  |  |
| 6 Amount (\$)<br>\$52.67  | <ul> <li>7 Payee address City; State; Zip Code</li> <li>1 Greenway Plz # 225</li> <li>HOUSTON, TX 77046</li> </ul>                            |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | (b) Description (If travel out<br>COURIER FEES   | side of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date<br>09/01/2011  | Payee name<br>BLAKEMORE & ASSOCIATES  |  |  |
| Amount (\$)<br>\$300.00   | Payee address City; State; Zip Code<br>1 Greenway Plz # 225<br>HOUSTON, TX 77046  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking  | Description (If travel out<br>Accounting Fees  | side of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date  | Payee name<br>BOY SCOUTS OF AMERICA LEARNING IN LIFE  |  |  |
| 09/20/2011<br>Amount (\$)   | Payee address City; State; Zip Code   |  |  |
| \$250.00  | 2123 FLOWER FIELD LANE<br>PEARLAND, TX 77584  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel out<br>DONATION TO ORGA   | side of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date  | Payee name  |  |  |
| 09/15/2011  | BRAZORIA COUNTY REPUBLICAN PARTY  |  |  |
| Amount (\$)   | Payee address City; State; Zip Code   |  |  |
| \$100.00  | 608 N First St<br>Angleton, TX 77515  |  |  |
| PURPOSE   | Category (See Categories listed at the top of this schedule)  |  | side of Texas, complete Schedule T)  |
| OF  | Advertising Expense   | CAMPAIGN ADVERTI   | SING   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |
|   |   |  | Electronically filed using Web Filer Version 1.6   |

#### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 9/56 Report: 52/101 5 Payee name 4 Date CAPITOL GIFT SHOP 09/13/2011 Amount (\$) Payee address City; State; Zip Code 6 7 1201 San Jacinto \$68.20 AUSTIN, TX 78701 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Gift/Awards/Memorials Expense Items to Donate to District Events OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name CAPITOL GIFT SHOP 12/02/2011 Payee address Amount (\$) City; State; Zip Code 1201 San Jacinto \$389.70 AUSTIN, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Gift/Awards/Memorials Expense Items to Donate to District Events OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name CENTER FOR PREGNANCY 09/19/2011 Amount (\$) Payee address City; State; Zip Code 217 CE PARKWOOD \$150.00 FRIENDSWOOD, TX 77546 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By DONATION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date CHRISTMAN, CARI 07/01/2011 Payee address Amount (\$) City: State: Zip Code 7210 Boniface Lane \$500.00 AUSTIN, TX 78729 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE Salaries/Wages/Contract Labor CAMPAIGN INDEPENDENT CONTRACTOR OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

# **POLITICAL EXPENDITURES**

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| Advertising Expense         Gifts/Awards/Memorial Expense         Salaries/Wages/Contract Labor         Loan Repayment/Reimbursement           Accounting/Banking         Legal Services         Solicitation/Fundraising Expense         Transportation Equipment & Related Expense           Consulting Expense         Food/Beverage Expense         Travel In District         Contributions/Donations Made By           Event Expense         Polling Expense         Travel Out Of District         Candidate/Officeholder/Political Committee           Fees         Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above) |   |   |  |  |
|---|---|---|--|--|
| 1 PAGE #<br>Schedule: 10/56   | Report: 53/101 2 FILER NAME<br>Friends of Larry Taylor  |   | <b>3</b> ACCOUNT # (TEC filers)<br>00051862      |  |
| 4 Date<br>08/01/2011  | 5 Payee name<br>CHRISTMAN, CARI   |   |  |  |
| 6 Amount (\$)<br>\$500.00   | 7 Payee address City; State; Zip Code<br>7210 Boniface Lane<br>AUSTIN, TX 78729                   |   |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description (If travel outs<br>CAMPAIGN INDEPEN | side of Texas, complete Schedule T)              |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name   | Office sought:                                      | Office held:                                     |  |
| Date<br>09/01/2011  | Payee name<br>CHRISTMAN, CARI   |   |  |  |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>7210 Boniface Lane<br>AUSTIN, TX 78729                     |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | Description (If travel outs<br>CAMPAIGN INDEPEN     | side of Texas, complete Schedule T)              |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:                                      | Office held:                                     |  |
| Date  |   |   |  |  |
| 10/06/2011<br>Amount (\$)   | CHRISTMAN, CARI<br>Payee address City; State; Zip Code  |   |  |  |
| \$500.00  |   |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | Description (If travel outs<br>CAMPAIGN INDEPEN     | side of Texas, complete Schedule T)              |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Office sought:                                      | Office held:                                     |  |
| Date  |   |   |  |  |
| 11/03/2011  | CHRISTMAN, CARI   |   |  |  |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>7210 Boniface Lane<br>AUSTIN, TX 78729                     |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | Description (If travel outs<br>CAMPAIGN INDEPEN     | side of Texas, complete Schedule T)              |  |
| Complete ONLY if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name   | Office sought:                                      | Office held:                                     |  |
|   |   |   | Electronically filed using Web Filer Version 1.6 |  |

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

### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 11/56 Report: 54/101 5 Payee name 4 Date CHRISTMAN, CARI 12/01/2011 Payee address Amount (\$) City; State; Zip Code 6 7 7210 Boniface Lane \$500.00 AUSTIN, TX 78729 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE CAMPAIGN INDEPENDENT CONTRACTOR Salaries/Wages/Contract Labor OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name CITY OF AUSTIN 07/26/2011 Amount (\$) Payee address City; State; Zip Code PO Box 2267 \$64.04 AUSTIN, TX 78783 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense UTILITIES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name CITY OF AUSTIN 08/22/2011 Payee address Amount (\$) City; State; Zip Code PO Box 2267 \$66.15 AUSTIN, TX 78783 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense UTILITIES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name CITY OF AUSTIN 09/14/2011 Amount (\$) Payee address City: State: Zip Code PO Box 2267 \$3.50 AUSTIN, TX 78783 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE PARKING FEE FOR MEETING TO DISCUSS Fees OF CAMPAIGN EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

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

SCHEDULE F

### **POLITICAL EXPENDITURES**

| Advertising Expe   | nse Gifts/Awards/Memorial Expense S   | URE CATEGORIES<br>Galaries/Wages/Contract Labor   | Loan Repaym                                | ent/Reimbursement  |
|--|---|---|--|--|
| Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | nse Food/Beverage Expense T<br>Polling Expense T  | olicitation/Fundraising Expense<br>ravel In District<br>ravel Out Of District<br>Office Overhead/Rental Expense | /Contributions<br>/Candidate               | 1 Equipment & Related Expense<br>Donations Made By<br>Officeholder/Political Committee<br>r a category not listed above) |
|  | The Instruction Guide   | explains how to complete  | this form.                                 |  |
| 1 PAGE #<br>Schedule: 12/56                                  | Report: 55/101 2 FILER NAME<br>Friends of Larry Taylor  |   |  | 3 ACCOUNT # (TEC filers)<br>00051862   |
| 4 Date   | 5 Payee name  |   |  |  |
| 12/01/2011   | CLEAR CREEK REPUBLICAN WOMEN  | N   |  |  |
| 6 Amount (\$)  | 7 Payee address City; State; Zip  | o Code  |  |  |
| \$70.00  | 110 Dunbar Estates Dr #2305<br>Friendswood, TX 77546  |   |  |  |
| 8  | (a) Category (See Categories listed at the top of this  | schedule) (b) Descrip   | otion (If travel outside                   | e of Texas, complete Schedule T)   |
| PURPOSE<br>OF  | Event Expense   | DISTF   | RICT EVENT                                 |  |
| EXPENDITURE  |   |   |  |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Off   | ice sought:                                | Office held:   |
| Date<br>10/01/2011   | Payee name<br>CLEAR LAKE AREA REPUBLICAN CL   | UB  |  |  |
| Amount (\$)  | Payee address City; State; Zip  | o Code  |  |  |
| \$45.00  | PO Box 590444<br>Houston, TX 77259  |   |  |  |
|  | Category (See Categories listed at the top of this  | schedule) Descrip   | otion (If travel outside                   | e of Texas, complete Schedule T)   |
| PURPOSE<br>OF  | Event Expense   | MEME  | BERSHIP DUES                               |  |
| EXPENDITURE  |   |   |  |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Off   | ice sought:                                | Office held:   |
| Date   | Payee name  |   |  |  |
| 10/01/2011   | CLEAR LAKE AREA REPUBLICAN CL   | UB  |  |  |
| Amount (\$)  | Payee address City; State; Zip  | o Code  |  |  |
| \$500.00   | PO Box 590444<br>Houston, TX 77259  |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Category (See Categories listed at the top of this<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Commi | CONT  | otion (If travel outside<br>RIBUTION TO OR | e of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Off   | ice sought:                                | Office held:   |
| Date   | Payee name  |   |  |  |
| 10/01/2011   | CLEAR LAKE CHAMBER OF COMMEN  |   |  |  |
| Amount (\$)  | Payee address City; State; Zip  | o Code  |  |  |
| \$25.00  | 1201 NASA PARKWAY<br>HOUSTON, TX 77058  |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                 | Category (See Categories listed at the top of this Event Expense  | ,   | otion (If travel outside<br>RICT EVENT     | e of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Off   | ice sought:                                | Office held:   |

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

SCHEDULE F

# **POLITICAL EXPENDITURES**

|  | EXPENDITURE CATEGO  | RIES   |   |
|--|---|--|---|
| Advertising Expe<br>Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundraisi   | ng Expense Transportati<br>Contribution<br>Candidat<br>tal Expense OTHER (en | ment/Reimbursement<br>on Equipment & Related Expense<br>s/Donations Made By<br>e/Officeholder/Political Committee<br>ter a category not listed above) |
| 1 PAGE #   | 2 FILER NAME  |  | <b>3</b> ACCOUNT # (TEC filers)   |
| Schedule: 13/56  | Report: 56/101 Friends of Larry Taylor  |  | 00051862  |
| 4 Date<br>11/01/2011   | 5 Payee name<br>CLEAR LAKE CHAMBER OF COMMERCE  |  |   |
| 6 Amount (\$)  | 7 Payee address City; State; Zip Code   |  |   |
| \$20.00  | 1201 NASA PARKWAY<br>HOUSTON, TX 77058  |  |   |
| 8  | (a) Category (See Categories listed at the top of this schedule)  | (b) Description (If travel outsi   | de of Texas, complete Schedule T)   |
| PURPOSE  | Event Expense   | DISTRICT EVENT   |   |
| EXPENDITURE  |   |  |   |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date<br>07/26/2011   | Payee name<br>CMC COMMUNICATIONS  |  |   |
| Amount (\$)  | Payee address City; State; Zip Code   |  |   |
| \$100.00   | PO Box 891274<br>Houston, TX 77289  |  |   |
|  | Category (See Categories listed at the top of this schedule)  | Description (If travel outsi   | de of Texas, complete Schedule T)   |
| PURPOSE<br>OF  | Advertising Expense   | Radio Advertising  | —   |
| EXPENDITURE  |   |  |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date   | Payee name  |  |   |
| 08/26/2011   | COMMUNITIES IN SCHOOLS - BAY AREA   |  |   |
| Amount (\$)  | Payee address City; State; Zip Code   |  |   |
| \$500.00   | PO Box 580096<br>Houston, TX 77258  |  |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outsi<br>DONATION TO ORGAN                            | de of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date   | Payee name  |  |   |
| 07/18/2011   | CONSTANT CONTACT  |  |   |
| Amount (\$)  | Payee address City; State; Zip Code   |  |   |
| \$91.75  | 1601 Trapelo Road<br>WALTHAM, MA 02451  |  |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | Description (If travel outsi<br>Campaign Advertising                         | de of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:   | Office held:  |

### P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 14/56 Report: 57/101 5 Payee name 4 Date CONSTANT CONTACT 08/16/2011 Amount (\$) Payee address City; State; Zip Code 6 7 1601 Trapelo Road \$37.89 WALTHAM, MA 02451 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Advertising Expense CAMPAIGN ADVERTISING OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name CONSTANT CONTACT 10/01/2011 Payee address Amount (\$) City; State; Zip Code 1601 Trapelo Road \$37.89 WALTHAM, TX 02451 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Advertising Expense Campaign Advertising OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name CONSTANT CONTACT 10/17/2011 Amount (\$) Payee address City; State; Zip Code 1601 Trapelo Road \$37.71 WALTHAM, MA 02451 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Advertising Expense CAMPAIGN ADVERTISING OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date CONSTANT CONTACT 11/16/2011 Amount (\$) Payee address City; State; Zip Code 1601 Trapelo Road \$37.71 WALTHAM, MA 02451 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Advertising Expense CAMPAIGN ADVERTISING OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

SCHEDULE F

3 ACCOUNT # (TEC filers)

00051862

Office held:

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # Friends of Larry Taylor Schedule: 15/56 Report: 58/101 5 Payee name 4 Date CONSTANT CONTACT 12/19/2011 6 Amount (\$) Payee address City; State; Zip Code 7 1601 Trapelo Road \$37.71 WALTHAM, MA 02451 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Advertising Expense CAMPAIGN ADVERTISING OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name COPY DOCTOR 12/05/2011 Amount (\$) Payee address City; State; Zip Code 196 South Friendswood Dr \$603.40 Friendswood, TX 77546 Category (See Categories listed at the top of this schedule) Description PURPOSE Printing Expense OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name COURTYARD BY MARRIOT 11/14/2011 Amount (\$) Payee address City; State; Zip Code 300 East 4th St \$117.72 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description PURPOSE

(If travel outside of Texas, complete Schedule T) CAMPAIGN MATERIALS Office held: (If travel outside of Texas, complete Schedule T) Travel Out of District Lodging for Campaign Events OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date EASTSIDE CAFE 09/13/2011 Amount (\$) Payee address City: State: Zip Code 1223 MANOR RD \$32.95 AUSTIN, TX 78722 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Food/Beverage Expense MEETING TO DISCUSS CAMPAIGN OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

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

# **POLITICAL EXPENDITURES**

| SCHEDULE F | - |
|------------|---|
|------------|---|

|   | EXPEND  | ITURE CATEGO  | RIFS                                    |  |   |
|---|---|---|---|--|---|
| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | nse Gifts/Awards/Memorial Expense<br>ing Legal Services   | Salaries/Wages/Cont<br>Solicitation/Fundraisin<br>Travel In District<br>Travel Out Of District<br>Office Overhead/Rem | ract Labor<br>ng Expense<br>tal Expense | Transportation<br>Contributions/E<br>Candidate/C<br>OTHER (enter | ent/Reimbursement<br>Equipment & Related Expense<br>Jonations Made By<br>Jfliceholder/Political Committee<br>a category not listed above) |
| 1 PAGE #<br>Schedule: 16/56   | Report: 59/101 2 FILER NAME<br>Friends of Larry Taylo   | or  |   |  | <b>3</b> ACCOUNT # (TEC filers) 00051862  |
| 4 Date<br>10/30/2011  | 5 Payee name<br>ELECT KEN CLARK CAMPAIGN  |   |   |  | •   |
| 6 Amount (\$)<br>\$50.00  | PO Box 1684<br>League City, TX 77573  | Zip Code  |   |  |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of the Contributions/Donations Made By Candidate/Officeholder/Political Comr |   | CONTRIBUTI                              | ON TO POL  | of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name<br>CLARK, KEN   |   | Office soug                             | ht:  | Office held:<br>COUNTY COMMISSIONER   |
| Date<br>11/11/2011  | Payee name<br>ELECT KEN CLARK CAMPAIGN  |   |   |  |   |
| Amount (\$)<br>\$100.00   | Payee address City; State; 2<br>PO Box 1684<br>LEAGUE CITY, TX 77573  | Zip Code  |   |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of the Contributions/Donations Made By Candidate/Officeholder/Political Comr     |   |   |  | of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   |   | Office soug                             | ht:  | Office held:  |
| Date  | Payee name  |   |   |  |   |
| 10/26/2011  | FAIRFIELD INN Payee address City; State; 2  | Zin Codo  |   |  |   |
| Amount (\$)<br>\$102.90   | Payee address City; State; 2<br>1505 South University Dr<br>Fort Worth, TX 76102  | zip Code  |   |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of the Travel Out of District  | his schedule)   | Description (<br>Lodging for Ca         |  | of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   |   | Office soug                             | ht:  | Office held:  |
| Date<br>11/18/2011  | Payee name<br>FEDEX   |   |   |  |   |
| Amount (\$)   | Payee address City; State; 2  | Zip Code  |   |  |   |
| \$24.12   | 19325-2 GULF FREEWAY<br>WEBSTER, TX 77598   |   |   |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of the Office Overhead/Rental Expense  | his schedule)   | Description (<br>COURIER FE             |  | of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   |   | Office soug                             | ht:  | Office held:  |

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

# **POLITICAL EXPENDITURES**

| SCHEDULE | F |
|----------|---|
| SCHEDULE |   |

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense<br>Consulting Expense           Event Expense<br>Fees         Food/Beverage Expense         Travel In District         Contributions/Donations Made By<br>Office Overhead/Rental Expense         Contributions/Donations Made By<br>Contributions/Donations Made By           Fees         Printing Expense         Office Overhead/Rental Expense         Office Overhead/Rental Expense           The Instruction         Guide Explains how to complete this form. |   |   |  |  |
|---|---|---|--|--|
| 1 PAGE #<br>Schedule: 17/56   | 2 FILER NAME<br>Friends of Larry Taylor   | 3 ACCOUNT # (TEC filers)<br>00051862  |  |  |
| 4 Date  | 5 Payee name  | 00001002  |  |  |
| 11/22/2011<br>6 Amount (\$)   | FEDEX 7 Payee address City; State; Zip Code   |   |  |  |
| \$281.45  |   |   |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense  | (b) Description (If travel outside of Texas, complete Schedule T) CAMPAIGN MATERIALS              |  |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name   | Office sought: Office held:   |  |  |
| Date<br>09/07/2011  | Payee name<br>FRANKLIN STRATEGY GROUP   |   |  |  |
| Amount (\$)<br>\$600.00   | Payee address City; State; Zip Code<br>2612 Carnarvon Lane #B<br>Austin, TX 78704   |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | Description (If travel outside of Texas, complete Schedule T) CAMPAIGN ADVERTISING AND CONSULTING |  |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought: Office held:   |  |  |
| Date  | Payee name<br>FRIENDS OF MIKE JACKSON   |   |  |  |
| 09/29/2011<br>Amount (\$)   | Payee address City; State; Zip Code   |   |  |  |
| \$1,000.00  |   |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) CONTRIBUTION TO POLITICAL CAMPAIGN  |  |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Office sought: Office held:   |  |  |
| Date  |   |   |  |  |
| 08/08/2011  | FRIENDSWOOD CHAMBER OF COMMERCE   |   |  |  |
| Amount (\$)<br>\$250.00   | Payee address City; State; Zip Code<br>PO BOX 11<br>FRIENDSWOOD, TX 77549   |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) CONTRIBUTION TO ORGANIZATION        |  |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Office sought: Office held:   |  |  |
|   |   | Electronically filed using Web Filer Version 1  |  |  |

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 18/56 Report: 61/101 4 Date 5 Payee name FRIENDSWOOD CHAMBER OF COMMERCE 08/26/2011 Amount (\$) Payee address City; State; Zip Code 6 7 PO BOX 11 \$150.00 FRIENDSWOOD, TX 77549 (b) Description (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 PURPOSE Contributions/Donations Made By CONTRIBUTION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name FRIENDSWOOD CHAMBER OF COMMERCE 12/01/2011 Payee address Amount (\$) City; State; Zip Code PO BOX 11 \$20.00 FRIENDSWOOD, TX 77546 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Event Expense DISTRICT EVENT OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name FRIENDSWOOD ISD Education Foundation 09/22/2011 Amount (\$) Payee address City; State; Zip Code 202 Laurel \$500.00 FRIENDSWOOD, TX 77546 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By DONATION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name FRYS ELECTRONICS 11/17/2011 Amount (\$) Payee address City; State; Zip Code 21300 GULF FREEWAY \$18.59 WEBSTER, TX 77598 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense OFFICE AND COMPUTER SUPPLIES OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

00051862

Office held:

SCHEDULE F

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor Schedule: 19/56 Report: 62/101 5 Payee name 4 Date FULLEN, JIMMY 12/13/2011 Amount (\$) Payee address City; State; Zip Code 6 7 1403 AVE L \$325.00 SANTA FE, TX 77510 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE CAMPAIGN EVENT ORGANIZATION Event Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name FULLEN FOR CONSTABLE 08/22/2011 Amount (\$) Payee address City; State; Zip Code 1403 AVE L \$250.00 SANTA FE, TX 77510 Category (See Categories listed at the top of this schedule) Description PURPOSE Contributions/Donations Made By OF Candidate/Officeholder/Political Committee EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name GABLES AT THE TERRACE 07/01/2011 Amount (\$) Payee address City; State; Zip Code 2301 S Mopac Expy \$1,000.00 AUSTIN, TX 78746 Category (See Categories listed at the top of this schedule) Description PURPOSE Office Overhead/Rental Expense OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date GABLES AT THE TERRACE 07/26/2011

(If travel outside of Texas, complete Schedule T) CONTRIBUTION TO POLITICAL CAMPAIGN Office held: (If travel outside of Texas, complete Schedule T) CAPITAL APARTMENT RENTAL Office held: Amount (\$) Payee address City; State; Zip Code 2301 S Mopac Expy \$16.12 AUSTIN, TX 78746 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Office Overhead/Rental Expense UTILITIES FOR CAPITAL APARTMENT OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Electronically filed using Web Filer Version 1.6

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# **POLITICAL EXPENDITURES**

|          | - |
|----------|---|
| SCHEDULE | Г |

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense<br>Fees         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense<br>Travel In District         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense           Food/Beverage Expense<br>Event Expense<br>Fees         Food/Beverage Expense         Travel In District         Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee           Fees         Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above) |  |  |   |  |
|--|--|--|---|--|
| 1 PAGE #<br>Schedule: 20/56  | Report: 63/101 2 FILER NAME<br>Friends of Larry Taylor   |  | 3 ACCOUNT # (TEC filers)<br>00051862              |  |
| 4 Date<br>08/01/2011   | 5 Payee name<br>GABLES AT THE TERRACE  |  | ·   |  |
| 6 Amount (\$)<br>\$1,000.00  | 7 Payee address City; State; Zip Code<br>2301 S Mopac Expy<br>AUSTIN, TX 78746                     |  |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | (b) Description (If travel out<br>CAPITAL APARTMEN | side of Texas, complete Schedule T) 🔲<br>T RENTAL |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name  | Office sought:                                     | Office held:                                      |  |
| Date<br>08/17/2011   | Payee name<br>GABLES AT THE TERRACE  |  |   |  |
| Amount (\$)  | Payee address City; State; Zip Code  |  |   |  |
| \$12.26  | 2301 S Mopac Expy<br>AUSTIN, TX 78746  |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense     | Description (If travel out<br>UTILITIES FOR CAPIT  | side of Texas, complete Schedule T)               |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name  | Office sought:                                     | Office held:                                      |  |
| Date   | Payee name   |  |   |  |
| 09/07/2011   | GABLES AT THE TERRACE  |  |   |  |
| Amount (\$)<br>\$1,065.00  | Payee address City; State; Zip Code<br>2301 S Mopac Expy<br>AUSTIN, TX 78746                       |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense     | Description (If travel out<br>CAPITAL APARTMEN     | side of Texas, complete Schedule T) 🔲<br>T RENTAL |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:                                     | Office held:                                      |  |
| Date<br>09/24/2011   | Payee name<br>GABLES AT THE TERRACE  |  |   |  |
| Amount (\$)  | Payee address City; State; Zip Code  |  |   |  |
| \$12.04  | 2301 S Mopac Expy<br>AUSTIN, TX 78746  |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense     | Description (If travel out<br>UTILITIES FOR CAPIT  | side of Texas, complete Schedule T)               |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:                                     | Office held:                                      |  |

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 21/56 Report: 64/101 5 Payee name 4 Date GABLES AT THE TERRACE 10/05/2011 6 Amount (\$) Payee address City; State; Zip Code 7 2301 S Mopac Expy \$1,000.00 AUSTIN, TX 78746 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE CAPITAL APARTMENT RENTAL Office Overhead/Rental Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name GABLES AT THE TERRACE 10/25/2011 Payee address City; State; Amount (\$) Zip Code 2301 S Mopac Expy \$14.55 AUSTIN, TX 78746 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense UTILITIES FOR CAPITAL APARTMENT OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name GABLES AT THE TERRACE 11/21/2011 Amount (\$) Payee address City; State; Zip Code 2301 S Mopac Expy \$12.97 AUSTIN, TX 78746 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense UTILITIES FOR CAPITAL APARTMENT OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name GALVESTON COUNTY REPUBLICAN PARTY 08/05/2011 Amount (\$) Payee address City; State; Zip Code PO Box 135 \$1,000.00 League City, TX 77574 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Contributions/Donations Made By CONTRIBUTION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

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Office held:

Office sought:

| POLITIC  | AL EXPENDITURES   |   | SCHEDULE F  |
|--|---|---|---|
| Advertising Expe<br>Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundra  | ontract Labor<br>ising Expense Transporta<br>ict Candida<br>ental Expense OTHER (er | yment/Reimbursement<br>tion Equipment & Related Expense<br>ns/Donations Made By<br>te/Officeholder/Political Committee<br>nter a category not listed above) |
| 1 PAGE #<br>Schedule: 22/56  | Report: 65/101 FILER NAME<br>Friends of Larry Taylor  |   | 3 ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>11/10/2011   | 5 Payee name<br>GALVESTON COUNTY REPUBLICAN PARTY   |   |   |
| 6 Amount (\$)<br>\$50.00   | 7 Payee address City; State; Zip Code<br>PO Box 135<br>League City, TX 77574  |   |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Fees  | (b) Description (If travel outs<br>CLUB DUES  | side of Texas, complete Schedule T)   |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                      | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date   | Payee name<br>GALVESTON ISLAND PACHYDERM CLUB   |   |   |
| 12/21/2011<br>Amount (\$)  | Payee address City; State; Zip Code   |   |   |
| \$35.00  | 1991 SERENITY LN<br>LEAGUE CITY, TX 77573   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outs<br>CLUB MEMBERSHIP                                      | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>08/26/2011   | Payee name<br>GALVESTON REPUBLICAN WOMEN  |   |   |
| Amount (\$)<br>\$140.00  | Payee address City; State; Zip Code<br>7718 BELUCHE DR<br>GALVESTON, TX 77551   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outs<br>CONTRIBUTION TO C                                    | ide of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>12/14/2011   | Payee name<br>GALVESTON REPUBLICAN WOMEN  |   |   |
| Amount (\$)<br>\$15.00   | Payee address City; State; Zip Code<br>7718 BELUCHE DR<br>GALVESTON, TX 77551   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outs<br>CLUB DUES  | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:  |
|  |   |   | Electronically filed using Web Filer Version 1.6  |

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# **POLITICAL EXPENDITURES**

### SCHEDULE F

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense           Food/Beverage Expense         Travel In District         Contributions/Donations Made By           Foes         Polling Expense         Travel Out Of District         Candidate/Officeholder/Political Committee           Fees         Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above)           The Instruction         Guide explains how to complete this form.         Complete this form. |   |   |  |
|--|---|---|--|
| 1 PAGE #<br>Schedule: 23/56  | Report: 66/101 2 FILER NAME<br>Friends of Larry Taylor  | 3 ACCOUNT # (TEC filer<br>00051862  |  |
| 4 Date<br>08/26/2011   | 5 Payee name<br>GIFT BASKET GALORE  |   |  |
| 6 Amount (\$)<br>\$106.49  | <ul> <li>Payee address City; State; Zip Code</li> <li>604 Boyou Crest</li> <li>DICKINSON, TX 77539</li> </ul> |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense             | (b) Description (If travel outside of Texas, complete Schedule T)<br>Items to Donate to District Events |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Office sought: Office held:   |  |
| Date 11/22/2011  | Payee name<br>GIFT BASKET GALORE  |   |  |
| Amount (\$)<br>\$162.07  | Payee address City; State; Zip Code<br>604 Boyou Crest<br>DICKINSON, TX 77539                                 |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense                 | Description (If travel outside of Texas, complete Schedule T)<br>Items to Donate to District Events     |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought: Office held:   |  |
| Date   |   |   |  |
| 07/11/2011<br>Amount (\$)  | GIFT BASKETS GALORE Payee address City; State; Zip Code   |   |  |
| \$40.03  |   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Gift/Awards/Memorials Expense                 | Description (If travel outside of Texas, complete Schedule T)<br>Items to Donate to District Events     |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name   | Office sought: Office held:   |  |
| Date   | Payee name  |   |  |
| 07/05/2011   | Goodman, Teri Payee address City; State; Zip Code   |   |  |
| Amount (\$)<br>\$106.09  |   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel In District                            | Description (If travel outside of Texas, complete Schedule T)<br>MILEAGE REIMBURSEMENT TO STAFF         |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name   | Office sought: Office held:   |  |
|  |   | Electronically filed using Web Filer Version  |  |

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SCHEDULE F

# **POLITICAL EXPENDITURES**

| Advertising Expe<br>Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundra<br>nse Food/Beverage Expense Travel In District<br>Polling Expense Travel Out Of Distr<br>Printing Expense Office Overhead/R<br>The INSTRUCTION GUIDE explains how | ontract Labor Loan Repayn<br>ising Expense Transportatio<br>Contributions<br>rict Candidate<br>tental Expense OTHER (ente | nent/Reimbursement<br>n Equipment & Related Expense<br>/Donations Made By<br>/Officeholder/Political Committee<br>r a category not listed above) |
|--|---|---|--|
| 1 PAGE #   | 2 FILER NAME  |   | 3 ACCOUNT # (TEC filers)   |
| Schedule: 24/56  |   |   | 00051862   |
| 4 Date<br>10/05/2011   | 5 Payee name<br>GOODMAN, TERI   |   |  |
| 6 Amount (\$)<br>\$124.00  | 7 Payee address City; State; Zip Code<br>2805 GULF FRWY S<br>LEAGUE CITY, TX 77573  | _   |  |
| 8  | (a) Category (See Categories listed at the top of this schedule)  |   | e of Texas, complete Schedule T)   |
| PURPOSE<br>OF  | Travel In District  | MILEAGE REIMBURSE   | MENT TO STAFF  |
| EXPENDITURE  |   |   |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH                            | Candidate / Officeholder name   | Office sought:  | Office held:   |
| Date<br>12/31/2011   | Payee name<br>GOODMAN, TERI   |   |  |
| Amount (\$)  | Payee address City; State; Zip Code   |   |  |
| \$307.00   | 2805 GULF FRWY S<br>LEAGUE CITY, TX 77573   |   |  |
|  | Category (See Categories listed at the top of this schedule)  | Description (If travel outsid   | e of Texas, complete Schedule T)   |
| PURPOSE  | Travel In District  | MILEAGE REIMBURSE   |  |
| OF<br>EXPENDITURE  |   |   |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:   |
| Date   | Payee name  |   |  |
| 09/12/2011   | HAMPTON INN   |   |  |
| Amount (\$)  | Payee address City; State; Zip Code   |   |  |
| \$109.00   | 2829 N PERRYTON PWKY<br>PAMPA, TX 79065   |   |  |
| PURPOSE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District  | Description (If travel outsid<br>Lodging for Campaign Ev  | e of Texas, complete Schedule T)   |
| OF<br>EXPENDITURE  |   |   |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                 | Candidate / Officeholder name   | Office sought:  | Office held:   |
| Date   | Payee name  |   |  |
| 08/26/2011   | HAUTE FLOWERS AND FINDS   |   |  |
| Amount (\$)  | Payee address City; State; Zip Code   |   |  |
| \$102.60   | 826 W Main St<br>League City, TX 77573  |   |  |
|  | Category (See Categories listed at the top of this schedule)  | Description (If travel outsid   | e of Texas, complete Schedule T)   |
| PURPOSE<br>OF<br>EXPENDITURE   | Gift/Awards/Memorials Expense   | Items to Donate to Distric  | ct Events  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                 | Candidate / Officeholder name   | Office sought:  | Office held:   |
|  |   |   | Electronically filed using Web Filer Version 1   |

### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 25/56 Report: 68/101 5 Payee name 4 Date HIDDEN PALMS 12/13/2011 Amount (\$) Payee address City; State; Zip Code 6 7 3703 AVE F \$300.00 SANTA FE, TX 77510 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE CAMPAIGN EVENT RENTAL Event Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name HOPE VILLAGE & THE HOPE FOUNDATION 08/26/2011 Amount (\$) Payee address City; State; Zip Code 15403 Hope Village Road \$175.00 Friendswood, TX 77546 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By CONTRIBUTION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name HORIZON PUBLIC AFFAIRS 07/05/2011 Payee address Amount (\$) City; State; Zip Code 815 A Brazos Suite 436 \$2,500.00 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Consulting Expense CAMPAIGN CONSULTING OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name HORIZON PUBLIC AFFAIRS 08/01/2011 Amount (\$) Payee address City; State; Zip Code 815 A Brazos Suite 436 \$2,500.00 AUSTIN, TX 78701 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Consulting Expense CAMPAIGN CONSULTING OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure

to benefit C/OH

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

SCHEDULE F

## **POLITICAL EXPENDITURES**

|  | EXPENDITURE CATEGO  | RIES  |   |
|--|---|---|---|
| Advertising Expe<br>Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundrais  | ing Expense Transportation<br>Contributions/<br>t Candidate/<br>ntal Expense OTHER (enter | ent/Reimbursement<br>I Equipment & Related Expense<br>Donations Made By<br>Officeholder/Political Committee<br>a category not listed above) |
| 1 PAGE #   | 2 FILER NAME<br>Friends of Larry Taylor   |   | 3 ACCOUNT # (TEC filers)  |
| Schedule: 26/56<br><b>4</b> Date   | 5 Payee name  |   | 00051862  |
| 09/01/2011   | HORIZON PUBLIC AFFAIRS  |   |   |
| 6 Amount (\$)  | 7 Payee address City; State; Zip Code   |   |   |
| \$2,500.00   | 815 A Brazos Suite 436<br>AUSTIN, TX 78701  |   |   |
| B<br>PURPOSE   | (a) Category (See Categories listed at the top of this schedule)  |   | of Texas, complete Schedule T)  |
| OF<br>EXPENDITURE  | Consulting Expense  | CAMPAIGN CONSULTIN  | IG  |
| Complete ONLY if<br>direct expenditure<br>to benefit C/OH                        | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>12/05/2011   | Payee name<br>INTER FAITH CARING MINISTRIES   |   |   |
| Amount (\$)  | Payee address City; State; Zip Code   |   |   |
| \$150.00   | 151 PARK AVENUE<br>LEAGUE CITY, TX 77573  |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outside<br>CONTRIBUTION TO OR                                      | of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date   | Payee name<br>JIMMY JOHNS   |   |   |
| 11/03/2011<br>Amount (\$)  | Payee address City; State; Zip Code   |   |   |
| \$29.00  | 816 CONGRESS  |   |   |
| φ29.00   | 1   |   |   |
|  | AUSTIN, TX 78701  |   |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | Description (If travel outside<br>FOOD FOR STAFF MEE                                      | e of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date   | Payee name  |   |   |
| 11/04/2011   | LA MADELINE   |   |   |
| Amount (\$)  | Payee address City; State; Zip Code   |   |   |
| \$21.61  | 929 BAY AREA BLVD<br>WEBSTER, TX 77598  |   |   |
| PURPOSE<br>OF  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | Description (If travel outside<br>MEETING TO DISCUSS                                      | of Texas, complete Schedule T)  |
| EXPENDITURE  |   |   |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:  | Office held:  |
|  |   |   |   |

| Texas Ethics Corr   |  | 2070 (512)4  | 463-5800 TDD 1-800-735-298   |
|---|--|--|--|
| POLITIC   | CAL EXPENDITURES   |  | SCHEDULE F   |
| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fundra  | ontract Labor Loan Repay<br>aising Expense Transportati<br>Contribution<br>rict Candidat<br>Rental Expense OTHER (en | ment/Reimbursement<br>on Equipment & Related Expense<br>Is/Donations Made By<br>e/Officeholder/Political Committee<br>ter a category not listed above) |
| 1 PAGE #  | Beport: 70/101 2 FILER NAME<br>Friends of Larry Taylor                                       |  | 3 ACCOUNT # (TEC filers)   |
| Schedule: 27/56<br>4 Date   | 5 Payee name   |  | 00051862   |
| 08/26/2011  | LEAGUE CITY CHAMBER OF COMMERCE  |  |  |
| 6 Amount (\$)<br>\$235.00   | 7 Payee address City; State; Zip Code<br>1101 WEST MAIN ST<br>STE R<br>LEAGUE CITY, TX 77537 |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Fees                     | (b) Description (If travel outsi<br>MEMBERSHIP DUES  | de of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date  |  |  |  |
| 08/26/2011<br>Amount (\$)   | LEAGUE CITY CHAMBER OF COMMERCE           Payee address         City; State; Zip Code        |  |  |
| \$30.00   |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                | Description (If travel outsi<br>DISTRICT EVENT   | de of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>10/12/2011  | Payee name<br>LEAGUE CITY CHAMBER OF COMMERCE  |  |  |
| Amount (\$)<br>\$30.00  | Payee address City; State; Zip Code<br>1101 WEST MAIN ST<br>LEAGUE CITY, TX 77573            |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense                | Description (If travel outsi<br>DISTRICT EVENT   | de of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>12/13/2011  | Payee name<br>M WHITE ASSOCIATES   |  |  |
| Amount (\$)<br>\$400.00   | Payee address City; State; Zip Code<br>101 E Park Blvd #300<br>PLANO, TX 75074               |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Accounting/Banking           | Description (If travel outsi<br>ACCOUNTING FEES  | de of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:   |

to benefit C/OH

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

### P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 28/56 Report: 71/101 4 Date 5 Payee name MOONSHINE PATIO BAR 07/26/2011 Amount (\$) Payee address City; State; Zip Code 6 7 303 RED RIVER \$88.59 AUSTIN, TX 78701 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE MEETING TO DISCUSS CAMPAIGN Food/Beverage Expense OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name MURPHY TURNER ASSOCIATES LLC 09/29/2011 Amount (\$) Payee address City; State; Zip Code PO Box 296 \$2,500.00 AUSTIN, TX 78767 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE CAMPAIGN ADVERTISING AND CONSULTING Advertising Expense OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name MURPHY TURNER ASSOCIATES LLC 10/06/2011 Amount (\$) Payee address City; State; Zip Code PO Box 296 \$2,500.00 AUSTIN, TX 78767 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Advertising Expense CAMPAIGN ADVERTISING AND CONSULTING OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date MURPHY TURNER ASSOCIATES LLC 10/31/2011 Amount (\$) Payee address City: State: Zip Code PO Box 296 \$10,720.59 AUSTIN, TX 78767 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE Advertising Expense CAMPAIGN ADVERTISING AND CONSULTING OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

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

SCHEDULE F

# **POLITICAL EXPENDITURES**

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fund   | Contract Labor Loan Re<br>raising Expense Transpoi<br>Contribu<br>strict Candi<br>Rental Expense OTHER | payment/Reimbursement<br>rtation Equipment & Related Expense<br>tions/Donations Made By<br>idate/Officeholder/Political Committee<br>(enter a category not listed above) |
|---|---|--|--|
| 1 PAGE #  | 2 FILER NAME<br>Friends of Larry Taylor   |  | 3 ACCOUNT # (TEC filers)   |
| Schedule: 29/56<br>4 Date   | Seport: 72/101   Thends of Larry Taylor     5   Payee name                              |  | 00051862   |
| 11/07/2011  | MURPHY TURNER ASSOCIATES LLC  |  |  |
| 6 Amount (\$)<br>\$12,400.00  | 7 Payee address City; State; Zip Code<br>PO Box 296<br>AUSTIN, TX 78767                 |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense |  | utside of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date<br>11/09/2011  | Payee name<br>MURPHY TURNER ASSOCIATES LLC  |  |  |
| Amount (\$)   | Payee address City; State; Zip Code   |  |  |
| \$3,769.17  | PO Box 296<br>AUSTIN, TX 78767  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense     |  | utside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date  | Payee name  |  |  |
| 11/15/2011  | MURPHY TURNER ASSOCIATES LLC  |  |  |
| Amount (\$)   | Payee address City; State; Zip Code   |  |  |
| \$1,444.79  | PO Box 296<br>AUSTIN, TX 78767  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense     |  | utside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date<br>12/05/2011  | Payee name<br>MURPHY TURNER ASSOCIATES LLC  |  |  |
| Amount (\$)   | Payee address City; State; Zip Code   |  |  |
| \$18,646.96   |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense     |  | utside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought:   | Office held:   |
|   |   |  | Electronically filed using Web Filer Version 1   |

lly filed using

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

SCHEDULE F

#### **POLITICAL EXPENDITURES**

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fundra   | ontract Labor Loan Repaym<br>ising Expense Transportation<br>Contributions/<br>rict Candidate/<br>tental Expense OTHER (ente | ent/Reimbursement<br>n Equipment & Related Expense<br>Donations Made By<br>Officeholder/Political Committee<br>r a category not listed above) |
|---|---|--|---|
| 1 PAGE #<br>Schedule: 30/56   | Report: 73/101 2 FILER NAME<br>Friends of Larry Taylor  |  | 3 ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>12/07/2011  | 5 Payee name<br>MURPHY TURNER ASSOCIATES LLC  |  |   |
| 6 Amount (\$)<br>\$2,854.12   | 7 Payee address City; State; Zip Code<br>PO Box 296<br>AUSTIN, TX 78767                       |  |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense       | (b) Description (If travel outside<br>CAMPAIGN ADVERTISI   | e of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date 12/15/2011   | Payee name<br>MURPHY TURNER ASSOCIATES LLC  |  |   |
| Amount (\$)<br>\$25,000.00  | Payee address City; State; Zip Code<br>PO Box 296<br>AUSTIN, TX 78767                         |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | Description (If travel outside<br>CAMPAIGN ADVERTISI   | e of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date  | Payee name  |  |   |
| 11/02/2011  | NOONAN, CHRIS   |  |   |
| Amount (\$)<br>\$1,839.00   | Payee address City; State; Zip Code<br>2209 CLIFFS EDGE DR<br>AUSTIN, TX 78733                |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside<br>CAMPAIGN INDEPENDE   | e of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date<br>12/01/2011  | Payee name<br>NOONAN, CHRIS   |  |   |
| Amount (\$)<br>\$3,000.00   | Payee address City; State; Zip Code<br>2209 CLIFFS EDGE DR<br>AUSTIN, TX 78733                |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | Description (If travel outside<br>CAMPAIGN INDEPENDE   | e of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought:   | Office held:  |
|   |   |  | lectronically filed using Web Filer Version 1.6   |

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| SCHEDULE  | F |
|-----------|---|
| CONFRONCE |   |

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fun<br>nse Food/Beverage Expense Travel In Distric<br>Polling Expense Travel Out Of D | S/Contract Labor Loan Rep<br>draising Expense Transport<br>et Contributi<br>District Candid<br>d/Rental Expense OTHER (€ | ayment/Reimbursement<br>ation Equipment & Related Expense<br>ons/Donations Made By<br>late/Officeholder/Political Committee<br>enter a category not listed above) |
|---|--|--|---|
| 1 PAGE #<br>Schedule: 31/56   | Report: 74/101 2 FILER NAME<br>Friends of Larry Taylor   |  | 3 ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>08/22/2011  | 5 Payee name<br>North Galveston Chamber of Commerce  |  |   |
| 6 Amount (\$)<br>\$100.00   | 7 Payee address City; State; Zip Code<br>218 FM 517 West<br>Dickinson, TX 77539  |  |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                                      | (b) Description (If travel out<br>Event Fee and Sponse   | tside of Texas, complete Schedule T)  orship  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name  | Office sought:   | Office held:  |
| Date<br>11/14/2011  | Payee name<br>OFFICE DEPOT   |  |   |
| Amount (\$)<br>\$411.31   | Payee address City; State; Zip Code<br>1301 WEST BAY AREA BLVD<br>WEBSTER, TX 77598                                    |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                         |  | tside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:  |
| Date  | Payee name   |  |   |
| 11/17/2011  | OFFICE DEPOT   |  |   |
| Amount (\$)<br>\$28.13  | Payee address City; State; Zip Code<br>1301 WEST BAY AREA BLVD<br>WEBSTER, TX 77598                                    |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                         | Description (If travel out<br>CAMPAIGN OFFICE S  | tside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:  |
| Date 12/07/2011   | Payee name<br>OMNI FORT WORTH  |  |   |
| Amount (\$)   | Payee address City; State; Zip Code  |  |   |
| \$171.35  | 1300 Houston Street<br>Fort Worth, TX 76102  |  |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District                                 | Description (If travel our<br>Lodging for Campaign   | tside of Texas, complete Schedule T) 🔲<br>Event   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:  |

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### **POLITICAL EXPENDITURES**

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense<br>Fees         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense<br>Travel In District         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee<br>OTHER (enter a category not listed above)           The Instruction         Guide Expense<br>Food/Beverage Expense         Travel Out Of District<br>Office Overhead/Rental Expense         Candidate/Officeholder/Political Committee<br>OTHER (enter a category not listed above) |   |  |                                      |
|---|---|--|--------------------------------------|
| 1 PAGE #<br>Schedule: 32/56   | Report: 75/101 2 FILER NAME<br>Friends of Larry Taylor  |  | 3 ACCOUNT # (TEC filers)<br>00051862 |
| 4 Date<br>08/22/2011  | 5 Payee name<br>OPTIMIST CLUB OF DICKINSON  |  |                                      |
| 6 Amount (\$)<br>\$100.00   | 7 Payee address City; State; Zip Code<br>PO BOX 39<br>DICKINSON, TX 77539   |  |                                      |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description (If travel outside<br>CONTRIBUTION TO OR | of Texas, complete Schedule T)       |
| 9 Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:   | Office held:                         |
| Date<br>07/22/2011  | Payee name<br>OZARKA  |  |                                      |
| Amount (\$)   | Payee address City; State; Zip Code   |  |                                      |
| \$31.75   | #215 6661 DIXIE HWY SUITE 4<br>LOUISVILLE, KY 40285   |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | Description (If travel outside<br>WATER FOR OFFICE       | e of Texas, complete Schedule T)     |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:   | Office held:                         |
| Date  | Payee name  |  |                                      |
| 08/24/2011  | OZARKA  |  |                                      |
| Amount (\$)<br>\$54.44  | Payee address City; State; Zip Code<br>#215 6661 DIXIE HWY SUITE 4<br>LOUISVILLE, KY 40285  |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | Description (If travel outside<br>WATER FOR OFFICE       | e of Texas, complete Schedule T)     |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:   | Office held:                         |
| Date<br>09/30/2011  | Payee name<br>OZARKA  |  |                                      |
| Amount (\$)   | Payee address City; State; Zip Code   |  |                                      |
| \$35.96   | #215 6661 DIXIE HWY SUITE 4<br>LOUISVILLE, KY 40285   |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | Description (If travel outside<br>WATER FOR OFFICE       | e of Texas, complete Schedule T)     |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:   | Office held:                         |

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

SCHEDULE F

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation/<br>nse Food/Beverage Expense Travel In Dis<br>Polling Expense Travel Out C | ges/Contract Labor     Loan Repayment/Reimbursement       Fundraising Expense     Transportation Equipment & Related Expense       strict     Contributions/Donations Made By       of District     Candidate/Officeholder/Political Committee       nead/Rental Expense     OTHER (enter a category not listed above) |
|---|---|--|
| 1 PAGE #<br>Schedule: 33/56   | Report: 76/101 2 FILER NAME<br>Friends of Larry Taylor  | 3 ACCOUNT # (TEC filers)<br>00051862   |
| 4 Date<br>10/05/2011  | 5 Payee name<br>OZARKA  |  |
| 6 Amount (\$)<br>\$35.96  | 7 Payee address City; State; Zip Code<br>#215 6661 DIXIE HWY SUITE 4<br>LOUISVILLE, KY 40285                |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                   | (b) Description (If travel outside of Texas, complete Schedule T) WATER FOR OFFICE   |
| 9 Complete ONLY if direct expenditure to benefit C/OH                           | Candidate / Officeholder name   | Office sought: Office held:  |
| Date<br>10/21/2011  | Payee name<br>OZARKA  |  |
| Amount (\$)<br>\$10.95  | Payee address City; State; Zip Code<br>#215 6661 DIXIE HWY SUITE 4<br>LOUISVILLE, KY 40285                  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                       | Description (If travel outside of Texas, complete Schedule T) WATER FOR OFFICE   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought: Office held:  |
| Date<br>08/22/2011  | Payee name<br>PEARLAND AREA REPUBLICAN CLUB   |  |
| Amount (\$)<br>\$20.00  | Payee address City; State; Zip Code<br>3301 JACQUELYN<br>PEARLAND, TX 77581                                 |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought: Office held:  |
| Date<br>09/19/2011  | Payee name<br>PEARLAND CHAMBER OF COMMERCE  |  |
| Amount (\$)<br>\$365.00   | Payee address City; State; Zip Code<br>6117 BROADWAY<br>PEARLAND, TX 77581                                  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outside of Texas, complete Schedule T)<br>MEMBERSHIP DUES   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought: Office held:  |
|   |   | Electronically filed using Web Filer Version 1.  |

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## **POLITICAL EXPENDITURES**

#### SCHEDULE F

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense         Loan Repayment/Reimbursement           Food/Beverage Expense<br>Event Expense         Food/Beverage Expense         Travel In District         Constitution/Fundraising Expense         Contributions/Donations Made By           Foes         Polling Expense         Travel Out Of District         Candidate/Officeholder/Political Committee           Fees         Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above)           The Instruction         Guide Explains how to complete this form.         Form. |   |  |                                      |
|--|---|--|--------------------------------------|
| 1 PAGE #<br>Schedule: 34/56  | Report: 77/101 2 FILER NAME<br>Friends of Larry Taylor  |  | 3 ACCOUNT # (TEC filers)<br>00051862 |
| 4 Date<br>09/19/2011   | 5 Payee name<br>PEARLAND CHAMBER OF COMMERCE  |  |                                      |
| 6 Amount (\$)<br>\$275.00  | 7 Payee address City; State; Zip Code<br>6117 BROADWAY<br>PEARLAND, TX 77581  |  |                                      |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | CONTRIBUTION TO O                                | ide of Texas, complete Schedule T)   |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Office sought:                                   | Office held:                         |
| Date<br>09/30/2011   | Payee name<br>PEARLAND POSSE  |  |                                      |
| Amount (\$)<br>\$500.00  | Payee address City; State; Zip Code<br>4200 FM 1128<br>PEARLAND, TX 77584   |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee     | Description (If travel outs<br>CONTRIBUTION TO O | ide of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:                                   | Office held:                         |
| Date<br>08/09/2011   | Payee name<br>PIRYX INC   |  |                                      |
| Amount (\$)<br>\$6.75  | Payee address City; State; Zip Code<br>144 2nd St. 1st Floor<br>SAN FRANCISCO, TX 94105   |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outs<br>CREDIT CARD FEE   | ide of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:                                   | Office held:                         |
| Date<br>09/22/2011   | Payee name<br>PIRYX INC   |  |                                      |
| Amount (\$)<br>\$45.00   | Payee address City; State; Zip Code<br>144 2nd St. 1st Floor<br>SAN FRANCISCO, TX 94105   |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outs<br>CREDIT CARD FEE   | ide of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:                                   | Office held:                         |

#### Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 35/56 Report: 78/101 5 Payee name 4 Date **PIRYX INC** 10/26/2011 Amount (\$) Payee address City; State; Zip Code 6 7 144 2nd St. 1st Floor \$45.00 SAN FRANCISCO, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Fees CREDIT CARD FEE OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 11/02/2011 Payee address Amount (\$) City; State; Zip Code 144 2nd St. 1st Floor \$5.00 SAN FRANCISCO, TX 94105 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE CREDIT CARD FEE Fees OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 11/03/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$3.38 SAN FRANCISCO, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE CREDIT CARD FEE Fees OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date **PIRYX INC** 11/08/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$12.38 SAN FRANCISCO, CA 94105 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE Fees CREDIT CARD FEE OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH

Austin, Texas 78711-2070

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

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 36/56 Report: 79/101 5 Payee name 4 Date **PIRYX INC** 11/09/2011 Amount (\$) Payee address City; State; Zip Code 6 7 144 2nd St. 1st Floor \$22.50 SAN FRANCISCO, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Fees CREDIT CARD FEE OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 11/16/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$22.50 SAN FRANCISCO, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE CREDIT CARD FEE Fees OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 11/17/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$22.50 SAN FRANCISCO, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE CREDIT CARD FEE Fees OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 11/21/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$6.75 SAN FRANCISCO, CA 94105 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE Fees CREDIT CARD FEE OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH

Austin, Texas 78711-2070

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

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 37/56 Report: 80/101 5 Payee name 4 Date **PIRYX INC** 12/01/2011 6 Amount (\$) Payee address City; State; Zip Code 7 144 2nd St. 1st Floor \$90.00 SAN FRANCISCO, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE Fees CREDIT CARD FEE OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 12/13/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$1.13 SAN FRANCISCO, CA 94105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE CREDIT CARD FEE Fees OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **PIRYX INC** 12/27/2011 Amount (\$) Payee address City; State; Zip Code 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 CREDIT CARD FEE Fees OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date **PIRYX INC** 12/31/2011 Amount (\$) Payee address City; State; Zip Code 144 2nd St. 1st Floor \$4.50 SAN FRANCISCO, CA 94105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Accounting/Banking TRANSACTION FEES OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH

| SCHEDULE F |
|------------|
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| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense<br>Fees         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense<br>Travel In District         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee<br>Office Overhead/Rental Expense           Fees         Polling Expense<br>Printing Expense         Travel Out Of District<br>Office Overhead/Rental Expense         Candidate/Officeholder/Political Committee<br>OTHER (enter a category not listed above)           The INSTRUCTION         Guide Explains how to complete this form. |  |   |                                   |  |
|--|--|---|-----------------------------------|--|
| 1 PAGE #   | 2 FILER NAME<br>Friends of Larry Taylor  |   | 3 ACCOUNT # (TEC filers)          |  |
| Schedule: 38/56  |  |   | 00051862                          |  |
| 4 Date<br>07/13/2011   | 5 Payee name<br>PRICELINE  |   |                                   |  |
| 6 Amount (\$)<br>\$41.43   | NORWALK, CT 06854  |   |                                   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | (b) Description (If travel outsic<br>TRAVEL FOR EVENT | le of Texas, complete Schedule T) |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH  | Candidate / Officeholder name  | Office sought:  | Office held:                      |  |
| Date<br>10/14/2011   | Payee name<br>PUBLIC STORAGE   |   |                                   |  |
| Amount (\$)  | Payee address City; State; Zip Code  |   |                                   |  |
| \$48.31  | 8525 N Lamar Blvd<br>Austin, TX 78735  |   |                                   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | Description (If travel outsic<br>Storage              | ie of Texas, complete Schedule T) |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:  | Office held:                      |  |
| Date   | Payee name   |   |                                   |  |
| 11/07/2011   | PUBLIC STORAGE   |   |                                   |  |
| Amount (\$)<br>\$39.28   | Payee address City; State; Zip Code<br>8525 N Lamar Blvd<br>Austin, TX 78735                   |   |                                   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | Description (If travel outsic<br>Storage              | le of Texas, complete Schedule T) |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:  | Office held:                      |  |
| Date 12/03/2011  | Payee name<br>PUBLIC STORAGE   |   |                                   |  |
| Amount (\$)  | Payee address City; State; Zip Code  |   |                                   |  |
| \$64.10  | 8525 N Lamar Blvd<br>AUSTIN, TX 78735  |   |                                   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense | Description (If travel outsic<br>Storage              | ie of Texas, complete Schedule T) |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:  | Office held:                      |  |

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SCHEDULE F

#### **POLITICAL EXPENDITURES**

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundrais  | Intract Labor     Loan Repayment/Reimbursement       sing Expense     Transportation Equipment & Related Expense       Contributions/Donations Made By     Candidate/Officeholder/Political Committee       ott     Candidate/Officeholder/Political committee       ottal Expense     OTHER (enter a category not listed above) |
|---|---|--|
| 1 PAGE #<br>Schedule: 39/56   | Report: 82/101 2 FILER NAME<br>Friends of Larry Taylor  | 3 ACCOUNT # (TEC filers)<br>00051862   |
| 4 Date<br>09/23/2011  | 5 Payee name<br>QUIZNOS   |  |
| 6 Amount (\$)<br>\$23.75  | <ul> <li>Payee address City; State; Zip Code</li> <li>922 Congress Ave Austin<br/>AUSTIN, TX 78701</li> </ul>                                 |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense   | (b) Description (If travel outside of Texas, complete Schedule T)<br>MEETING WITH STAFF  |
| <b>9</b> Complete <b>ONLY</b> if direct expenditure to benefit C/OH             | Candidate / Officeholder name   | Office sought: Office held:  |
| Date<br>08/18/2011  | Payee name<br>Ranch Road  |  |
| Amount (\$)<br>\$240.32   | Payee address City; State; Zip Code<br>8906 Wall Street Ste 507<br>Austin, TX 78754   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | Description (If travel outside of Texas, complete Schedule T)<br>Event Advertising   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought: Office held:  |
| Date<br>08/22/2011  | Payee name<br>RANDY WEBER CONGRESSIONAL EXPLORATORY   | COMMITTEE  |
| Amount (\$)   | Payee address City; State; Zip Code   |  |
| \$1,000.00  | 1 E Greenway Plaza Ste 225<br>HOUSTON, TX 77046   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) CONTRIBUTION TO EXPLORATORY COMMITTEE  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought: Office held:  |
| Date<br>08/16/2011  | Payee name<br>REPUBLICAN PARTY OF TEXAS   |  |
| Amount (\$)<br>\$1,000.00   | Payee address City; State; Zip Code<br>1108 LAVACA<br>AUSTIN, TX 78701  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outside of Texas, complete Schedule T) CONTRIBUTION TO ORGANIZATION   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought: Office held:  |
|   |   | Electronically filed using Web Filer Version 1.6   |

#### POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services ood/Beverage Expense Travel In District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Event Expense Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE # 3 ACCOUNT # (TEC filers) Friends of Larry Taylor 00051862 Schedule: 40/56 Report: 83/101 5 Payee name 4 Date **REPUBLICAN PARTY OF TEXAS** 11/30/2011 Amount (\$) Payee address City; State; Zip Code 6 7 1108 LAVACA \$1,250.00 AUSTIN, TX 78701 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE FILING FEE Fees OF EXPENDITURE 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name ROTARY CLUB OF LEAGUE CITY 09/21/2011 City; State; Zip Code Amount (\$) Payee address **PO BOX 643** \$135.00 LEAGUE CITY, TX 77574 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By CONTRIBUTION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name SAN JACINTO REPUBLICAN WOMEN 12/21/2011 City; State; Zip Code Amount (\$) Payee address PO BOX 8218 \$200.00 PASADENA, TX 77508 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contributions/Donations Made By CONTRIBUTION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name SANTA FE CHAMBER OF COMMERCE 08/26/2011 Payee address Amount (\$) City: State: Zip Code 12408 Texas 6 \$250.00 Santa Fe, TX 77510 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE Contributions/Donations Made By CONTRIBUTION TO ORGANIZATION OF Candidate/Officeholder/Political Committee EXPENDITURE Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH

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| SCHEDULE | F |

| Advertising Expe<br>Accounting/Ban<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fund   | Contract Labor Loan Rep<br>raising Expense Transport<br>Contributi<br>strict Candic<br>/Rental Expense OTHER ( | payment/Reimbursement<br>tation Equipment & Related Expense<br>ions/Donations Made By<br>date/Officeholder/Political Committee<br>enter a category not listed above) |
|--|---|--|--|
| 1 PAGE #   | 2 FILER NAME  |  | <b>3</b> ACCOUNT # (TEC filers)  |
| Schedule: 41/56  |   |  | 00051862   |
| 4 Date<br>11/09/2011   | 5 Payee name<br>SANTA FE CHAMBER OF COMMERCE  |  |  |
| 6 Amount (\$)<br>\$10.00   | 7 Payee address City; State; Zip Code<br>12408 Texas 6<br>SANTA FE, TX 77510  |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description (If travel ou<br>DISTRICT EVENT  | tside of Texas, complete Schedule T)   |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                    | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date   |   | 0  |  |
| 09/20/2011   | SANTA FE TEXAS EDUCATION FOUNDATION INC   | С  |  |
| Amount (\$)<br>\$500.00  | Payee address City; State; Zip Code<br>PO BOX 747<br>SANTA FE, TX 77517   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel ou<br>CONTRIBUTION TO   | Itside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date<br>08/16/2011   | Payee name<br>SHACK, EDWARD   |  |  |
| Amount (\$)<br>\$200.00  | Payee address City; State; Zip Code<br>814 SAN JACINTO<br>ste 202<br>AUSTIN, TX 78701   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Legal Services  |  | tside of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date<br>11/16/2011   | Payee name<br>SHERATON  |  |  |
| Amount (\$)  | Payee address City; State; Zip Code   |  |  |
| \$124.00   | 701 East 11th<br>AUSTIN, TX 78701   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District  | Description (If travel ou<br>Lodging for Meeting   | tside of Texas, complete Schedule T)   |
| Complete ONLY if<br>direct expenditure<br>to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |

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| SCHEDULE F |
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| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation/Fundrainse Food/Beverage Expense Travel In District Polling Expense Travel Out of District Printing Expense Office Overhead/Reterming Expense Structure Reterming Expe | ntract Labor Loan Repayn<br>sing Expense Transportatio<br>Contributions<br>ct Candidate<br>intal Expense OTHER (ente | nent/Reimbursement<br>In Equipment & Related Expense<br>/Donations Made By<br>/Officeholder/Political Committee<br>er a category not listed above) |
|---|--|--|--|
| 1 PAGE #<br>Schedule: 42/56   | 2     FILER NAME       Report: 85/101     Friends of Larry Taylor  |  | <b>3</b> ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>12/13/2011  | 5 Payee name<br>SHERRY'S BUSY BEE CAFE   |  |  |
| 6 Amount (\$)<br>\$407.56   | 7 Payee address City; State; Zip Code<br>PO BOX 1423<br>SANTA FE, TX 77510   |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | (b) Description (If travel outsid<br>FOOD FOR EVENT  | le of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>07/01/2011  | Payee name<br>SIMMONS, CARRIE  |  |  |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>1905 Carlson Dr<br>Austin, TX 78741   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | Description (If travel outsid<br>CAMPAIGN INDEPEND   | e of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>08/01/2011  | Payee name<br>SIMMONS, CARRIE  |  |  |
| Amount (\$)<br>\$500.00   | Payee address City; State; Zip Code<br>1905 Carlson Dr<br>Austin, TN 78741   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | Description (If travel outsid<br>CAMPAIGN INDEPEND   | e of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>09/01/2011  | Payee name<br>SIMMONS, CARRIE  |  |  |
| Amount (\$)   | Payee address City; State; Zip Code  |  |  |
| \$500.00  | 1905 Carlson Dr<br>Austin, TX 78741  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor  | Description (If travel outsid<br>CAMPAIGN INDEPEND   | e of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name  | Office sought:   | Office held:<br>Electronically filed using Web Filer Version 1.6   |

| SCHEDULE  | F |
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| CONFRONCE |   |

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense<br>Fees         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense           Polling Expense<br>Fees         Food/Beverage Expense         Travel In District         Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee           The INSTRUCTION         Guibe explains how to complete this form. |   |  |                                      |
|--|---|--|--------------------------------------|
| 1 PAGE #<br>Schedule: 43/56  | Report: 86/101 2 FILER NAME<br>Friends of Larry Taylor  |  | 3 ACCOUNT # (TEC filers)<br>00051862 |
| 4 Date<br>10/06/2011   | 5 Payee name<br>SIMMONS, CARRIE   |  |                                      |
| 6 Amount (\$)<br>\$500.00  | 7 Payee address City; State; Zip Code<br>1905 Carlson Dr<br>AUSTIN, TX 78741                      |  |                                      |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description (If travel outsi<br>CAMPAIGN INDEPEND      | de of Texas, complete Schedule T)    |
| 9 Complete ONLY if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:   | Office held:                         |
| Date<br>11/03/2011   | Payee name<br>SIMMONS, CARRIE   |  |                                      |
| Amount (\$)<br>\$500.00  | Payee address City; State; Zip Code<br>1905 Carlson Dr<br>AUSTIN, TX 78741                        |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | Description (If travel outsic<br>CAMPAIGN INDEPEND         | de of Texas, complete Schedule T)    |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:   | Office held:                         |
| Date 12/01/2011  | Payee name<br>SIMMONS, CARRIE   |  |                                      |
| Amount (\$)<br>\$500.00  | Payee address City; State; Zip Code<br>1905 Carlson Dr<br>AUSTIN, TX 78741                        |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | Description (If travel outsic<br>CAMPAIGN INDEPEND         | de of Texas, complete Schedule T)    |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:   | Office held:                         |
| Date<br>07/06/2011   | Payee name<br>SOUTHWEST AIRLINES  |  |                                      |
| Amount (\$)<br>\$156.20  | Payee address City; State; Zip Code<br>PO BOX 36611<br>DALLAS, TX 75235                           |  |                                      |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District            | Description (If travel outsi<br>Airfare for Travel to Poli | de of Texas, complete Schedule T)    |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:   | Office held:                         |

#### **POLITICAL EXPENDITURES**

| SCHEDULE  | F |
|-----------|---|
| CONFRONCE |   |

| Advertising Expe<br>Accounting/Ban<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fi<br>Inse Food/Beverage Expense Travel In Dist<br>Polling Expense Travel Out Of<br>Printing Expense Office Overhe<br>The Instruction Guide explains | es/Contract Labor Loan Re<br>undraising Expense Transpo<br>rict Contribu<br>District Candi<br>ead/Rental Expense OTHER | epayment/Reimbursement<br>rtation Equipment & Related Expense<br>tions/Donations Made By<br>idate/Officeholder/Political Committee<br>(enter a category not listed above) |
|--|---|--|---|
| 1 PAGE #   | 2 FILER NAME  |  | 3 ACCOUNT # (TEC filers)  |
| Schedule: 44/56  | Report: 87/101 Friends of Larry Taylor  |  | 00051862  |
| 4 Date   | 5 Payee name  |  |   |
| 07/06/2011   | SOUTHWEST AIRLINES  |  |   |
| 6 Amount (\$)<br>\$157.70  | 7 Payee address City; State; Zip Code<br>PO BOX 36611<br>DALLAS, TX 75235   |  |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District  | (b) Description (If travel o<br>Airfare for Travel to F  | outside of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                    | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date   | Payee name  |  |   |
| 07/12/2011   | SOUTHWEST AIRLINES  |  |   |
| Amount (\$)  | Payee address City; State; Zip Code   |  |   |
| \$26.00  | PO BOX 36611<br>DALLAS, TX 75235  |  |   |
|  | Category (See Categories listed at the top of this schedule)  | Description (If travel o   | outside of Texas, complete Schedule T)  |
| PURPOSE<br>OF  | Travel Out of District  | Airfare for Travel to F  | Political Event   |
| EXPENDITURE  |   |  |   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date   | Payee name  |  |   |
| 07/15/2011   | SOUTHWEST AIRLINES  |  |   |
| Amount (\$)  | Payee address City; State; Zip Code   |  |   |
| \$26.00  | PO BOX 36611<br>DALLAS, TX 75235  |  |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District  | Description (If travel o<br>Airfare for Travel to F  | utside of Texas, complete Schedule T)  Political Event  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH               | Candidate / Officeholder name   | Office sought:   | Office held:  |
| Date<br>07/29/2011   | Payee name<br>SOUTHWEST AIRLINES  |  |   |
| Amount (\$)  | Payee address City; State; Zip Code   |  |   |
| \$181.00   | PO Box 36647 - 1CR<br>Dallas, TX 75235  |  |   |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District  | Description (If travel o<br>Airfare for Travel to E  | utside of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                     | Candidate / Officeholder name   | Office sought:   | Office held:  |

| SCHEDULE | F |
|----------|---|
| SCHEDULE | Г |

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fundra  | contract Labor Loan Repa<br>aising Expense Transporta<br>Contributio<br>trict Candid<br>Rental Expense OTHER (e | ayment/Reimbursement<br>tion Equipment & Related Expense<br>ns/Donations Made By<br>tate/Officeholder/Political Committee<br>nter a category not listed above) |
|---|--|---|--|
| 1 PAGE #<br>Schedule: 45/56   | Report: 88/101 2 FILER NAME<br>Friends of Larry Taylor                                     |   | 3 ACCOUNT # (TEC filers)<br>00051862   |
| 4 Date<br>08/08/2011  | 5 Payee name<br>Southwest Airlines   |   |  |
| 6 Amount (\$)<br>\$329.90   | 7 Payee address City; State; Zip Code<br>PO Box 36647 - 1CR<br>Dallas, TX 75235            |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District | (b) Description (If travel out<br>Airfare for Travel to Ev  | side of Texas, complete Schedule T) 🔲<br>ent   |
| 9 Complete ONLY if direct expenditure to benefit C/OH                           | Candidate / Officeholder name  | Office sought:  | Office held:   |
| Date<br>08/12/2011  | Payee name<br>Southwest Airlines   |   |  |
| Amount (\$)<br>\$36.00  | Payee address City; State; Zip Code<br>PO Box 36647 - 1CR<br>Dallas, TX 75235              |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel out<br>Airfare for Travel to Ev  | side of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:   |
| Date  | Payee name   |   |  |
| 08/16/2011  | Southwest Airlines   |   |  |
| Amount (\$)<br>\$141.05   | Payee address City; State; Zip Code<br>PO Box 36647 - 1CR<br>Dallas, TX 75235              |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel out<br>Airfare for Travel to Ev  | side of Texas, complete Schedule T) 🗌<br>ent   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:   |
| Date<br>08/19/2011  | Payee name<br>Southwest Airlines   |   |  |
| Amount (\$)   | Payee address City; State; Zip Code  |   |  |
| \$310.30  | PO Box 36647 - 1CR<br>Dallas, TX 75235   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel out<br>Airfare for Travel to Ev  | side of Texas, complete Schedule T) 🗌<br>ent   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:  | Office held:   |

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense<br>Fees         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense           Food/Beverage Expense<br>Event Expense<br>Fees         Food/Beverage Expense         Travel In District         Contributions/Donations Made By<br>Contributions/Donations Made By           Fees         Polling Expense         Travel Out Of District         Candidate/Officeholder/Political Committee           Fees         Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above)           The Instruction         Guide Explains how to complete this form.         Complete this form. |  |   |   |  |
|--|--|---|---|--|
| 1 PAGE #<br>Schedule: 46/56  |  |   | 3 ACCOUNT # (TEC filers)<br>00051862              |  |
| 4 Date<br>08/26/2011   | 5 Payee name<br>Southwest Airlines   |   |   |  |
| 6 Amount (\$)<br>\$149.90  | 7 Payee address City; State; Zip Code<br>PO Box 36647 - 1CR<br>Dallas, TX 75235            |   |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District | (b) Description (If travel outsic<br>Airfare for Travel to Even | de of Texas, complete Schedule T) 🔲<br>nt         |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name  | Office sought:  | Office held:                                      |  |
| Date 10/13/2011  | Payee name<br>SOUTHWEST AIRLINES   |   |   |  |
| Amount (\$)<br>\$222.90  | Payee address City; State; Zip Code<br>PO Box 36611<br>DALLAS, TX 75235                    |   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel outsic<br>Airfare for Travel to Polit    | le of Texas, complete Schedule T) 🔲<br>ical Event |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:  | Office held:                                      |  |
| Date   | Payee name   |   |   |  |
| 10/13/2011   | SOUTHWEST AIRLINES   |   |   |  |
| Amount (\$)  | Payee address City; State; Zip Code  |   |   |  |
| \$295.90   | PO BOX 36611<br>DALLAS, TX 75235   |   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel outsic<br>Airfare for Travel to Polit    | e of Texas, complete Schedule T) 🔲<br>ical Event  |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:  | Office held:                                      |  |
| Date 10/17/2011  | Payee name<br>SOUTHWEST AIRLINES   |   |   |  |
| Amount (\$)  | Payee address City; State; Zip Code  |   |   |  |
| \$89.00  | PO Box 36674-ICR<br>DALLAS, TX 75235   |   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel outsic<br>Airfare for Travel to Polit    | e of Texas, complete Schedule T) 🔲<br>ical Event  |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH   | Candidate / Officeholder name  | Office sought:  | Office held:                                      |  |

| SCHEDULE | F |
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| CONFIDER | - |

| Advertising Expense<br>Accounting/Banking<br>Consulting Expense<br>Event Expense         Gifts/Awards/Memorial Expense<br>Legal Services         Salaries/Wages/Contract Labor<br>Solicitation/Fundraising Expense         Loan Repayment/Reimbursement<br>Transportation Equipment & Related Expense           Event Expense<br>Fees         Food/Beverage Expense         Travel In District         Constributions/Donations Made By<br>Constitution/Fundraising Expense           Fees         Polling Expense         Travel Out Of District         Candidate/Officeholder/Political Committee<br>Office Overhead/Rental Expense           Fees         Printing Expense         Office Overhead/Rental Expense         OTHER (enter a category not listed above)           The INSTRUCTION         Guide Explains how to complete this form.         Committee |  |  |   |  |
|---|--|--|---|--|
| 1 PAGE #<br>Schedule: 47/56   |  |  | 3 ACCOUNT # (TEC filers)<br>00051862              |  |
| 4 Date<br>10/26/2011  | 5 Payee name<br>SOUTHWEST AIRLINES   |  |   |  |
| 6 Amount (\$)<br>\$105.00   | 7 Payee address City; State; Zip Code<br>PO Box 36674-ICR<br>DALLAS, TX 75235              |  |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District | (b) Description (If travel outsic<br>Airfare for Travel to Polit | de of Texas, complete Schedule T) 🔲<br>ical Event |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH   | Candidate / Officeholder name  | Office sought:   | Office held:                                      |  |
| Date  | Payee name   |  |   |  |
| 11/01/2011  | SOUTHWEST AIRLINES   |  |   |  |
| Amount (\$)<br>\$327.90   | Payee address City; State; Zip Code<br>PO Box 36674-ICR<br>DALLAS, TX 75235                |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel outsic<br>Airfare for Travel to Polit     | le of Texas, complete Schedule T) 🔲<br>ical Event |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name  | Office sought:   | Office held:                                      |  |
| Date  | Payee name   |  |   |  |
| 11/14/2011  | SOUTHWEST AIRLINES   |  |   |  |
| Amount (\$)<br>\$174.20   | Payee address City; State; Zip Code<br>PO Box 36674-ICR<br>DALLAS, TX 75235                |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel outsic<br>Airfare for Travel to Polit     | de of Texas, complete Schedule T) 🔲<br>ical Event |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name  | Office sought:   | Office held:                                      |  |
| Date 12/14/2011   | Payee name<br>Southwest Airlines   |  |   |  |
| Amount (\$)   | Payee address City; State; Zip Code  |  |   |  |
| \$14.60   | PO Box 36647 - 1CR<br>Dallas, TX 75235   |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Travel Out of District     | Description (If travel outsic<br>Airfare for travel to Even      | de of Texas, complete Schedule T) 🔲<br>t          |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name  | Office sought:   | Office held:                                      |  |

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SCHEDULE F

|  | EXPENDITURE CATEGO  | ORIES  |  |
|--|---|--|--|
| Advertising Expe<br>Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | nse Gifts/Awards/Memorial Expense Salaries/Wages/Co<br>ing Legal Services Solicitation/Fundra | Intract Labor Loan Repayr<br>sing Expense Transportatic<br>Contributions<br>ict Candidate<br>ental Expense OTHER (ente | nent/Reimbursement<br>n Equipment & Related Expense<br>s/Donations Made By<br>/Officeholder/Political Committee<br>er a category not listed above) |
| 1 PAGE #<br>Schedule: 48/56  | Report: 91/101 2 FILER NAME<br>Friends of Larry Taylor  |  | 3 ACCOUNT # (TEC filers)<br>00051862   |
| 4 Date<br>11/28/2011   | 5 Payee name<br>SUDIES CATFISH AND SEAFOOD  |  |  |
| 6 Amount (\$)<br>\$38.29   | 7 Payee address City; State; Zip Code<br>352 N GULF FREEWAY<br>LEAGUE CITY, TX 77573          |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense     | (b) Description (If travel outsic<br>MEETING WITH STAFF  | le of Texas, complete Schedule T)  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                      | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date<br>09/23/2011   | Payee name<br>TAYLOR, LARRY   |  |  |
| Amount (\$)<br>\$862.55  | Payee address City; State; Zip Code<br>PO Box 1208<br>FRIENDSWOOD, TX 77549                   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel In District            | Description (If travel outsic<br>MILEAGE FOR CAMPA   | le of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date   | Payee name  |  |  |
| 10/31/2011   | TAYLOR, LARRY   |  |  |
| Amount (\$)<br>\$1,197.50  | Payee address City; State; Zip Code<br>PO BOX 1208<br>FRIENDSWOOD, TX 77549                   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | Description (If travel outsic<br>MILEAGE FOR CAMPA   | le of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:   | Office held:   |
| Date   | Payee name  |  |  |
| 08/05/2011   | TEXAS CITY-LA MARQUE CHAMBER OF COMMER  | CE   |  |
| Amount (\$)<br>\$75.00   | Payee address City; State; Zip Code<br>9702 EF Lowry Freeway<br>Texas City, TX 77590          |  |  |
| PURPOSE<br>OF<br>EXPENDITURE   | Category (See Categories listed at the top of this schedule)<br>Fees                          | Description (If travel outsic<br>MEMBERSHIP DUES   | le of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / Officeholder name   | Office sought:   | Office held:   |

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### **POLITICAL EXPENDITURES**

| SCHEDULE | F |
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| SCHEDULE | • |

| Accounting/Bank  |   |  |   |  |  |
|--|---|--|---|--|--|
| 1 PAGE #<br>Schedule: 49/56                                      | Report: 92/101 2 FILER NAME<br>Friends of Larry Taylor  |  | 3 ACCOUNT # (TEC filers)<br>00051862    |  |  |
| 4 Date<br>08/26/2011   | 5 Payee name<br>TEXAS CITY-LA MARQUE CHAMBER OF COMMER  | CE   |   |  |  |
| 6 Amount (\$)<br>\$15.00   | 7 Payee address City; State; Zip Code<br>9702 EF Lowry Freeway<br>TEXAS CITY, TX 77590  |  |   |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE                                | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description (If travel outsid<br>DISTRICT EVENT  | e of Texas, complete Schedule T)        |  |  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH      | Candidate / Officeholder name   | Office sought:                                       | Office held:                            |  |  |
| Date<br>09/22/2011   | Payee name<br>TEXAS CITY-LA MARQUE CHAMBER OF COMMER  | CE   |   |  |  |
| Amount (\$)<br>\$15.00   | Payee address City; State; Zip Code<br>9702 EF Lowry Freeway<br>TEXAS CITY, TX 77590  |  |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                     | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description (If travel outsid<br>DISTRICT EVENT      | e of Texas, complete Schedule T)        |  |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH       | Candidate / Officeholder name   | Office sought:                                       | Office held:                            |  |  |
| Date<br>07/19/2011   | Payee name<br>TEXAS HOUSE OF REPRESENTATIVES  |  |   |  |  |
| Amount (\$)<br>\$10.00   | Payee address City; State; Zip Code<br>P.O. Box 2910<br>AUSTIN, TX 78768  |  |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                     | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description (If travel outsid<br>SERVICE FEE FOR OFF | e of Texas, complete Schedule T)<br>TCE |  |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH | Candidate / Officeholder name   | Office sought:                                       | Office held:                            |  |  |
| Date<br>07/26/2011   | Payee name<br>TEXAS RIGHT TO LIFE   |  |   |  |  |
| Amount (\$)<br>\$500.00  | Payee address City; State; Zip Code<br>9800 Centre Parkway Suite 200<br>HOUSTON, TX 77036   |  |   |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                     | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | Description (If travel outsid<br>CONTRIBUTION TO OR  | e of Texas, complete Schedule T)        |  |  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH | Candidate / Officeholder name   | Office sought:                                       | Office held:                            |  |  |

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### **POLITICAL EXPENDITURES**

| SCHEDULE | F |
|----------|---|
| SCHEDULE |   |

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fundrai<br>nse Food/Beverage Expense Travel In District<br>Polling Expense Travel Out Of Distr<br>Printing Expense Office Overhead/Re | ontract Labor Loan Repayi<br>ising Expense Transportatic<br>Contributions<br>ict Candidate<br>ental Expense OTHER (ent | ment/Reimbursement<br>on Equipment & Related Expense<br>s/Donations Made By<br>s/Officeholder/Political Committee<br>er a category not listed above) |
|---|--|--|--|
|   | The Instruction Guide explains how   | to complete this form.   |  |
| 1 PAGE #<br>Schedule: 50/56   | Report: 93/101 2 FILER NAME<br>Friends of Larry Taylor   |  | <b>3</b> ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>08/25/2011  | 5 Payee name<br>TFRW CONVENTION 2011 PAC   |  |  |
| 6 Amount (\$)<br>\$750.00   | 7 Payee address City; State; Zip Code<br>515 Capital of Texas Hwy<br>SUITE 133<br>AUSTIN, TX 78746   |  |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee                      | (b) Description (If travel outsic<br>EVENT SPONSORSHIF   | de of Texas, complete Schedule T) 🗌  |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>08/26/2011  | Payee name<br>THE ARC OF THE GULF COAST  |  |  |
| Amount (\$)<br>\$100.00   | Payee address City; State; Zip Code<br>PO BOX 1484<br>ALVIN, TX 77512  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee                          | Description (If travel outsid<br>CONTRIBUTION TO OF  | de of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>09/20/2011  | Payee name<br>THE ARC OF THE GULF COAST  |  |  |
| Amount (\$)   | Payee address City; State; Zip Code  |  |  |
| \$100.00  |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee                          | Description (If travel outsid<br>CONTRIBUTION TO OF  | de of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name  | Office sought:   | Office held:   |
| Date<br>11/08/2011  | Payee name<br>THE ARC OF THE GULF COAST  |  |  |
| Amount (\$)<br>\$25.00  | Payee address City; State; Zip Code<br>PO BOX 1484<br>ALVIN, TX 77512  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense  | Description (If travel outsic<br>DISTRICT EVENT  | de of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name  | Office sought:   | Office held:   |

P.O.Box 12070 Austin, Texas 78711-2070

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SCHEDULE F

#### **POLITICAL EXPENDITURES**

| Advertising Expense         Gifts/Awards/Memorial Expense         Salaries/Wages/Cd           Accounting/Banking         Legal Services         Solicitation/Fundra           Consulting Expense         Food/Beverage Expense         Travel In District           Event Expense         Polling Expense         Office Overhead/R           Fees         Printing Expense         Office Overhead/R |   | s/Contract Labor Loa<br>ndraising Expense Tra<br>ct Cor<br>District Cad/Rental Expense OT | in Repayment/Reimbursement<br>nsportation Equipment & Related Expense<br>ntributions/Donations Made By<br>Landidate/Officeholder/Political Committee<br>HER (enter a category not listed above) |
|---|---|---|---|
| 1 PAGE #<br>Schedule: 51/56   | Report: 94/101 2 FILER NAME<br>Friends of Larry Taylor  |   | 3 ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>12/21/2011  | 5 Payee name<br>THE ARC OF THE GULF COAST   |   |   |
| 6 Amount (\$)<br>\$15.00  | 7 Payee address City; State; Zip Code<br>PO BOX 1484<br>ALVIN, TX 77512   |   |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense   | (b) Description (If tra<br>DISTRICT EVEN  | vel outside of Texas, complete Schedule T) 🔲<br>T   |
| 9 Complete ONLY if direct expenditure to benefit C/OH   | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>10/24/2011  | Payee name<br>THE REALTY TECH   |   |   |
| Amount (\$)<br>\$1,681.97   | Payee address City; State; Zip Code<br>2110 GROVE DR<br>ROUND ROCK, TX 78681  |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense  | Description (If tra<br>OFFICE COMPU   | vel outside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date  | Payee name  |   |   |
| 08/08/2011<br>Amount (\$)   | THE ROTARY CLUB OF THE MAINLAND Payee address City; State; Zip Code   |   |   |
| \$125.00  | PO BOX 563<br>LA MARQUE, TX 77568   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | -   | vel outside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH  | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>09/21/2011  | Payee name<br>THE SALVATION ARMY  |   |   |
| Amount (\$)   | Payee address City; State; Zip Code   |   |   |
| \$250.00  | 2732 CHERRYBROOK LANE<br>PASADENA, TX 77502   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |   | vel outside of Texas, complete Schedule T)  |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH  | Candidate / Officeholder name   | Office sought:  | Office held:  |

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SCHEDULE F

| Advertising Expe<br>Accounting/Bank<br>Consulting Exper<br>Event Expense<br>Fees | ing Legal Se<br>nse Food/Be<br>Polling B | rards/Memorial Expense S<br>ervices S<br>everage Expense Ti<br>Expense Ti | URE CATEGO<br>alaries/Wages/Con<br>olicitation/Fundraisi<br>ravel In District<br>ravel Out Of Distric<br>ffice Overhead/Rer<br>explains how to | tract Labor<br>ing Expense<br>t<br>ntal Expense | Transportation E<br>Contributions/D<br>Candidate/O<br>OTHER (enter a | nt/Reimbursement<br>Equipment & Related<br>onations Made By<br>fficeholder/Political C<br>a category not listed | ommittee     |
|--|--|---|--|---|--|---|--------------|
| 1 PAGE #   |  | 2 FILER NAME  |  |   |  | 3 ACCOUNT #   | (TEC filers) |
| Schedule: 52/56  | Report: 95/101                           | Friends of Larry Taylor   |  |   |  | 00051862  |              |
| 4 Date<br>10/17/2011   | 5 Payee name<br>Tiff's Treats            |   |  |   |  |   |              |
| 6 Amount (\$)  | 7 Payee addres                           | s City; State; Zip  | Code   |   |  |   |              |
| \$29.23  | 1806 Nuece<br>Austn, TX 7                | s Street  |  |   |  |   |              |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE  |  | e Categories listed at the top of this<br>Memorials Expense               | schedule)  | (b) Description (<br>Gift for Staff             | If travel outside o  | of Texas, complete S  | chedule T)   |
| 9 Complete ONLY if direct expenditure to benefit C/OH                            | Candidate / O                            | fficeholder name  |  | Office soug                                     | ht:  | Office held:  |              |
| Date<br>07/18/2011   | Payee name<br>TIME WARN                  | IER   |  |   |  |   |              |
| Amount (\$)  | Payee addres                             | s City; State; Zip  | Code   |   |  |   |              |
| \$81.15  | 900 SYDNE<br>KERRVILLE                   |   |  |   |  |   |              |
| PURPOSE  |  | e Categories listed at the top of this ead/Rental Expense                 | schedule)  | Description (<br>CABLE SERV                     |  | of Texas, complete S  | chedule T)   |
| EXPENDITURE  |  |   |  |   |  |   |              |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / O                            | fficeholder name  |  | Office soug                                     | ht:  | Office held:  |              |
| Date<br>08/17/2011   | Payee name<br>TIME WARN                  |   |  |   |  |   |              |
| Amount (\$)<br>\$74.33   | Payee addres<br>900 SYDNE<br>KERRVILLE   | YBAKER  | Code   |   |  |   |              |
| PURPOSE<br>OF<br>EXPENDITURE   | U U U                                    | e Categories listed at the top of this<br>ead/Rental Expense              | schedule)  | Description (<br>CABLE SERV                     |  | of Texas, complete S  | chedule T)   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                 | Candidate / O                            | fficeholder name  |  | Office soug                                     | ht:  | Office held:  |              |
| Date<br>10/11/2011   | Payee name<br>TIME WARN                  | IER   |  |   |  |   |              |
| Amount (\$)  | Payee addres                             |   | Code   |   |  |   |              |
| \$147.86   | PO BOX 660<br>DALLAS, TX                 | )545  |  |   |  |   |              |
| PURPOSE<br>OF<br>EXPENDITURE   |  | e Categories listed at the top of this<br>ead/Rental Expense              | schedule)  | Description (<br>CABLE SERV                     |  | of Texas, complete S  | chedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                       | Candidate / O                            | fficeholder name  |  | Office soug                                     | ht:  | Office held:  |              |

| SCHEDULE F |
|------------|
|------------|

| Advertising Expe<br>Accounting/Bank<br>Consulting Expe<br>Event Expense<br>Fees | king Legal Services Solicitation/Fundra<br>nse Food/Beverage Expense Travel In District<br>Polling Expense Travel Out Of Dist<br>Printing Expense Office Overhead/F<br>The Instruction Guipe explains how | ontract Labor Loan Repa<br>aising Expense Transporta<br>Contributio<br>rict Candida<br>Rental Expense OTHER (er | yment/Reimbursement<br>tion Equipment & Related Expense<br>ns/Donations Made By<br>te/Officeholder/Political Committee<br>nter a category not listed above) |
|---|---|---|---|
| 1 PAGE #<br>Schedule: 53/56   | Report: 96/101 2 FILER NAME<br>Friends of Larry Taylor  |   | 3 ACCOUNT # (TEC filers)<br>00051862  |
| 4 Date<br>11/22/2011  | 5 Payee name<br>TOP PRINTING  |   |   |
| 6 Amount (\$)<br>\$645.96   | 7 Payee address City; State; Zip Code<br>209 EAST EDGEWOOD<br>FRIENDSWOOD, TX 77546   |   |   |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense  | (b) Description (If travel outs<br>PROMOTIONAL MATE   | side of Texas, complete Schedule T)   |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>12/20/2011  | Payee name<br>TOP PRINTING  |   |   |
| Amount (\$)<br>\$360.96   | Payee address City; State; Zip Code<br>209 EAST EDGEWOOD<br>FRIENDSWOOD, TX 77546   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Printing Expense  | Description (If travel outs<br>PROMOTIONAL MATE   | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date<br>11/08/2011  | Payee name<br>TRI-COUNTY REPUBLICAN WOMEN   |   |   |
| Amount (\$)<br>\$12.00  | Payee address City; State; Zip Code   |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Event Expense   | Description (If travel outs<br>DISTRICT EVENT   | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought:  | Office held:  |
| Date 12/21/2011   | Payee name<br>TRI-COUNTY REPUBLICAN WOMEN   |   |   |
| Amount (\$)<br>\$15.00  | Payee address City; State; Zip Code<br>PO BOX 1021<br>PEARLAND, TX 77588  |   |   |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule)<br>Fees  | Description (If travel outs<br>CLUB DUES  | side of Texas, complete Schedule T)   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH                | Candidate / Officeholder name   | Office sought:  | Office held:  |

Fees

2 FILER NAME

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

SCHEDULE F

#### POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Event Expense Polling Expense Printing Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel Out Of District Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 00051000

| 1 PAGE #   |                          | 2 FILER NAME                                     |   | <b>3</b> ACCOUNT # (TEC filers)   |
|--|--------------------------|--|---|-----------------------------------|
| Schedule: 54/56  |                          | Friends of Larry Taylor                          |   | 00051862                          |
| 4 Date<br>09/20/2011   | 5 Payee name<br>TX-TREME | PROMOTIONS                                       |   |                                   |
| 6 Amount (\$)  | 7 Payee addres           | s City; State; Zip Code                          |   |                                   |
| \$175.00   | PO BOX 201               |  |   |                                   |
|  | HUMBLE, T                | <sup>-</sup> X 77347                             |   |                                   |
|  | (-) O - (-)              |  |   |                                   |
| 8<br>PURPOSE   | Printing Exp             | e Categories listed at the top of this schedule) | (b) Description (If travel outsic<br>PROMOTIONAL MATE | de of Texas, complete Schedule T) |
| OF<br>EXPENDITURE  |                          |  |   |                                   |
| EXPENditone  |                          |  |   |                                   |
| 9 Complete ONLY if   | Candidate / O            | fficeholder name                                 | Office sought:  | Office held:                      |
| direct expenditure<br>to benefit C/OH                            |                          |  |   |                                   |
| Date   | Payee name               |  |   |                                   |
| 10/05/2011   | US Post Offi             | ice  |   |                                   |
| Amount (\$)  | Payee addres             | s City; State; Zip Code                          |   |                                   |
| \$1.48   | 310 MORNII               | NGSIDE DR<br>OOD, TX 77546                       |   |                                   |
|  |                          | 000; 17 77346                                    |   |                                   |
|  | Category (See            | e Categories listed at the top of this schedule) | Description (If travel outsid                         | de of Texas, complete Schedule T) |
| PURPOSE  |                          | nead/Rental Expense                              | Postage for Campaign                                  |                                   |
| OF<br>EXPENDITURE  |                          | ·  |   |                                   |
|  |                          |  |   |                                   |
| Complete <b>ONLY</b> if<br>direct expenditure<br>to benefit C/OH | Candidate / O            | fficeholder name                                 | Office sought:  | Office held:                      |
| Date   | Payee name               |  |   |                                   |
| 12/31/2011   | US Post Offi             | ice  |   |                                   |
| Amount (\$)  | Payee addres             |  |   |                                   |
| \$5.10   | 310 MORNII               | NGSIDE DR<br>OOD, TX 77546                       |   |                                   |
|  | THENDOW                  | 000, 17,77340                                    |   |                                   |
|  | Category (See            | e Categories listed at the top of this schedule) | Description (If travel outsid                         | de of Texas, complete Schedule T) |
| PURPOSE<br>OF  |                          | nead/Rental Expense                              | Postage for Campaign                                  |                                   |
| EXPENDITURE  |                          |  |   |                                   |
|  | Candidata ( O            |  | Office coucht   |                                   |
| Complete <b>ONLY</b> if<br>direct expenditure                    | Candidate / O            | fficeholder name                                 | Office sought:  | Office held:                      |
| to benefit C/OH  | <u> </u>                 |  |   |                                   |
| Date   | Payee name<br>USPS       |  |   |                                   |
| 11/10/2011<br>Amount (\$)  | Payee addres             | s City; State; Zip Code                          |   |                                   |
| \$10.05  |                          |  |   |                                   |
| φ10.05   |                          | OOD, TX 77546                                    |   |                                   |
|  |                          |  |   |                                   |
| PURPOSE  |                          | e Categories listed at the top of this schedule) |   | de of Texas, complete Schedule T) |
| OF   | Office Overh             | nead/Rental Expense                              | CAMPAIGN POSTAGE                                      |                                   |
| EXPENDITURE  |                          |  |   |                                   |
| Complete ONLY if   | Candidate / O            | fficeholder name                                 | Office sought:  | Office held:                      |
| direct expenditure<br>to benefit C/OH                            |                          |  | -   |                                   |
|  |                          |  |   |                                   |

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

#### **POLITICAL EXPENDITURES**

| SCHEDULE | F |
|----------|---|
| SCHEDULE |   |

| Advertising Expe<br>Accounting/Banh<br>Consulting Expe<br>Event Expense<br>Fees | ing Legal Services Solicitation<br>nse Food/Beverage Expense Travel In D<br>Polling Expense Travel Out<br>Printing Expense Office Ove | Vages/Contract Labor Loan Repayment/Reimburse<br>n/Fundraising Expense Transportation Equipment & | Related Expense<br>de By<br>plitical Committee |
|---|---|---|--|
| 1 PAGE #<br>Schedule: 55/56   | Report: 98/101 2 FILER NAME<br>Friends of Larry Taylor  | 3 ACCOU<br>00051  |  |
| 4 Date<br>11/28/2011  | 5 Payee name<br>USPS  | <b>i</b>  |  |
| 6 Amount (\$)<br>\$220.00   | 7 Payee address City; State; Zip Code<br>310 MORNINGSIDE DR<br>FRIENDSWOOD, TX 77546  |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule<br>Office Overhead/Rental Expense                                     | e) (b) Description (If travel outside of Texas, con<br>CAMPAIGN POSTAGE                           | nplete Schedule T)                             |
| 9 Complete ONLY if<br>direct expenditure<br>to benefit C/OH                     | Candidate / Officeholder name   | Office sought: Office   | e held:  |
| Date<br>12/31/2011  | Payee name<br>VERIZON WIRELESS, TERI  |   |  |
| Amount (\$)   | Payee address City; State; Zip Code   |   |  |
| \$220.00  | 2320 ACACIA COURT<br>LEAGUE CITY, TX 77573  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule<br>Office Overhead/Rental Expense   | e) Description (If travel outside of Texas, con<br>TELEPHONE SERVICES                             | nplete Schedule T)                             |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought: Office   | e held:  |
| Date  | Payee name  |   |  |
| 07/05/2011  | VERIZON WIRELESS  |   |  |
| Amount (\$)<br>\$55.00  | Payee address City; State; Zip Code<br>2805 GULF FRWY S<br>LEAGUE CITY, TX 77573  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule<br>Office Overhead/Rental Expense   | e) Description (If travel outside of Texas, con<br>TELEPHONE SERVICES                             | nplete Schedule T)                             |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought: Office   | e held:  |
| Date<br>08/28/2011  | Payee name<br>VERIZON WIRELESS  |   |  |
| Amount (\$)   | Payee address City; State; Zip Code   |   |  |
| \$279.95  | 2805 GULF FRWY S<br>LEAGUE CITY, TX 77573   |   |  |
| PURPOSE<br>OF<br>EXPENDITURE  | Category (See Categories listed at the top of this schedule<br>Office Overhead/Rental Expense   | e) Description (If travel outside of Texas, con<br>TELEPHONE EQUIPMENT AND SE                     |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH                      | Candidate / Officeholder name   | Office sought: Office   | e held:  |

### **POLITICAL EXPENDITURES**

| SCHEDULE | F |
|----------|---|
| SCHEDULE |   |

| Accounting/Bank  |   |  |   |  |
|--|---|--|---|--|
| 1 PAGE #<br>Schedule: 56/56                                |   |  | <b>3</b> ACCOUNT # (TEC filers)<br>00051862 |  |
| 4 Date<br>10/06/2011                                       | 5 Payee name<br>WELCH, MATT   |  |   |  |
| 6 Amount (\$)<br>\$4,000.00                                | <ul> <li>Payee address</li> <li>815 A Brazos Suite 436</li> <li>AUSTIN, TX 78701</li> </ul> |  |   |  |
| 8<br>PURPOSE<br>OF<br>EXPENDITURE                          | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense      | (b) Description (If travel outside<br>CAMPAIGN CONSULTIN | e of Texas, complete Schedule T) 🔲<br>IG    |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH      | Candidate / Officeholder name   | Office sought:   | Office held:                                |  |
| Date<br>11/03/2011   | Payee name<br>WELCH, MATT   |  |   |  |
| Amount (\$)<br>\$4,000.00                                  | Payee address City; State; Zip Code<br>815 A Brazos Suite 436<br>AUSTIN, TX 78701           |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE                               | Category (See Categories listed at the top of this schedule)<br>Consulting Expense          | Description (If travel outside<br>CAMPAIGN CONSULTIN     | e of Texas, complete Schedule T) 🔲<br>NG    |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought:   | Office held:                                |  |
| Date 12/01/2011  | Payee name<br>WELCH, MATT   |  |   |  |
| Amount (\$)<br>\$4,000.00                                  | Payee address City; State; Zip Code<br>815 A Brazos Suite 436<br>AUSTIN, TX 78701           |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE                               | Category (See Categories listed at the top of this schedule)<br>Consulting Expense          | Description (If travel outside<br>CAMPAIGN CONSULTIN     | e of Texas, complete Schedule T) 🔲<br>NG    |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought:   | Office held:                                |  |
| Date<br>11/14/2011   | Payee name<br>WILLIAMS & FORSYTHE   |  |   |  |
| Amount (\$)<br>\$1,000.00                                  | Payee address City; State; Zip Code<br>110 WEST AVE<br>AUSTIN, TX 78701                     |  |   |  |
| PURPOSE<br>OF<br>EXPENDITURE                               | Category (See Categories listed at the top of this schedule)<br>Legal Services              | Description (If travel outside<br>LEGAL SERVICES         | e of Texas, complete Schedule T)            |  |
| Complete <b>ONLY</b> if direct expenditure to benefit C/OH | Candidate / Officeholder name   | Office sought:   | Office held:                                |  |

#### INTEREST EARNED, OTHER CREDITS/GAINS/ SCHEDULE K **REFUNDS, AND PURCHASE OF INVESTMENTS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 1/2 Report: 100/101 Friends of Larry Taylor 2 FILER NAME ACCOUNT # (Ethics Commission filers) 3 00051862 Name of person from whom amount is received 4 Date 5 8 Amount Insurance Council of Texas (\$) 07/31/2011 \$407.33 6 Address of person from whom amount is received; City; State; Zip Code 2801 SIH 35 Austin, TX 78741 7 Purpose for which amount is received Reimbursement for travel expenses incurred during reporting period Name of person from whom amount is received Date Amount Taylor, Larry (\$) 09/30/2011 \$149.90 Address of person from whom amount is received; City; State; Zip Code PO Box 1208 Friendswood, TX 77546 Purpose for which amount is received Reimbursement for travel expenses incurred during reporting period Name of person from whom amount is received Date Amount Taylor, Larry (\$) 11/30/2011 \$124.00 Address of person from whom amount is received; City; State; Zip Code PO Box 1208 Friendswood, TX 77546 Purpose for which amount is received Reimbursement for travel expenses incurred during reporting period Name of person from whom amount is received Date Amount Texas Association of Health and Life Insurers (\$) 08/30/2011 \$181.00 Address of person from whom amount is received; City; State; Zip Code 1001 CONGRESS AVENUE SUITE 300 Austin, TX 78701 Purpose for which amount is received Reimbursement for travel expenses incurred during reporting period

| INTERE<br>REFUN   | ST EARNED, OTHER CREDITS/GAIN<br>DS, AND PURCHASE OF INVESTMEN  | S/<br>IT: | S                       | 9       | SCHEDULE K         |
|---|---|-----------|-------------------------|---------|--------------------|
| The INSTRUCTION GUIDE explains how to complete this form. |   | 1         | PAGE #<br>Schedule: 2/2 | Repo    | rt: 101/101        |
| 2 FILER NAME  | Friends of Larry Taylor   | 3         | ACCOUNT #<br>00051862   | (Ethics | Commission filers) |
| 4 Date  | 5 Name of person from whom amount is received<br>Thompson Coe Cousins & Irons LLP, Larry  |           |                         | 8       | Amount<br>(\$)     |
| 10/31/2011  | <ul> <li>Address of person from whom amount is received; City; State; Zip Code</li> <li>One Riverway Suite 1600</li> <li>Houston, TX 77056</li> </ul> |           |                         |         | \$89.00            |
|   | 7 Purpose for which amount is received<br>Reimbursement for travel expenses incurred during reporting period  | bd        |                         |         |                    |
|   |   |           |                         |         |                    |
|   |   |           |                         |         |                    |