

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

8

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr. Daniel

F

Albert

OFFICE USE ONLY

Date Received

OCT 30 2017

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

P.O. Box 721333

Houston TX 77272

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 930-3059

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

ThuThao

Doan

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

10925 Beechnut St. Ste. A106

Houston TX 77072

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832) 930-3059

9 REPORT TYPE

January 15

30th day before election

Runoff

15th day after campaign
treasurer appointment
(Officeholder Only)

July 15

8th day before election

Exceeded \$500 limit

Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

9 / 29 / 2017

THROUGH

Month

Day

Year

10 / 28 / 2017

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 07 / 2017

ELECTION TYPE

Primary

Runoff

Other
Description

General

Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

HISD District VI

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Daniel Albert

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

4,850

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

7,852.71

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

16,281.39

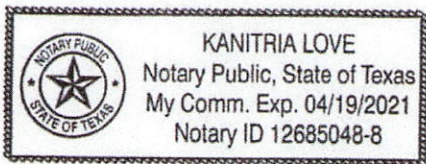
OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

30,000

18 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.

Daniel Albert

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Party, this the 30th day of October, 202017, to certify which, witness my hand and seal of office.

Kanitria Love
Signature of officer administering oath

Kanitria Love
Printed name of officer administering oath

notary of public
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Daniel Albert

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,950
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7,780.99
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 71.72
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **3**

2 FILER NAME
Daniel Albert

3 Filer ID (Ethics Commission Filers)

4 Date
10/6/17

5 Full name of contributor out-of-state PAC (ID#: _____)
Steve Moore

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
Houston TX 77067

250

8 Principal occupation / Job title (See Instructions)
real estate manager

9 Employer (See Instructions)

Date
10/28/17

Full name of contributor out-of-state PAC (ID#: _____)
CC Lee

Amount of contribution (\$)

Contributor address; City; State; Zip Code
Houston TX 77036

1,000

Principal occupation / Job title (See Instructions)
architect

Employer (See Instructions)

Date
10/17/17

Full name of contributor out-of-state PAC (ID#: _____)
Minh Le

Amount of contribution (\$)

Contributor address; City; State; Zip Code
Houston TX 77064

500

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)

Date
10/17/2017

Full name of contributor out-of-state PAC (ID#: _____)
Steve Le

Amount of contribution (\$)

Contributor address; City; State; Zip Code
Houston TX 77072

1,000

Principal occupation / Job title (See Instructions)
Doctor

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Daniel Albert

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/17

5 Full name of contributor

Jane Nguyen

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

500

6 Contributor address;

Sugar Land TX 77479

City; State; Zip Code

8 Principal occupation / Job title (See Instructions)

realtor

9 Employer (See Instructions)

Date

10/17/17

Full name of contributor

Shardon Phan

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250

Contributor address;

Houston TX 77082

City; State; Zip Code

Principal occupation / Job title (See Instructions)

attorney

Employer (See Instructions)

Date

10/17/17

Full name of contributor

Mai Lam Trinh

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

250

Contributor address;

Houston TX 77035

City; State; Zip Code

Principal occupation / Job title (See Instructions)

realtor

Employer (See Instructions)

Date

10/17/17

Full name of contributor

Rory Diamond

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

1,000

Contributor address;

Jacksonville Beach, FL

City; State; Zip Code

Principal occupation / Job title (See Instructions)

attorney

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 1

2 FILER NAME

Daniel Albert

3 Filer ID (Ethics Commission Filers)

4 Date

10/17/17

5 Full name of contributor

Tung Mai

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100

6 Contributor address;

City; State; Zip Code

Houston TX 77072

8 Principal occupation / Job title (See Instructions)

accountant

9 Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address;

City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:	2 FILER NAME <i>Daniel Alberte</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>11/10/17</i>	5 Payee name <i>Henry Dibrell</i>
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6 Amount (\$) <i>6760</i>	7 Payee address; City; State; Zip Code <i>Katy, TX</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) <i>Advertising</i>	(b) Description (See instructions regarding type of information required.) <i>mailers</i>
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
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Date <i>10/17/17</i>	Payee name <i>Ogun</i>
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Amount (\$) <i>20.99</i>	Payee address; City; State; Zip Code <i>Houston TX</i>
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) <i>event</i>	Description (See instructions regarding type of information required.) <i>drinks</i>
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Date <i>10/24/17</i>	Payee name <i>Henry Dibrell</i>
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Amount (\$) <i>1,000</i>	Payee address; City; State; Zip Code <i>Katy, TX</i>
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PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.) <i>Consulting</i>	Description (See instructions regarding type of information required.) <i>consulting + labels</i>
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 1	2 FILER NAME Daniel Albert	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 71.72

5 Date 10/28/17	6 Payee name Paypal
7 Amount (\$) 32.50	8 Payee address; City; State; Zip Code

9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) accounting
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/10/17	Payee name 7- Elwan
Amount (\$) 39.22	Payee address; City; State; Zip Code Round Rock TX

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel out of District
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense gas

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