

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Wanda	MI
	NICKNAME	LAST Adams	SUFFIX
OFFICE USE ONLY			
Date Received OCT 30 2017			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	315 W. Alabama		
	Houston , TX 77006		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Dr. Michael Adams	MI
	NICKNAME	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
	Eagle Street Houston, TX 77004		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		713 418-0987	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	10/11/2017		THROUGH 10/30/2017
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	10/30/2017		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
	HISD Trustee Place 9 District HISD Trustee Harris		

GO TO PAGE 2

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

FORM C/OH
COVER SHEET PG 2

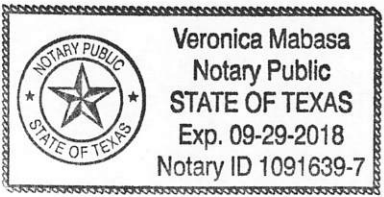
2 of 15

13 C / OH NAME Adams, Wanda	14 Filer ID
--------------------------------	-------------

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

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,025.00
----- EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	27,240.51
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,788.09
----- OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,069.78

17 AFFADAVIT



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.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Wanda Adams, this the 30th day of October, 20 17, to certify which, witness my hand and seal of office.

Veronica Mabasa Veronica Mabasa Team Lead
Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Adams, Wanda	19 Filer ID
--------------------------------------	--------------------

20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	16,025.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	301.00
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	27,240.51
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/15
2 FILER NAME Adams, Wanda		3 Filer ID
4 Date 10/16/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alali, Waleed (Mr.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 4718 Braeswood Houston , TX 77096		
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 10/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Willie	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 50 Briar Hollow Houston , TX 77021		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)
Date 10/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ascend PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1700 Kalorama RD Washington , DC 20009		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barns, Lee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 26014 Jodie Lynn Circle Cypress , TX 77433		
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Platinum Group
Date 10/30/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn , Llewelyn (Mrs.)	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1330 S. Llewelyn Court Dallas , TX 75224		
Principal occupation / Job title (See Instructions) Bussines Owner		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/15
2 FILER NAME Adams, Wanda		3 Filer ID
4 Date 10/16/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn , Stacie (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code 9 Heights Knoll Court Missouri City , TX 77459	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Bussines Owner		9 Employer (See Instructions)
Date 10/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dally, Samar <hr/> Contributor address; City; State; Zip Code 4211 Creek Ridge Missouri City, TX 77459	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Engineer
Date 10/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Day, Jonathan <hr/> Contributor address; City; State; Zip Code 600 Travis Houston , TX 77002	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 10/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dayal, Nishant <hr/> Contributor address; City; State; Zip Code 1895 Barkess Cypress Houston , TX 77084	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknow
Date 10/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donatto , James <hr/> Contributor address; City; State; Zip Code P.O.Box Houston , TX 77221	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) The Donnatto Group		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/15
2 FILER NAME Adams, Wanda		3 Filer ID
4 Date 10/18/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt Zollars Inc PAC <hr/> 6 Contributor address; City; State; Zip Code 1717 McKinney Dallas , TX 75202	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2017	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) IBEW PAC <hr/> Contributor address; City; State; Zip Code 900 7th Street Washington , DC 20001	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson , Lockett <hr/> Contributor address; City; State; Zip Code 5314 Calhoun Houston, TX 77021	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan , Barry <hr/> Contributor address; City; State; Zip Code 9014 Sandringham Houston , TX 77024	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Hettig Khan		Employer (See Instructions)
Date 10/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller , Cheryle <hr/> Contributor address; City; State; Zip Code 3722 Wheeler Ave Houston , TX 77004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/15
2 FILER NAME Adams, Wanda		3 Filer ID
4 Date 10/16/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliver, Raquel	7 Amount of Contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code 17318 Atherton Place Spring , TX 77379		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Consultant
Date 10/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rice, James	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 5402 Oban Terrance Sugar land , TX 77479		
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions)
Date 10/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabouni, Lina	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 23 Palm Blvd Houston , TX 77459		
Principal occupation / Job title (See Instructions) Self Employed Architech		Employer (See Instructions)
Date 10/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sabouni, Mourhaf	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 23 Palm Houston, TX 77459		
Principal occupation / Job title (See Instructions) Auto Architech		Employer (See Instructions)
Date 10/16/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tazehzadeh, Souna	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5318 Fenrick Sugar Land , TX 77479		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/15
2 FILER NAME Adams, Wanda		3 Filer ID
4 Date 10/25/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Mia 6 Contributor address; City; State; Zip Code Missouri City Texas, TX 77459	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) The Fountain of Praise

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 9/15
2 FILER NAME Adams, Wanda		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/30/2017	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Wanda	9 Loan Amount (\$) \$101.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 315 W. Alabama TX 77006	10 Interest Rate
		11 Maturity Date 10/30/2017
12 Principal occupation / Job title (See Instructions) Elected Official		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)
Date of loan 10/11/2017	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Wanda	Loan Amount (\$) \$200.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 315 West Alabama Houston, TX 77006	Interest Rate
		Maturity Date 10/30/2017
Principal occupation / Job title (See Instructions) Elected Official		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 10/15	2 FILER NAME Adams, Wanda	3 Filer ID
4 Date 10/30/2017	5 Payee name ATT	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 303 Williams Ave Huntsville Alabama, AL 35801	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Cell Phone Bill
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2017	Payee name Academy Awards	
Amount (\$) \$294.00	Payee address; City; State; Zip Code 4106 Fannin Houston , TX 77004	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense for Tshirts
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2017	Payee name Constant Contact	
Amount (\$) \$101.00	Payee address; City; State; Zip Code 1601 Trpelo Road Waltham , MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Constant Contact for Email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 11/15		2 FILER NAME Adams, Wanda		3 Filer ID	
4 Date 10/11/2017		5 Payee name Elite Change			
6 Amount (\$) \$920.00		7 Payee address; City; State; Zip Code 315 W. Alabama Houston, TX 77006			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Purchase Push Cards and Design	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/11/2017		Payee name Elite Change			
Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 315 W. Alabama Houston, TX 77006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Staff Exence for campaign	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/18/2017		Payee name Elite Change			
Amount (\$) \$7,400.00		Payee address; City; State; Zip Code 315 W. Alabama Houston, TX 77006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Mailer	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 12/15	2 FILER NAME Adams, Wanda	3 Filer ID
4 Date 10/26/2017	5 Payee name Elite Change	
6 Amount (\$) \$2,883.00	7 Payee address; City; State; Zip Code 315 W. Alabama Houston, TX 77006	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment for Poll Workers and Blockwalkers
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Eridef Consulting	
Amount (\$) \$600.00	Payee address; City; State; Zip Code Houston , TX 77021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract Labor put up 4x8 Signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2017	Payee name Eridef Consulting	
Amount (\$) \$500.00	Payee address; City; State; Zip Code TX 77021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor South East Precinct Judges Brunch
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 13/15		2 FILER NAME Adams, Wanda		3 Filer ID	
4 Date 10/16/2017		5 Payee name Houston Visitors Centor			
6 Amount (\$) \$62.51		7 Payee address; City; State; Zip Code 1001 Avenida De Las Americas Houston , TX 77010			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gift for Dr. K. Campbell Principal appreciation Month	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/29/2017		Payee name Kidd, Courtney			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 4223 Rockingham Houston , TX 77951			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poll Worker	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/11/2017		Payee name Lawrence Dupree 11 AB Canvassing			
Amount (\$) \$6,200.00		Payee address; City; State; Zip Code 5238 Canterway Houston , TX 77048			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Block Walkers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 14/15	2 FILER NAME Adams, Wanda	3 Filer ID
4 Date 10/30/2017	5 Payee name Lawrence Dupree 11 AB Canvassing	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 5238 Canterway Houston , TX 77048	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Block Walkers for Campaign
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/19/2017	Payee name Perez, Tonya	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1001 Avenida de las Americas Houston , TX 77010	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation for Harvey relief family affected by the storm.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2017	Payee name Riceville Mount Olive	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 11539 South Gessner Houston , TX 77071	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Church Annivesary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 15/15	2 FILER NAME Adams, Wanda	3 Filer ID	
4 Date 10/16/2017	5 Payee name Shell Gas Station		
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 75201 Bellair Houston , TX 77035		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held