

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:

30

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

Ms**Anne**

NICKNAME

LAST

SUFFIX

Sung4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

PO Box 27625**Houston, TX 77227**☐ change of address5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(832)**598-6878**6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

Mr**Charles**

NICKNAME

LAST

SUFFIX

Tom**Behrman**

OFFICE USE ONLY

Date Received

130CT28 11:47

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5419 Sanford Rd.**Houston, TX 77096**8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(713)**339-9420**

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 / 27 / 2013

THROUGH

Month

Day

Year

10 / 26 / 2013

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 5 / 2013

ELECTION TYPE

☐ Primary☐ Runoff☒ General☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

HISD Board of Education Trustee - District 7

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

Anne Sung

15 ACCOUNT # (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

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION
TOTALS

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

\$ 1048.89

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

\$ 24067.71

EXPENDITURE
TOTALS

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

\$ 11.90

4. TOTAL POLITICAL EXPENDITURES

\$ 23455.68

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 16013.69

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 100

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.

Anne Sung
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 28th day of Oct., 20 13, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Sandra Sanchez
Printed name of officer administering oath



[Signature]
Signature of officer administering oath
SANDRA SANCHEZ
My Commission Expires
February 17, 2017

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/27/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

Christy Tran

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/27/13

Full name of contributor

☐ out-of-state PAC (ID#)

Chris and Li Masters

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/27/13

Full name of contributor

☐ out-of-state PAC (ID#)

Samia Javed

Amount of contribution (\$)

60.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/27/13

Full name of contributor

☐ out-of-state PAC (ID#)

Amin Ghewalla

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/27/13

Full name of contributor

☐ out-of-state PAC (ID#)

Hortencia Oropeza

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/27/13

5 Full name of contributor ☐ out-of-state PAC (ID#:

Mary Stevens

6 Contributor address: City: State: Zip Code

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/27/13

Full name of contributor ☐ out-of-state PAC (ID#:

Lara Heiberg

Contributor address: City: State: Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/27/13

Full name of contributor ☐ out-of-state PAC (ID#:

Nadia Khobza

Contributor address: City: State: Zip Code

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/28/13

Full name of contributor ☐ out-of-state PAC (ID#:

~~Maria Elena Kibigala~~

Contributor address: City: State: Zip Code

Amount of contribution (\$)

~~100.00~~

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/30/13

Full name of contributor ☐ out-of-state PAC (ID#:

Judy Jeng

Contributor address: City: State: Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

08/30/13

5 Full name of contributor

☐ out-of-state PAC (ID#:

Eileen Chabon

7 Amount of
contribution (\$)

100.00

8 In-kind contribution
description (if applicable)

6 Contributor address: City: State: Zip Code

1

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Vilma Monera

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Contributor address: City: State: Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Srikanth Sridharan

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Contributor address: City: State: Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Houston Federation of Teachers

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Contributor address: City: State: Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Erica Lee

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

Contributor address: City: State: Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/3/13

5 Full name of contributor

☐ out-of-state PAC (ID#:

Bettine and Martin Siegel

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Susan Lovell

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Ann McCoy

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Margaret Gay

Contributor address; City; State; Zip Code

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#:

Victor Tong

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Surry

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/3/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

Peter Brown

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

300.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/3/13

Full name of contributor

☐ out-of-state PAC (ID#)

John Kuhn

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/6/13

Full name of contributor

☐ out-of-state PAC (ID#)

Ann Easton

Contributor address; City; State; Zip Code

Amount of contribution (\$)

300.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/9/13

Full name of contributor

☐ out-of-state PAC (ID#)

Sheetmetal Workers Local 54

Contributor address; City; State; Zip Code

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/9/13

Full name of contributor

☐ out-of-state PAC (ID#)

Ramiro Fonseca

Contributor address; City; State; Zip Code

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/10/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

Lethmy Dao Gibner

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

250.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/10/13

Full name of contributor

☐ out-of-state PAC (ID#)

Alice Fisher

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/13

Full name of contributor

☐ out-of-state PAC (ID#)

Edith Sung

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/13

Full name of contributor

☐ out-of-state PAC (ID#)

Vincent Sanders

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)

Frank & Cathy Montgomery

Contributor address; City; State; Zip Code

Amount of contribution (\$)

5000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Suny

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/13/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

Leonora Montgomery

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

1000.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)

Juliet Stipecho

Contributor address; City; State; Zip Code

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)

Susan Riley

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)

Barbara Kaplan

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)

Chini Lee Strickweiser

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/13/13

5 Full name of contributor

☐ out-of-state PAC (ID#:

John R. Behrman

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

200.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#:

Julie Dodel

Contributor address; City; State; Zip Code

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/14/13

Full name of contributor

☐ out-of-state PAC (ID#:

Patricia Melcher

Contributor address; City; State; Zip Code

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/14/13

Full name of contributor

☐ out-of-state PAC (ID#:

Edward Allen

Contributor address; City; State; Zip Code

Amount of contribution (\$)

4000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/13

Full name of contributor

☐ out-of-state PAC (ID#:

Steve Wilkerson

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/17/13

5 Full name of contributor

☐ out-of-state PAC (ID#:

Kenton Pate

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

6 Contributor address; City; State; Zip Code

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/20/13

Full name of contributor

☐ out-of-state PAC (ID#:

Sandra Peacock

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/21/13

Full name of contributor

☐ out-of-state PAC (ID#:

Danny Abrams

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/22/13

Full name of contributor

☐ out-of-state PAC (ID#:

Dereeth Phillips

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/21/13

Full name of contributor

☐ out-of-state PAC (ID#:

Lida Keene

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/1/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

~~Plumber Local Union 108~~

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

500.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/10/13

Full name of contributor

☐ out-of-state PAC (ID#)

marion mitchell

Contributor address; City; State; Zip Code

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/18/13

Full name of contributor

☐ out-of-state PAC (ID#)

Paula Arnold

Contributor address; City; State; Zip Code

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

~~10/1/13~~

Full name of contributor

☐ out-of-state PAC (ID#)

~~Contributor address; City; State; Zip Code~~

~~Contributor address; City; State; Zip Code~~

Amount of contribution (\$)

~~500.00~~

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

Mark Kerrissay

Contributor address; City; State; Zip Code

Amount of contribution (\$)

20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/20/13

5 Full name of contributor

Sari Altman

☐ out-of-state PAC (ID#)

7 Amount of contribution (\$)

50

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

6 Contributor address; City; State; Zip Code

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/20/13

Full name of contributor

Judy Long

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

100

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/27/13

Full name of contributor

Rozina Damani

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

50

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/15/13

Full name of contributor

LUCIUS Sung

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/23/13

Full name of contributor

Samia + Kamel Khalil

☐ out-of-state PAC (ID#)

Amount of contribution (\$)

1000.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/27/13

5 Full name of contributor

☐ out-of-state PAC (ID#)Rozina Damani

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

135.00

8 In-kind contribution description (if applicable)

~~Food~~ Food and drinks

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/5/13

Full name of contributor

☐ out-of-state PAC (ID#)Houston Federation of Teachers

Contributor address; City; State; Zip Code

Amount of contribution (\$)

80.00

In-kind contribution description (if applicable)

Printing

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/12/13

Full name of contributor

☐ out-of-state PAC (ID#)Erica Lee

Contributor address; City; State; Zip Code

Amount of contribution (\$)

81.50

In-kind contribution description (if applicable)

Food and marketing

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)Susan and Brian Riley

Contributor address; City; State; Zip Code

Amount of contribution (\$)

233.53

In-kind contribution description (if applicable)

Food and Beverage

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/13/13

Full name of contributor

☐ out-of-state PAC (ID#)Tom and Kathy Behrman

Contributor address; City; State; Zip Code

Amount of contribution (\$)

326.33

In-kind contribution description (if applicable)

Printing
Postage
Envelopes

(If travel outside of Texas, complete Schedule T)

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.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Suny

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/17/13

5 Full name of contributor

☐ out-of-state PAC (ID#)

Mark Kerrissay

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

37.89

8 In-kind contribution description (if applicable)

Food

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/17/13

Full name of contributor

☐ out-of-state PAC (ID#)

Houston Federation of Teachers

Contributor address; City; State; Zip Code

Amount of contribution (\$)

35.80

In-kind contribution description (if applicable)

drinks

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

Tom and Kathy Behrman

Contributor address; City; State; Zip Code

Amount of contribution (\$)

233.87

In-kind contribution description (if applicable)

Printing
envelope
Postage

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

Michele Bua

Contributor address; City; State; Zip Code

Amount of contribution (\$)

200

In-kind contribution description (if applicable)

Food

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/20/13

Full name of contributor

☐ out-of-state PAC (ID#)

Houston Federation of Teachers

Contributor address; City; State; Zip Code

Amount of contribution (\$)

75.00

In-kind contribution description (if applicable)

Printing

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

14

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/26/13

5 Full name of contributor

☐ out-of-state PAC (ID#:

Craig Clark

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

84.95

8 In-kind contribution description (if applicable)

Paper pushcard

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/26/13

Full name of contributor

☐ out-of-state PAC (ID#:

Craig Clark

Contributor address; City; State; Zip Code

Amount of contribution (\$)

40.00

In-kind contribution description (if applicable)

Food and water

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/26/13

Full name of contributor

☐ out-of-state PAC (ID#:

Nellie Clark

Contributor address; City; State; Zip Code

Amount of contribution (\$)

0

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/10/2013

Full name of contributor

☐ out-of-state PAC (ID#:

Cerillion NH Partners

Contributor address; City; State; Zip Code

Amount of contribution (\$)

2000

In-kind contribution description (if applicable)

mailer design

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/24/2013

Full name of contributor

☐ out-of-state PAC (ID#:

Cerillion NH Partners

Contributor address; City; State; Zip Code

Amount of contribution (\$)

1000

In-kind contribution description (if applicable)

mailer design

(If travel outside of Texas, complete Schedule T)

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.

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:**2** FILER NAME*Anne Sung***3** ACCOUNT # (Ethics Commission Filers)**4** TOTAL OF UNITEMIZED PLEDGES:

\$

5 Date**6** Full name of pledgor☐ out-of-state PAC (ID# _____)**8** Amount of pledge (\$)**9** In-kind description (if applicable)**7** Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)**11** Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

N/A

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor

☐ out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

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.

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME

Anne Sung

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS:

⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date of loan

7 Name of lender

☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender
a financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

Y N

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ none

15 Check if personal funds were deposited into political account

☐16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☐ not applicable

18 Guarantor address; City; State; Zip Code

N/A

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender
a financial
institution?

Lender address; City; State; Zip Code

Interest rate

Y N

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account

☐GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/10/13		5 Payee name Cerillion N4 Partners			
6 Amount (\$) 12669		7 Payee address; City; State; Zip Code 500 Union St. Ste. 406 Seattle, WA 98101			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) Political advertising	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/16/13		Payee name Cerillion N4 Partners			
Amount (\$) 7491		Payee address; City; State; Zip Code 500 Union St. Ste. 406 Seattle, WA 98101			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Political advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/16/13		Payee name Brandalyn Patton			
Amount (\$) 1000		Payee address; City; State; Zip Code 1601 S. Shepherd #53 Houston, TX 77019			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/21/13		Payee name Office Max (reimburse Brandalyn Patton for purchase)			
Amount (\$) 15.68		Payee address; City; State; Zip Code 1576 West Gray Houston, TX 77019			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing expense		Description (If travel outside of Texas, complete Schedule T) paper	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/22/13		5 Payee name Fed Ex (reimburse Brandalyn Patton for purchase)			
6 Amount (\$) 36.88		7 Payee address; City; State; Zip Code 2200 Southwest Fwy Houston, TX 77098			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) Political advertising	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/23/13		Payee name Copy.com			
Amount (\$) 439.22		Payee address; City; State; Zip Code 1201 F Westheimer Houston, TX 77006			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Political advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/26/13		Payee name Office Depot (reimburse Brandalyn Patton for purchase)			
Amount (\$) 15.14		Payee address; City; State; Zip Code 3443 Kirby Houston, TX 77098			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) Political advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/26/13		Payee name Domino's Pizza (reimburse Brandalyn Patton for purchase)			
Amount (\$) 23.73		Payee address; City; State; Zip Code 3731 W Alabama St Houston, TX 77098			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food expense		Description (If travel outside of Texas, complete Schedule T) pizza	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/26/13		5 Payee name Brenda Sanchez			
6 Amount (\$) 660		7 Payee address; City; State; Zip Code 5900 Blissonnet. #2108 St. Houston, TX 77081			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/26/13		Payee name Luis Garcia			
Amount (\$) 270		Payee address; City; State; Zip Code 11906 Eastex Fwy Houston, TX 77039			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/28/13		Payee name PayPal			
Amount (\$) 1.03		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/30/13		Payee name PayPal			
Amount (\$) 1.75		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/03/13		5 Payee name PayPal			
6 Amount (\$) 1.75		7 Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/05/13		Payee name PayPal			
Amount (\$) 1.03		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/06/13		Payee name PayPal			
Amount (\$) 1.03		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/09/13		Payee name PayPal			
Amount (\$) 2.48		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/10/13		5 Payee name PayPal			
6 Amount (\$) 1.75		7 Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/13/13		Payee name PayPal			
Amount (\$) 4.65		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/14/13		Payee name PayPal			
Amount (\$) 116.30		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/14/13		Payee name PayPal			
Amount (\$) 1.03		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/14/13		5 Payee name PayPal			
6 Amount (\$) 29.30		7 Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/15/13		Payee name PayPal			
Amount (\$) 0.59		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/15/13		Payee name PayPal			
Amount (\$) 1.75		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/20/13		Payee name PayPal			
Amount (\$) 3.20		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 7		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/21/13		5 Payee name PayPal			
6 Amount (\$) 1.75		7 Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/22/13		Payee name PayPal			
Amount (\$) 1.75		Payee address; City; State; Zip Code 2211 N First St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/21/13		Payee name Facebook			
Amount (\$) 25.24		Payee address; City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Political advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/23/13		Payee name Facebook			
Amount (\$) 50.16		Payee address; City; State; Zip Code 1601 Willow Rd. Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Political advertising	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1		2 FILER NAME Anne Sung		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/27/13		5 Payee name Blg Woodrows			
6 Amount (\$) 24.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 3111 Chimney Rock Rd. Houston, TX 77056			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) Food	
Date 10/03/13		Payee name Julia's Bistro			
Amount (\$) 522.62 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 3722 Main St. Houston, TX 77002			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) Food	
Date 10/3/2013		Payee name Data Ecology LLC			
Amount (\$) 29 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 16 Dudley St. Fitchburg, MA 01420			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising expense		Description (If travel outside of Texas, complete Schedule T) website	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	

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