

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: 19
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI Susan                                                                MI NICKNAME                      LAST                      SUFFIX Shafer	<b>OFFICE USE ONLY</b>	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 5212 Arboles Dr. Apt. C                      Houston, TX. 77035	Date Received  <div style="font-size: 24pt; font-weight: bold;">JUL 12 2017</div>	
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 409 )                      795-0945	Date Hand-delivered or Date Postmarked	
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR                      FIRST                      MI Melinda NICKNAME                      LAST                      SUFFIX Elder	Receipt #	Amount \$
<b>7</b> CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 10919 Atwell                      Houston, TX.                      77096 (Residence or Business)		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE                      PHONE NUMBER                      EXTENSION ( 713 )                      504-6585		
<b>9</b> 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 checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10</b> PERIOD COVERED	Month                      Day                      Year                      Month                      Day                      Year 04                      /                      07                      /                      2017                      THROUGH                      06                      /                      30                      /                      2017		
<b>11</b> ELECTION	ELECTION DATE Month                      Day                      Year 11                      /                      07                      /                      2017	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12</b> OFFICE	OFFICE HELD (if any)	<b>13</b> OFFICE SOUGHT (if known)	
		Houston ISD Board of Education Trustee District 9	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME **Susan Shafer** 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

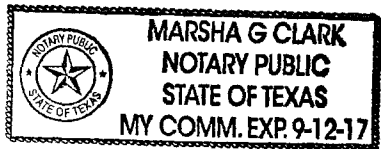
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO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

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> 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	\$ 250.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,690.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,543.48
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,026.52
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

*Susan Shafer*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susan Shafer, this the 12th day of July, 20 17, to certify which, witness my hand and seal of office.

*[Signature]*  
Signature of officer administering oath

Marsha G. Clark  
Printed name of officer administering oath

Notary  
Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Shafer, Susan	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,570.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 120.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,049.92
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 353.56
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 140.00
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: 1/7 Rpt: 4/19
2 FILER NAME Shafer, Susan		3 Filer ID
4 Date 05/23/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Frank	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code  Houston, TX 77096		
8 Principal occupation / Job title (See Instructions) engineer		9 Employer (See Instructions)
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bascom, Christopher and Katherine	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD
Date 05/03/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battles, Rich	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code  Houston, TX 77035		
Principal occupation / Job title (See Instructions) Parts specialist		Employer (See Instructions) Classic Chevrolet
Date 05/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Nancy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Bellaire, TX 77401		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)
Date 04/22/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlock, Emilio and Susan	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Houston, TX 77096		
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/7 Rpt: 5/19
<b>2</b> FILER NAME Shafer, Susan		<b>3</b> Filer ID
<b>4</b> Date 04/25/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Theresa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77096	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Environmental Engineer		<b>9</b> Employer (See Instructions) Nalco Champion
<b>Date</b> 04/27/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Diosdado, Ismael <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77035	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> self		<b>Employer (See Instructions)</b> Texas Gas Grills
<b>Date</b> 04/25/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellery, Joshua and Christine <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77096	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 04/15/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Rebecca <hr/> <b>Contributor address; City; State; Zip Code</b>  Athens, GA 30605	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Teacher		<b>Employer (See Instructions)</b> Clarke County School District
<b>Date</b> 04/26/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Fraleay, Bonnie <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77071	<b>Amount of Contribution (\$)</b>  \$50.00
<b>Principal occupation / Job title (See Instructions)</b> Merchandising		<b>Employer (See Instructions)</b> Empire Foods

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/7 Rpt: 6/19
<b>2</b> FILER NAME Shafer, Susan		<b>3</b> Filer ID
<b>4</b> Date 04/26/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerber, Marsha	<b>7</b> Amount of Contribution (\$) \$50.00
<b>6</b> Contributor address: City; State; Zip Code  Houston, TX 77046		
<b>8</b> Principal occupation / Job title (See Instructions) Retired attorney		<b>9</b> Employer (See Instructions)
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Robin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Houston, TX 77031		
Principal occupation / Job title (See Instructions) clerk		Employer (See Instructions) Houston ISD
Date 06/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grosso, Heather	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code  Houston, TX 77021		
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Houston ISD
Date 06/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Lloyd	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) musician		Employer (See Instructions) self
Date 06/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Silena	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Houston, TX 77035		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/7 Rpt: 7/19
<b>2</b> FILER NAME Shafer, Susan		<b>3</b> Filer ID
<b>4</b> Date 06/10/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kolb, Andrew <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77035	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) MRC		<b>9</b> Employer (See Instructions) Team Lead
<b>Date</b> 04/18/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle, William and Suzanne <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77096	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 06/10/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Lang, Craig and Gerry <hr/> <b>Contributor address; City; State; Zip Code</b>  Crystal Beach , TX 77650	<b>Amount of Contribution (\$)</b>  \$500.00
<b>Principal occupation / Job title (See Instructions)</b> retired		<b>Employer (See Instructions)</b>
<b>Date</b> 04/14/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Levi, Susan <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77007	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Occupational Therapist		<b>Employer (See Instructions)</b> Methodist
<b>Date</b> 05/23/2017	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Jennifer <hr/> <b>Contributor address; City; State; Zip Code</b>  Houston, TX 77035	<b>Amount of Contribution (\$)</b>  \$100.00
<b>Principal occupation / Job title (See Instructions)</b> Homemaker		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/19
2 FILER NAME Shafer, Susan		3 Filer ID
4 Date 04/14/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pasternak, Vicki 6 Contributor address; City; State; Zip Code  Houston, TX 77007	7 Amount of Contribution (\$)  \$250.00
8 Principal occupation / Job title (See Instructions) Retired teacher		9 Employer (See Instructions)
Date 06/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Catherine Contributor address; City; State; Zip Code  Houston, TX 77057	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Houston ISD
Date 06/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodgers, Katy Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$120.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD
Date 06/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rusnock, Brett Contributor address; City; State; Zip Code  Houston, TX 77009	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) coach		Employer (See Instructions) Golftec
Date 04/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Selig, Carol and Harry Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Retired Principal		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/7 Rpt: 9/19
<b>2</b> FILER NAME Shafer, Susan		<b>3</b> Filer ID
<b>4</b> Date 06/03/2017	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoemaker, Toni  <b>6</b> Contributor address; City; State; Zip Code  Ft. Myers, FL 33908	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) Royal Shell
Date 06/08/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Marianna  Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Houston ISD
Date 04/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stalnaker, Joy  Contributor address; City; State; Zip Code  Houston, TX 77096	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Houston ISD
Date 04/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starbuck, Gigi  Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Mother		Employer (See Instructions)
Date 06/10/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanlandingham, Joshua and Susie  Contributor address; City; State; Zip Code  Houston, TX 77035	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/19
2 FILER NAME Shafer, Susan		3 Filer ID
4 Date 06/10/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiss, Jill	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code  TX 77035		
8 Principal occupation / Job title (See Instructions) Homemaker		9 Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 11/19	
2 FILER NAME Shafer, Susan		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 04/25/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Battles, Bonny	8 Amount of contribution (\$) \$120.00	9 In-kind contribution description Business Cards
7 Contributor address; City; State; Zip Code 12407 Mullins Dr.  Houston, TX 77035		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Office Manager		11 Employer (FOR NON-JUDICIAL) (See instructions) Sunbelt Estates	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/3 Rpt: 12/19	<b>2</b> FILER NAME Shafer, Susan	<b>3</b> Filer ID
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<b>4</b> Date 06/02/2017	<b>5</b> Payee name Custom Button Company
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<b>6</b> Amount (\$) \$222.91	<b>7</b> Payee address; City; State; Zip Code 1500 W. Eau Galle Blvd.  Melbourne, FL 32935
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<b>8</b> 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 Buttons
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 05/03/2017	<b>Payee name</b> Embassy Printing
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<b>Amount (\$)</b> \$600.00	<b>Payee address; City; State; Zip Code</b> 5711 W. Bellfort  Houston, TX 77035
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<b>PURPOSE OF EXPENDITURE</b>	(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 T-shirts for contributors and campaign team
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate/Officeholder name	Office sought	Office held
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<b>Date</b> 04/27/2017	<b>Payee name</b> Prinrunner
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<b>Amount (\$)</b> \$49.28	<b>Payee address; City; State; Zip Code</b>  TX
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<b>PURPOSE OF EXPENDITURE</b>	(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 Thank-you to contributor cards.
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<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate/Officeholder name	Office sought	Office held
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# 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: 2/3 Rpt: 13/19		2 FILER NAME Shafer, Susan		3 Filer ID	
4 Date 06/05/2017		5 Payee name Printrunner			
6 Amount (\$) \$313.55		7 Payee address; City; State; Zip Code 8000 Haskell Ave  Van Nuys, CA 91406			
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 Bumper Stickers	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/17/2017		Payee name USPS			
Amount (\$) \$76.00		Payee address; City; State; Zip Code online services  Houston, TX 77035			
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 Campaign P.O. Box Rental	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 05/04/2017		Payee name USPS			
Amount (\$) \$19.60		Payee address; City; State; Zip Code TX			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Postage for contributor thank-you cards.		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage	
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: 3/3 Rpt: 14/19	2 FILER NAME Shafer, Susan	3 Filer ID
4 Date 05/08/2017	5 Payee name UZ Marketing	
6 Amount (\$) \$768.58	7 Payee address; City; State; Zip Code 5200 Mitchelldale St. Ste F22 Houston, TX 77092	
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 Yard Signs
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 1/3 Rpt: 15/19	2 FILER NAME Shafer, Susan	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 06/05/2017	6 Payee name Acme Party and Tent
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7 Amount (\$) \$107.56	8 Payee address; City; State; Zip Code 11144 S. Post Oak  Houston, TX 77035
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Fan Rental
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/13/2017	Payee name Campaign Partner
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Amount (\$) \$29.00	Payee address; City; State; Zip Code  TX
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
|  | 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: Sch: 2/3 Rpt: 16/19	2 FILER NAME Shafer, Susan	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
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5 Date 05/13/2017	6 Payee name Campaign Partner
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7 Amount (\$) \$29.00	8 Payee address; City; State; Zip Code  TX
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 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 Website
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2017	Payee name Campaign Partner
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Amount (\$) \$29.00	Payee address; City; State; Zip Code  TX
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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 Website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: Sch: 3/3 Rpt: 17/19		2 FILER NAME Shafer, Susan		3 Filer ID	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$	
5 Date 06/01/2017		6 Payee name Discount Mugs			
7 Amount (\$) \$159.00		8 Payee address; City; State; Zip Code 12610 NW 115th Ave.  Miami, FL 33178			
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) 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 Bracelets	
11 Complete ONLY if direct expenditure to benefit C/OH					
		Candidate/Officeholder name		Office sought	
				Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## 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 G: Sch: 1/2 Rpt: 18/19		2 FILER NAME Shafer, Susan		3 Filer ID	
4 Date 06/05/2017		5 Payee name Acme Party and Tent			
6 Amount (\$) \$107.56 <input type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 11144 S. Post Oak  Houston, TX 77035			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Fans for outdoor fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/13/2017		Payee name Bank of America			
Amount (\$) \$140.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 9660 Hillcroft  Houston, TX 77096			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Deposit to open campaign account	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 04/13/2017		Payee name Campaign Partner			
Amount (\$) \$29.00 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code P.O. Box 118  Still River, MA 01467			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Website	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**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.

<b>1</b> Total pages Schedule G: Sch: 2/2 Rpt: 19/19	<b>2</b> FILER NAME Shafer, Susan	<b>3</b> Filer ID
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<b>4</b> Date 05/13/2017	<b>5</b> Payee name Campaign Partner
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<b>6</b> Amount (\$) \$29.00  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code P.O. Box 118  Still River, MA 01467
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</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 Website
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/13/2017	Payee name Campaign Partner
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Amount (\$) \$29.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code  TX
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/01/2017	Payee name Discount Mugs
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Amount (\$) \$159.00  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 12610 NW 115th Ave.  Miami, FL 33178
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bracelets
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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