

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

The C/OH instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>9</b>																			
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: small;">MS / MRS / MR</td> <td style="width:40%; font-size: small;">FIRST</td> <td style="width:40%; font-size: small;">MI</td> </tr> <tr> <td style="text-align: center;">Mr</td> <td style="text-align: center;">James</td> <td style="text-align: center;">H</td> </tr> <tr> <td style="font-size: x-small;">NICKNAME</td> <td style="font-size: x-small;">LAST</td> <td style="font-size: x-small;">SUFFIX</td> </tr> <tr> <td colspan="3" style="text-align: center; padding-top: 10px;">Stitt</td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mr	James	H	NICKNAME	LAST	SUFFIX	Stitt			<b>OFFICE USE ONLY</b>								
MS / MRS / MR	FIRST	MI																				
Mr	James	H																				
NICKNAME	LAST	SUFFIX																				
Stitt																						
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b> <input type="checkbox"/> Change of Address	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">ADDRESS / PO BOX;</td> <td style="font-size: x-small;">APT / SUITE #;</td> <td style="font-size: x-small;">CITY;</td> <td style="font-size: x-small;">STATE;</td> <td style="font-size: x-small;">ZIP CODE</td> </tr> <tr> <td colspan="2">3728 Tulip Tree Drive</td> <td>Fort Worth TX</td> <td colspan="2">76137</td> </tr> </table>	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	3728 Tulip Tree Drive		Fort Worth TX	76137		Date Received										
ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE																		
3728 Tulip Tree Drive		Fort Worth TX	76137																			
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">AREA CODE</td> <td style="font-size: x-small;">PHONE NUMBER</td> <td style="font-size: x-small;">EXTENSION</td> </tr> <tr> <td style="text-align: center;">( 817 )</td> <td style="text-align: center;">223 - 7209</td> <td></td> </tr> </table>	AREA CODE	PHONE NUMBER	EXTENSION	( 817 )	223 - 7209		Date Hand-delivered or Date Postmarked														
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( 817 )	223 - 7209																					
<b>6 CAMPAIGN TREASURER NAME</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:20%; font-size: small;">MS / MRS / MR</td> <td style="width:40%; font-size: small;">FIRST</td> <td style="width:40%; font-size: small;">MI</td> </tr> <tr> <td style="text-align: center;">Mr</td> <td style="text-align: center;">Bryan</td> <td style="text-align: center;">R</td> </tr> <tr> <td style="font-size: x-small;">NICKNAME</td> <td style="font-size: x-small;">LAST</td> <td style="font-size: x-small;">SUFFIX</td> </tr> <tr> <td colspan="3" style="text-align: center; padding-top: 10px;">Morrow</td> </tr> </table>	MS / MRS / MR	FIRST	MI	Mr	Bryan	R	NICKNAME	LAST	SUFFIX	Morrow			Receipt #	Amount \$							
MS / MRS / MR	FIRST	MI																				
Mr	Bryan	R																				
NICKNAME	LAST	SUFFIX																				
Morrow																						
<b>7 CAMPAIGN TREASURER ADDRESS</b> <small>(Residence or Business)</small>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">STREET ADDRESS (NO PO BOX PLEASE);</td> <td style="font-size: x-small;">APT / SUITE #;</td> <td style="font-size: x-small;">CITY;</td> <td style="font-size: x-small;">STATE;</td> <td style="font-size: x-small;">ZIP CODE</td> </tr> <tr> <td colspan="2">4824 Cargill Circle</td> <td>Fort Worth TX</td> <td colspan="2">76244</td> </tr> </table>			STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE	4824 Cargill Circle		Fort Worth TX	76244										
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( 817 )	776 - 1096																					
<b>9 REPORT TYPE</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officerholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input checked="" type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<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 (Officerholder Only)	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)											
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<b>10 PERIOD COVERED</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="font-size: x-small;">Month</td> <td style="font-size: x-small;">Day</td> <td style="font-size: x-small;">Year</td> <td style="font-size: x-small;">THROUGH</td> <td style="font-size: x-small;">Month</td> <td style="font-size: x-small;">Day</td> <td style="font-size: x-small;">Year</td> </tr> <tr> <td style="text-align: center;">03</td> <td style="text-align: center;">/ 10</td> <td style="text-align: center;">/ 2016</td> <td></td> <td style="text-align: center;">04</td> <td style="text-align: center;">/ 28</td> <td style="text-align: center;">/ 2016</td> </tr> </table>			Month	Day	Year	THROUGH	Month	Day	Year	03	/ 10	/ 2016		04	/ 28	/ 2016					
Month	Day	Year	THROUGH	Month	Day	Year																
03	/ 10	/ 2016		04	/ 28	/ 2016																
<b>11 ELECTION</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td colspan="3" style="font-size: x-small;">ELECTION DATE</td> <td colspan="3" style="font-size: x-small;">ELECTION TYPE</td> </tr> <tr> <td style="font-size: x-small;">Month</td> <td style="font-size: x-small;">Day</td> <td style="font-size: x-small;">Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td style="text-align: center;">05</td> <td style="text-align: center;">/ 07</td> <td style="text-align: center;">/ 2016</td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>	ELECTION DATE			ELECTION TYPE			Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	05	/ 07	/ 2016	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special				
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<b>12 OFFICE</b>	OFFICE HELD (if any)	<b>13 OFFICE SOUGHT (if known)</b>																				
	Keller ISD Trustee Place 1	Keller ISD Trustee Place 1																				

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

**14 C/OH NAME** James H Stitt **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.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC  <input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	Itemized
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,850.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	Itemized
	4. TOTAL POLITICAL EXPENDITURES	\$	2,348.46
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$	501.54
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0

**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.

*James H. Stitt*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said James H. Stitt, this the 28 day of April, 2016, to certify which, witness my hand and seal of office.

*Gaye Lynne Montemayor*      Gaye Lynne Montemayor      Notary  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

Bryan R Morrow

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2850.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2348.46
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: 4

2 FILER NAME **Bryan R Morrow** 3 Filer ID (Ethics Commission Filers)

4 Date <b>3/16/16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lara Morrow</b>	7 Amount of contribution (\$)  <b>\$500.00</b>
6 Contributor address; City; State; Zip Code <b>4824 Cargill Circle Fort Worth TX 76244</b>		

8 Principal occupation / Job title (See Instructions) **Communications Director** 9 Employer (See Instructions) **Stericycle**

Date <b>3/15/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>S.L. Davis</b>	Amount of contribution (\$)  <b>\$25.00</b>
Contributor address; City; State; Zip Code <b>PO BOX 907 Keller TX 76244</b>		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date <b>3/15/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Landa Sloan Orrick</b>	Amount of contribution (\$)  <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>3204 Odessa Ave Fort Worth TX 76109</b>		

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date <b>3/28/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mary Reeves</b>	Amount of contribution (\$)  <b>\$50.00</b>
Contributor address; City; State; Zip Code <b>5109 Shell Creek Dr Fort Worth TX 76137</b>		

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>4</b>
2 FILER NAME <b>Bryan R Morrow</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>3/24/16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lara Morrow</b> 6 Contributor address; City; State; Zip Code <b>4824 Cargill Circle Fort Worth TX 76244</b>	7 Amount of contribution (\$)  <b>\$100.00</b>
8 Principal occupation / Job title (See Instructions) <b>Communications Director</b>		9 Employer (See Instructions) <b>Stericycle</b>
Date <b>3/15/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ron Adair</b> Contributor address; City; State; Zip Code <b>729 Paul Dr Hurst TX 76054</b>	Amount of contribution (\$)  <b>\$50.00</b>
Principal occupation / Job title (See Instructions) <b>Driving School Owner</b>		Employer (See Instructions) <b>Self Employed</b>
Date <b>3/15/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nan Sprester</b> Contributor address; City; State; Zip Code <b>4648 Seneca Dr Fort Worth TX 76137</b>	Amount of contribution (\$)  <b>\$25.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/28/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ashton Adair</b> Contributor address; City; State; Zip Code <b>9128 Peace Street Fort Worth TX 76244</b>	Amount of contribution (\$)  <b>\$50.00</b>
Principal occupation / Job title (See Instructions) <b>Admin Assistant</b>		Employer (See Instructions) <b>Stericycle</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>4</b>
2 FILER NAME <b>Bryan R Morrow</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/1/16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lara Morrow</b> 6 Contributor address; City; State; Zip Code <b>4824 Cargill Circle Fort Worth TX 76244</b>	7 Amount of contribution (\$)  <b>\$1300.00</b>
8 Principal occupation / Job title (See Instructions) <b>Communications Director</b>		9 Employer (See Instructions) <b>Stericycle</b>
Date <b>4/2/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Delbert Fast</b> Contributor address; City; State; Zip Code <b>5932 Steve Ct Westlake TX 76262</b>	Amount of contribution (\$)  <b>\$50.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>3/15/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>James M Stitt</b> Contributor address; City; State; Zip Code <b>10201 Creek Hollow Ln Fort Worth TX 76131</b>	Amount of contribution (\$)  <b>\$100.00</b>
Principal occupation / Job title (See Instructions) <b>School Teacher</b>		Employer (See Instructions) <b>KISD</b>
Date <b>4/5/16</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Gerda</b> Contributor address; City; State; Zip Code <b>1505 Brentwood Tr Keller TX 76248</b>	Amount of contribution (\$)  <b>\$250.00</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>4</b>
2 FILER NAME <b>Bryan R Morrow</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/6/16</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Matt Strong</b> 6 Contributor address; City; State; Zip Code <b>345 Huffman Bluff Keller TX 76248</b>	7 Amount of contribution (\$)  <b>\$300.00</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# POLITICAL EXPENDITURES MADE 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: 2	2 FILER NAME Bryan R Morrow		3 Filer ID (Ethics Commission Filers)	
4 Date 3/16/16	5 Payee name Discount Banners and Signs			
6 Amount (\$) 1,775.30	7 Payee address; City; State; Zip Code 500 N Main Keller TX 76248			
8 <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	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held
Date 4/1/16	Payee name Costco			
Amount (\$) 276.37	Payee address; City; State; Zip Code 8900 Tehama Ridge Fort Worth TX 76177			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Food/Beverage Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held
Date 4/1/2016	Payee name Vistaprint			
Amount (\$) 31.79	Payee address; City; State; Zip Code 275 Wyman St Waltham MA 02451			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought	Office held
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>				



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
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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: 2		<b>2</b> FILER NAME Bryan R Morrow		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 3/31/16		<b>5</b> Payee name Facebook Ads			
<b>6</b> Amount (\$) 3.63		<b>7</b> Payee address; City; State; Zip Code 1 Hacker Way Menlo Park CA 94025			
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>		<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	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 4/2/16		Payee name Rally.org			
Amount (\$) 23.22		Payee address; City; State; Zip Code 144 Second Street San Francisco CA 94105			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Fees		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 4/20/16		Payee name Jon Paul's Print Shop			
Amount (\$) 238.15		Payee address; City; State; Zip Code 2131 Rufe Snow Ste 100 Keller, TX 76248			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)  Printing Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED