

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 43
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Betsy	MI
	NICKNAME	LAST Price	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 100066 Fort Worth, TX 76185		ZIP CODE
			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Alice	MI
	NICKNAME	LAST Puente	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2737 Calder Court Fort Worth, TX 76107		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 07/01/2016	THROUGH	Month Day Year 12/31/2016
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Mayor	12 OFFICE SOUGHT (if known)	

GO TO PAGE 2

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

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

2 of 43

13 C / OH NAME Price, Betsy	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,200.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 2,039.13
	4. TOTAL POLITICAL EXPENDITURES	\$ 53,108.42
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 363,357.68
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT



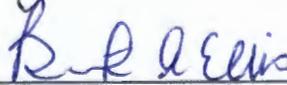
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sword to and subscribed before me, by the said Betsy Price, this the 13 day of Jan, 2017, to certify which, witness my hand and seal of office.



 Signature of officer administering

Beth A Ellis

 Printed name of officer administering

Notary Public

 Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Price, Betsy	19 Filer ID
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,200.00	
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 FROM POLITICAL CONTRIBUTIONS	\$ 53,108.42	
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 326.18	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/43
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 09/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowrance, Dan E (Mr.)	7 Amount of Contribution (\$) \$3,000.00
	6 Contributor address; City; State; Zip Code 2008 Four Oaks Ln Fort Worth, TX 76102	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Robert A. (Monsignor)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 109 Cedar Bluff Ct Aledo, TX 76008	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/36 Rpt: 5/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 11/11/2016	5 Payee name ALL SAINTS CATHOLIC CHURCH	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 214 NW 20TH STREET FORT WORTH, TX 76164	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SPONSORSHIP
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2016	Payee name AMERICAN AIRLINES	
Amount (\$) \$326.10	Payee address; City; State; Zip Code 4333 AMON CARTER BLVD FORT WORTH, TX 76155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TRAVEL EXPENSE FOR PHOTOGRAPHER
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2016	Payee name ATCHLEY AND ASSOCIATES LLP	
Amount (\$) \$471.00	Payee address; City; State; Zip Code 1005 LA POSADA DR AUSTIN, TX 78752	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ACCOUNTING AND REPORTING SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/36 Rpt: 6/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 08/08/2016	5 Payee name ATCHLEY AND ASSOCIATES, LLP	
6 Amount (\$) \$2,022.87	7 Payee address; City; State; Zip Code 1005 LA POSADA DR AUSTIN, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ACCOUNTING AND REPORTING SERVICES
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2016	Payee name BILL WAYBOURN FOR SHERIFF CAMPAIGN	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO BOX 151305 ARLINGTON, TX 76015	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2016	Payee name BOB'S STEAK AND CHOP HOUSE	
Amount (\$) \$398.57	Payee address; City; State; Zip Code 1300 HOUSTON STREET FORT WORTH, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 OFFICEHOLDER MEETING WITH TXDOT STAFF
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 | 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) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/36 Rpt: 7/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 07/28/2016	5 Payee name BOTANICAL RESEARCH INSTITUTE OF TEXAS	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1700 UNIVERSITY DRIVE FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2016	Payee name BRIGHTER OUTLOOK INC	
Amount (\$) \$600.00	Payee address; City; State; Zip Code 4910 DUNBAR STREET FORT WORTH, TX 76105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2016	Payee name CONSTANT CONTACT	
Amount (\$) \$191.88	Payee address; City; State; Zip Code 3232 MCKINNEY AVE STE 660 DALLAS, TX 75204	
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 EMAIL SERVICES
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/36 Rpt: 8/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 12/15/2016		5 Payee name CONSTANT CONTACT			
6 Amount (\$) \$255.84		7 Payee address; City; State; Zip Code 3232 MCKINNEY AVE STE 660 DALLAS, TX 75204			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN EMAIL SERVICES	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/26/2016		Payee name COSTCO			
Amount (\$) \$216.96		Payee address; City; State; Zip Code 5300 OVERTON RIDGE BLVD FORT WORTH, TX 76132			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 FOOD/BEVERAGES FOR A WISH WITH WINGS DINNER	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 12/23/2016		Payee name DEFENDER OUTDOORS			
Amount (\$) \$4,221.75		Payee address; City; State; Zip Code 2900 SHOTTS ST FORT WORTH, TX 76107			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS GIFTS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/36 Rpt: 9/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 12/20/2016		5 Payee name DEL FRISCO'S #8602			
6 Amount (\$) \$451.33		7 Payee address; City; State; Zip Code 812 MAIN ST FORT WORTH, TX 76102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS PARTY EXPENSE	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/06/2016		Payee name DEL FRISCO'S GRILLE			
Amount (\$) \$120.67		Payee address; City; State; Zip Code 154 E THIRD STREET FORT WORTH, TX 76102			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/28/2016		Payee name EXPANCO, INC.			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 3005 WICHITA COURT FORT WORTH, TX 76140			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX officeholder living expense DONATION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/36 Rpt: 10/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 07/07/2016		5 Payee name FEDEX OFFICE			
6 Amount (\$) \$49.95		7 Payee address; City; State; Zip Code 6020 CAMP BOWIE BLVD. FORT WORTH, TX 76116			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN POSTAGE	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/08/2016		Payee name FEDEX OFFICE			
Amount (\$) \$73.50		Payee address; City; State; Zip Code 6020 CAMP BOWIE BLVD. FORT WORTH, TX 76116			
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 POSTAGE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/06/2016		Payee name FEDEX OFFICE			
Amount (\$) \$50.09		Payee address; City; State; Zip Code 6020 CAMP BOWIE BLVD. FORT WORTH, TX 76116			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EXPENSE TO COPY CAMPAIGN DOCUMENTS	
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: 7/36 Rpt: 11/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 12/06/2016		5 Payee name FEDEX OFFICE			
6 Amount (\$) \$5.64		7 Payee address; City; State; Zip Code 6020 CAMP BOWIE BLVD. FORT WORTH, TX 76116			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EXPENSE TO COPY CAMPAIGN DOCUMENTS	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/07/2016		Payee name FEDEX OFFICE			
Amount (\$) \$8.95		Payee address; City; State; Zip Code 6020 CAMP BOWIE BLVD. FORT WORTH, TX 76116			
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 EXPENSE TO COPY CAMPAIGN DOCUMENTS	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/20/2016		Payee name FIXTURE KITCHEN AND SOCIAL LOUNGE			
Amount (\$) \$47.63		Payee address; City; State; Zip Code 401 WEST MAGNOLIA FORT WORTH, TX 76104			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE	
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: 8/36 Rpt: 12/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 11/01/2016		5 Payee name FIXTURE KITCHEN AND SOCIAL LOUNGE			
6 Amount (\$) \$69.46		7 Payee address; City; State; Zip Code 401 WEST MAGNOLIA FORT WORTH, TX 76104			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/09/2016		Payee name FORT WORTH CAMERA			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 2900 W 6TH STREET FORT WORTH, TX 76107			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PHOTOGRAPHER CHRISTMAS GIFT	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/15/2016		Payee name FORT WORTH DELTA DELTA DELTA ALUMNAE CHAPTER			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 2331 BROOKHOLLOW PLAZA DR PO BOX 587 ARLINGTON, TX 76006			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION	
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: 9/36 Rpt: 13/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 07/28/2016		5 Payee name FORT WORTH PARKS AND COMMUNITY SERVICES DEPT			
6 Amount (\$) \$147.50		7 Payee address; City; State; Zip Code 611 MAIN STREET #400 GRAPEVINE, TX 76051			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense FACILITIES RENTAL FOR SNOWBALL EXPRESS EVENT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/07/2016		Payee name FORT WORTH PROMOTION AND DEVELOPMENT FUND			
Amount (\$) \$3,500.00		Payee address; City; State; Zip Code PO BOX 8040 FORT WORTH, TX 76124			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense EVENT SPONSORSHIP	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/10/2016		Payee name FORT WORTH REPUBLICAN WOMEN			
Amount (\$) \$100.00		Payee address; City; State; Zip Code PO BOX 101613 FORT WORTH, TX 76185			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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 F1: Sch: 10/36 Rpt: 14/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 11/10/2016	5 Payee name FORT WORTH REPUBLICAN WOMEN	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code PO BOX 101613 FORT WORTH, TX 76185	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CHRISTMAS ORNAMENTS FOR CONSTITUENT GIFTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2016	Payee name FORT WORTH REPUBLICAN WOMEN	
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO BOX 101613 FORT WORTH, TX 76185	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) DUES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2016	Payee name GEORGE P. BUSH CAMPAIGN	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO BOX 2667 AUSTIN, TX 78755	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> 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: 11/36 Rpt: 15/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 07/20/2016		5 Payee name GIEGERS DOWNTOWN			
6 Amount (\$) \$285.12		7 Payee address; City; State; Zip Code 1020 EUCLID AVE CLEVELAND, OH 44115			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GIFTS FOR STAFF AT REPUBLICAN NATIONAL CONVENTION	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/12/2016		Payee name GOODE COMPANY BARBEQUE			
Amount (\$) \$1,487.48		Payee address; City; State; Zip Code 2422 BARTLETT ST STE 1 HOUSTON, TX 77098			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GIFTS FOR CONSTITUENTS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2016		Payee name GOODE COMPANY BARBEQUE			
Amount (\$) \$87.94		Payee address; City; State; Zip Code 2422 BARTLETT ST STE 1 HOUSTON, TX 77098			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GIFTS FOR CONSTITUENTS	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 12/36 Rpt: 16/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/16/2016	5 Payee name GOODE COMPANY BARBEQUE	
6 Amount (\$) \$47.94	7 Payee address; City; State; Zip Code 2422 BARTLETT ST STE 1 HOUSTON, TX 77098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GIFTS FOR CONSITUENTS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2016	Payee name H3 RANCH	
Amount (\$) \$117.76	Payee address; City; State; Zip Code 109 E. EXCHANGE AVE FORT WORTH, TX 76164	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 OFFICEHOLDER DINNER WITH SUPPORTER AT LONGHORN CATTLE AUCTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2016	Payee name HAMPTON INN - NICEVILLE	
Amount (\$) \$215.18	Payee address; City; State; Zip Code 4400 ANSLEY DR NICEVILLE, FL 32578	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING EXPENSE FOR PHOTOGRAPHER
Complete <u>ONLY</u> 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: 13/36 Rpt: 17/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 07/21/2016	5 Payee name HAWTHORN SUITES BY WINDHAM SEVILLE OH	
6 Amount (\$) \$566.26	7 Payee address; City; State; Zip Code 5025 PARK AVE WEST SEVILLE, OH 44273	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICEHOLDER LODGING EXPENSE FOR REPUBLICAN NATIONAL CONVENTION
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2016	Payee name HAWTHORN SUITES BY WINDHAM SEVILLE OH	
Amount (\$) \$566.26	Payee address; City; State; Zip Code 5025 PARK AVE WEST SEVILLE, OH 44273	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF LODGING EXPENSE FOR REPUBLICAN NATIONAL CONVENTION
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2016	Payee name HEIM BBQ	
Amount (\$) \$202.38	Payee address; City; State; Zip Code 1109 WEST MAGNOLIA FORT WORTH, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF AND POLICE DEPARTMENT MEAL
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: 14/36 Rpt: 18/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 08/26/2016	5 Payee name HEIM BBQ	
6 Amount (\$) \$271.13	7 Payee address; City; State; Zip Code 1109 WEST MAGNOLIA FORT WORTH, TX 76104	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 BICYCLE INC THANK YOU LUNCH
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2016	Payee name HOME DEPOT	
Amount (\$) \$103.24	Payee address; City; State; Zip Code 4850 S.W. LOOP 820 FORT WORTH, TX 76109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS GIFT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/28/2016	Payee name JANE NELSON CAMPAIGN	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO BOX 608 GRAPEVINE, TX 76099	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> 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: 15/36 Rpt: 19/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 12/14/2016		5 Payee name JEWEL CHARITY BALL INC			
6 Amount (\$) \$200.00		7 Payee address; City; State; Zip Code 5020 COLLINWOOD AVE STE 400 FORT WORTH, TX 76107			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense TICKETS TO ATTEND CHARITY BALL	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/10/2016		Payee name JP SOLUTIONS			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/30/2016		Payee name JP SOLUTIONS			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT	
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 | 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) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/36 Rpt: 20/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 09/06/2016	5 Payee name JP SOLUTIONS	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2016	Payee name JP SOLUTIONS	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2016	Payee name JP SOLUTIONS	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT
Complete <u>ONLY</u> 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	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)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/36 Rpt: 21/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/01/2016	5 Payee name JP SOLUTIONS	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/21/2016	Payee name JP SOLUTIONS	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 6421 FERSHAW PLACE FORT WORTH, TX 76116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN MANAGEMENT
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2016	Payee name JUSTIN BOOT	
Amount (\$) \$293.82	Payee address; City; State; Zip Code PO BOX 99188 FORT WORTH, TX 76199	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS GIFT
Complete <u>ONLY</u> 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: 18/36 Rpt: 22/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 11/08/2016		5 Payee name JUSTIN BOOT			
6 Amount (\$) \$409.69		7 Payee address; City; State; Zip Code PO BOX 99188 FORT WORTH, TX 76199			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS GIFT	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/29/2016		Payee name KAY GRANGER CAMPAIGN FUND			
Amount (\$) \$400.00		Payee address; City; State; Zip Code 1701 RIVER RUN STE 308 FORT WORTH, TX 76107			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/26/2016		Payee name KINGS LIQUORS			
Amount (\$) \$2.68		Payee address; City; State; Zip Code 5113 GRANBURY ROAD FORT WORTH, TX 76133			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 BICYCLE INC THANK YOU LUNCH	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 19/36 Rpt: 23/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/15/2016	5 Payee name KINGS LIQUORS	
6 Amount (\$) \$162.34	7 Payee address; City; State; Zip Code 5113 GRANBURY ROAD FORT WORTH, TX 76133	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS PARTY EXPENSE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2016	Payee name LA PERLA NEGRA	
Amount (\$) \$132.42	Payee address; City; State; Zip Code 910 HOUSTON ST FORT WORTH, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/11/2016	Payee name LILI'S BISTRO ON MAGNOLIA	
Amount (\$) \$52.30	Payee address; City; State; Zip Code 1310 W MAGNOLIA AVE FORT WORTH, TX 76104	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> 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: 20/36 Rpt: 24/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 07/11/2016		5 Payee name LILI'S BISTRO ON MAGNOLIA			
6 Amount (\$) \$97.22		7 Payee address; City; State; Zip Code 1310 W MAGNOLIA AVE FORT WORTH, TX 76104			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/02/2016		Payee name LILI'S BISTRO ON MAGNOLIA			
Amount (\$) \$59.80		Payee address; City; State; Zip Code 1310 W MAGNOLIA AVE FORT WORTH, OH 76104			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/17/2016		Payee name LILI'S BISTRO ON MAGNOLIA			
Amount (\$) \$71.54		Payee address; City; State; Zip Code 1310 W MAGNOLIA AVE FORT WORTH, TX 76104			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE	
Complete <u>ONLY</u> 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: 21/36 Rpt: 25/43	2 FILER NAME Price, Betsy	3 Filer ID
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4 Date 11/03/2016	5 Payee name MICHAEL BURGESS FOR CONGRESS
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO BOX 2334 DENTON, TX 76202
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2016	Payee name MON CHER TON TON
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Amount (\$) \$864.56	Payee address; City; State; Zip Code B1-3-12-2 ROPPOGI TOKYO MINATOKU Japan
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense OFFICEHOLDER MEAL WITH DFW BOARD
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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 07/18/2016	Payee name MOTEL 6 - CLEVELAND - MIDDLEBURG HEIGHT
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Amount (\$) \$326.18	Payee address; City; State; Zip Code 7219 ENGLE RD MIDDLEBURG HEIGHTS, OH 44130
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense LODGING EXPENSE CHARGED IN ERROR, REFUNDED
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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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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: 22/36 Rpt: 26/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 11/13/2016	5 Payee name NATIONAL COWGIRL MUSEUM AND HALL OF FAME	
6 Amount (\$) \$155.00	7 Payee address; City; State; Zip Code 1720 GENDY STREET FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) DUES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2016	Payee name PRESS CAFE	
Amount (\$) \$62.24	Payee address; City; State; Zip Code 4801 EDWARDS RANCH RD FORT WORTH, TX 76109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/12/2016	Payee name PRESS CAFE	
Amount (\$) \$76.70	Payee address; City; State; Zip Code 4801 EDWARDS RANCH RD FORT WORTH, TX 76109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> 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: 23/36 Rpt: 27/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/15/2016	5 Payee name PRINTE POINT	
6 Amount (\$) \$5,553.10	7 Payee address; City; State; Zip Code 2419 GRAVEL DR FORT WORTH, TX 76118	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PRINTING AND MAILING OF CAMPAIGN CHRISTMAS CARDS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2016	Payee name REATA FORT WORTH	
Amount (\$) \$46.92	Payee address; City; State; Zip Code 810 HOUSTON ST FORT WORTH, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2016	Payee name REATA FORT WORTH	
Amount (\$) \$186.80	Payee address; City; State; Zip Code 810 HOUSTON ST FORT WORTH, TX 76102	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> 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: 24/36 Rpt: 28/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/08/2016	5 Payee name REATA FORT WORTH	
6 Amount (\$) \$1,475.34	7 Payee address; City; State; Zip Code 810 HOUSTON ST FORT WORTH, TX 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF CHRISTMAS PARTY EXPENSE
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2016	Payee name REESE, COURTNEY	
Amount (\$) \$560.00	Payee address; City; State; Zip Code 11905 AVARETT CIR ALEDO, TX 76008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DESIGN OF CAMPAIGN CHRISTMAS CARD
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2016	Payee name REPUBLICAN NATIONAL COMMITTEE	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 310 FIRST STREET SE WASHINGTON, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) DUES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
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: 25/36 Rpt: 29/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 11/03/2016	5 Payee name REPUBLICAN PARTY OF TEXAS	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code PO BOX 2206 AUSTIN, TX 78768	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/08/2016	Payee name RING CENTRAL INC	
Amount (\$) \$36.21	Payee address; City; State; Zip Code 20 DAVIS DRIVE BELMONT, CA 94002	
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 PHONE LINE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2016	Payee name RING CENTRAL INC	
Amount (\$) \$36.21	Payee address; City; State; Zip Code 20 DAVIS DRIVE BELMONT, CA 94002	
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 PHONE LINE
Complete <u>ONLY</u> 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: 26/36 Rpt: 30/43	2 FILER NAME Price, Betsy	3 Filer ID
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4 Date 09/08/2016	5 Payee name RING CENTRAL INC
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6 Amount (\$) \$36.21	7 Payee address; City; State; Zip Code 20 DAVIS DRIVE BELMONT, CA 94002
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PHONE LINE
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/07/2016	Payee name RING CENTRAL INC
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Amount (\$) \$36.04	Payee address; City; State; Zip Code 20 DAVIS DRIVE BELMONT, CA 94002
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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 PHONE LINE
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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 11/07/2016	Payee name RING CENTRAL INC
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Amount (\$) \$36.04	Payee address; City; State; Zip Code 20 DAVIS DRIVE BELMONT, CA 94002
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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 PHONE LINE
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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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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: 27/36 Rpt: 31/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/07/2016	5 Payee name RING CENTRAL INC	
6 Amount (\$) \$36.04	7 Payee address; City; State; Zip Code 20 DAVIS DRIVE BELMONT, CA 94002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN PHONE LINE
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2016	Payee name RODEO GOAT	
Amount (\$) \$125.01	Payee address; City; State; Zip Code 2836 BLEDSOE ST FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense STAFF MEAL EXPENSE
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2016	Payee name ROGER WILLIAMS FOR US CONGRESS COMMITTEE	
Amount (\$) \$250.00	Payee address; City; State; Zip Code PO BOX 91061 AUSTIN, TX 78709	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> 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: 28/36 Rpt: 32/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 11/03/2016		5 Payee name ROTARY CLUB OF FORT WORTH			
6 Amount (\$) \$300.00		7 Payee address; City; State; Zip Code 306 W. 7TH STREET, SUITE 715 FORT WORTH, TX 76102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) DUES		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 08/08/2016		Payee name SAL ESPINO CAMPAIGN			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 1205 N MAIN STREET FORT WORTH, TX 76164			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 07/14/2016		Payee name SMALL WONDER COMMUNICATIONS			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTATION AND WRITING SERVICES	
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: 29/36 Rpt: 33/43	2 FILER NAME Price, Betsy	3 Filer ID
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4 Date 08/15/2016	5 Payee name SMALL WONDER COMMUNICATIONS
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6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTATION AND WRITING SERVICES
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/10/2016	Payee name SMALL WONDER COMMUNICATIONS
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTATION AND WRITING SERVICES
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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 10/07/2016	Payee name SMALL WONDER COMMUNICATIONS
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTATION AND WRITING SERVICES
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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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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: 30/36 Rpt: 34/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 11/03/2016	5 Payee name SMALL WONDER COMMUNICATIONS	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTATION AND WRITING SERVICES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	
Date 12/07/2016	Payee name SMALL WONDER COMMUNICATIONS	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1712 JENSON ROAD FORT WORTH, TX 76112	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONSULTATION AND WRITING SERVICES
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
	Office held	
Date 10/13/2016	Payee name SOUTHWESTERN EXPOSITION AND LIVESTOCK SHOW	
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO BOX 150 FORT WORTH, TX 76101	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CALF SCRAMBLE EVENT SPONSORSHIP
Complete <u>ONLY</u> 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: 31/36 Rpt: 35/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 10/13/2016	5 Payee name TARRANT COUNTY REPUBLICAN PARTY	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code 7524 MOSIER VIEW COURT, SUITE 230 FORT WORTH, TX 76118	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) DUES	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense MEMBERSHIP DUES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2016	Payee name TEXANS FOR KELLY HANCOCK	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 4908 DORY CT NORTH RICHLAND HILLS, TX 76180	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/03/2016	Payee name TEXAS FOR JOE STRAUS	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO BOX 90388 SAN ANTONIO, TX 78209	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION
Complete <u>ONLY</u> 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: 32/36 Rpt: 36/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 07/28/2016		5 Payee name THE POTTER'S HOUSE			
6 Amount (\$) \$250.00		7 Payee address; City; State; Zip Code 6777 W. KIEST BLVD DALLAS, TX 75236			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/21/2016		Payee name THE TEXAS STATE SOCIETY OF WASHINGTON DC			
Amount (\$) \$1,200.00		Payee address; City; State; Zip Code PO BOX 70155 WASHINGTON, DC 20024			
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 TICKETS TO ATTEND PRESIDENTIAL INAUGURAL BALL	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 09/23/2016		Payee name TRADER JOE'S			
Amount (\$) \$25.09		Payee address; City; State; Zip Code 2701 SOUTH HULEN FORT WORTH, TX 76107			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 FOOD/BEVERAGES FOR A WISH WITH WINGS DINNER	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		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: 33/36 Rpt: 37/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 09/26/2016		5 Payee name TRADER JOE'S			
6 Amount (\$) \$87.02		7 Payee address; City; State; Zip Code 2701 SOUTH HULEN FORT WORTH, TX 76107			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 FOOD/BEVERAGES FOR A WISH WITH WINGS DINNER	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/09/2016		Payee name TRINITY RIVER STATION			
Amount (\$) \$47.00		Payee address; City; State; Zip Code 4450 OAK PARK LN FORT WORTH, TX 76109			
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 POSTAGE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/06/2016		Payee name TRINITY RIVER STATION			
Amount (\$) \$47.00		Payee address; City; State; Zip Code 4450 OAK PARK LN FORT WORTH, TX 76109			
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 POSTAGE	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 34/36 Rpt: 38/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 12/07/2016		5 Payee name TRINITY RIVER STATION			
6 Amount (\$) \$130.00		7 Payee address; City; State; Zip Code 4450 OAK PARK LN FORT WORTH, TX 76109			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN POST OFFICE BOX RENTAL	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/15/2016		Payee name TRUMP MAKE AMERICA GREAT AGAIN COMMITTEE			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 138 CONANT ST 2ND FL BEVERLY, MA 01915			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CAMPAIGN CONTRIBUTION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 12/13/2016		Payee name Tarrant Community College Foundation			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 1500 Houston St Fort Worth, TX 75102			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		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: 35/36 Rpt: 39/43		2 FILER NAME Price, Betsy		3 Filer ID	
4 Date 09/10/2016		5 Payee name UNITED COMMUNITY CENTERS INC			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 1200 E. MADDOX AVENUE FORT WORTH, TX 76104			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/15/2016		Payee name UNITED WAY OF TARRANT COUNTY			
Amount (\$) \$750.00		Payee address; City; State; Zip Code 1500 N MAIN ST STE 200 FORT WORTH, TX 76164			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense DONATION	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 07/28/2016		Payee name USS FORT WORTH SUPPORT COMMITTEE			
Amount (\$) \$1,000.00		Payee address; City; State; Zip Code PO BOX 246 FORT WORTH, TX 76101			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) DUES		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ANCHOR CLUB DUES	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		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: 36/36 Rpt: 40/43	2 FILER NAME Price, Betsy	3 Filer ID
4 Date 12/12/2016	5 Payee name VENDING NUT CO	
6 Amount (\$) \$397.39	7 Payee address; City; State; Zip Code 2222 MONTGOMERY ST FORT WORTH, TX 76107	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense GIFTS FOR CONSTITUENTS
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 11/03/2016	Payee name WILL ROGERS MEMORIAL CENTER	
Amount (\$) \$300.00	Payee address; City; State; Zip Code 3401 W LANCASTER AVE FORT WORTH, TX 76107	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense SPACE RENTAL FOR COWTOWN WELDING CHALLENGE
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 41/43
2 FILER NAME Price, Betsy		3 Filer ID
4 Date 07/18/2016	5 Name of person from whom amount is received Motel 6 - Cleveland - Middleburg Height	8 Amount (\$) \$326.18
	6 Address of person from whom amount is received; City; State; Zip Code 7219 Engle Rd Middleburg Heights, OH 44130	
7 Purpose for which amount is received Credit for lodging expense charged to campaign account in error		<input type="checkbox"/> Check if political contribution returned to filer

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T:
Sch: 1/2 Rpt: 42/43

2 FILER NAME

Price, Betsy

3 Filer ID

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

AMERICAN AIRLINES

5 Contribution / Expenditure reported on:

- Schedule A2
 Schedule B
 Schedule B(J)
 Schedule C2
 Schedule D
 Schedule F1
 Schedule F2
 Schedule F4
 Schedule G
 Schedule H
 Schedule COH-UC
 Schedule B - SS

6 Dates of Travel

07/27/2016

07/27/2016

7 Name of person(s) traveling

ELLMAN, GLEN

8 Departure city or name of departure location

FORT WORTH, TX

9 Destination city or name of destination location

FORT WALTON BEACH, FL

10 Means of transportation

Commercial Airplane

11 Purpose of travel (including name of conference, seminar, or other event)

TO TAKE PHOTOGRAPHS FOR CAMPAIGN

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

AMERICAN AIRLINES

Contribution / Expenditure reported on:

- Schedule A2
 Schedule B
 Schedule B(J)
 Schedule C2
 Schedule D
 Schedule F1
 Schedule F2
 Schedule F4
 Schedule G
 Schedule H
 Schedule COH-UC
 Schedule B - SS

Dates of Travel

07/28/2016

07/28/2016

Name of person(s) traveling

ELLMAN, GLEN

Departure city or name of departure location

FORT WALTON BEACH, FL

Destination city or name of destination location

FORT WORTH, TX

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

TO TAKE PHOTOGRAPHS FOR CAMPAIGN

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

HAWTHORN SUITES BY WINDHAM SEVILLE OH

Contribution / Expenditure reported on:

- Schedule A2
 Schedule B
 Schedule B(J)
 Schedule C2
 Schedule D
 Schedule F1
 Schedule F2
 Schedule F4
 Schedule G
 Schedule H
 Schedule COH-UC
 Schedule B - SS

Dates of Travel

07/18/2016

07/20/2016

Name of person(s) traveling

PRICE, BETSY

Departure city or name of departure location

FORT WORTH, TX

Destination city or name of destination location

AKRON, OH

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

TO ATTEND THE REPUBLICAN NATIONAL CONVENTION

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
HAWTHORN SUITES BY WINDHAM SEVILLE OH

5 Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC Schedule B - SS

6 Dates of Travel 07/18/2016 07/20/2016	7 Name of person(s) traveling SKELPSA, ALIX
	8 Departure city or name of departure location FORT WORTH, TX
	9 Destination city or name of destination location AKRON, OH

10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) TO ATTEND REPUBLICAN NATIONAL CONVENTION
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
MON CHER TON TON

Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC Schedule B - SS

6 Dates of Travel 11/15/2016 11/15/2016	7 Name of person(s) traveling PRICE, BETSY
	8 Departure city or name of departure location FORT WORTH, TX
	9 Destination city or name of destination location NAGAOKA, JAPAN

10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) TO MEET WITH MAYOR OF SISTER CITY IN JAPAN
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Name of Contributor / Corporation or Labor Organization / Pledgor /Payee
MON CHER TON TON

Contribution / Expenditure reported on:
 Schedule A2 Schedule B Schedule B(J) Schedule C2 Schedule D Schedule F1
 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC Schedule B - SS

6 Dates of Travel 11/05/2016 11/14/2016	7 Name of person(s) traveling PRICE, BETSY
	8 Departure city or name of departure location FORT WORTH, TX
	9 Destination city or name of destination location CHINA

10 Means of transportation Commercial Airplane	11 Purpose of travel (including name of conference, seminar, or other event) TRAVEL WITH DFW AIRPORT BOARD FOR OFFICEHOLDER MEETINGS
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