GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers): 00085468

2 Total pages filed: 16

3 COMMITTEE NAME: West U Residents for Better Leadership

OFFICE USE ONLY

Date Received: ELECTRONICALLY FILED 04/24/2021

Date Hand-delivered or Date Postmarked:

Receipt # | Amount:

Date Processed:

Date Imaged:

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2429 Bissonnet St. #280

Houston, TX 77005

5 CAMPAIGN TREASURER NAME

MS / MRS / MR: Mr.

FIRST: Robert

MI:

NICKNAME:

LAST: Doty

SUFFIX:

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

2429 Bissonnet St. #280

Houston, TX 77005

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

2429 Bissonnet St. #280

Houston, TX 77005

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 302-7376

9 REPORT TYPE

☐ January 15

☐ July 15

☐ 30th day before election

☒ 8th day before election

☐ Runoff

☐ Dissolution (Attach PAC-DR)

☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month Day Year: 03/30/2021 THROUGH Month Day Year: 04/21/2021

11 ELECTION

ELECTION DATE: Month Day Year: 05/01/2021

ELECTION TYPE

☐ Primary ☐ Runoff ☐ Other

☒ General ☐ Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC
COVER SHEET PG 2

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
West U Residents for Better Leadership	00085468

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)		
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported: SUSAN SAMPLE WEST UNIVERSITY PLACE, TX MAYOR
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS		
	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 24,745.87
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	$ 17,787.80
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 19,929.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

16 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.

Mr. Robert Doty

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath | Printed name of officer administering oath | Title of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

12 COMMITTEE NAME	13 Filer ID (Ethics Commission Filers)
West U Residents for Better Leadership	00085468

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	MELANIE BELL WEST UNIVERSITY PLACE, TX COUNCILMEMBER
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	SHANNON CARROLL WEST UNIVERSITY PLACE, TX COUNCILMEMBER
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	JOHN MONTGOMERY WEST UNIVERSITY PLACE, TX COUNCILMEMBER
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
West U Residents for Better Leadership	00085468

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	KEVIN TRAUTNER WEST UNIVERSITY PLACE, TX COUNCILMEMBER
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	JOHN BARNES WEST UNIVERSITY PLACE, TX COUNCILMEMBER
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	LAURI LANKFORD WEST UNIVERSITY PLACE, TX COUNCILMEMBER
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC
ADDENDUM

12 COMMITTEE NAME	**13** Filer ID (Ethics Commission Filers)
West U Residents for Better Leadership	00085468

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	ED SOBASH WEST UNIVERSITY PLACE, TX COUNCILMEMBER
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		

SUBTOTALS - GPAC

FORM GPAC

COVER SHEET PG 3

17 COMMITTEE NAME	**18** Filer ID (Ethics Commission Filers)
West U Residents for Better Leadership	00085468

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	[X]	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	**$**	24,600.00
2.	[X]	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	**$**	145.87
3.	[ ]	SCHEDULE B: PLEDGED CONTRIBUTIONS	**$**	
4.	[ ]	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**	
5.	[ ]	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**	
6.	[ ]	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	**$**	
7.	[ ]	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	**$**	
8.	[ ]	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	**$**	
9.	[ ]	SCHEDULE E: LOANS	**$**	
10.	[X]	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**	4,670.80
11.	[X]	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	**$**	13,117.00
12.	[ ]	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	**$**	
13.	[ ]	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	**$**	
14.	[ ]	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	**$**	
15.	[ ]	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	**$**	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 1/2 Rpt: 7/16

2 FILER NAME: West U Residents for Better Leadership

3 Filer ID (Ethics Commission Filers): 00085468

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/05/2021	AXIOM STRATEGIES LLC	$10,000.00
	6 Contributor address; City; State; Zip Code: HOUSTON, TX 77027	

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

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/31/2021	CORRIGAN, ROBERT	$1,000.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77030	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
ATTORNEY	NORSE ROSE FULBRIGHT

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/31/2021	CRESPO, ADRIAN	$1,000.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
FINANCIAL ADVISOR	UBS FINANCIAL SERVICES

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/31/2021	GREENBURG, JOSEPH	$1,000.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
ATTORNEY	FELDMAN LAW FIRM

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/09/2021	MCCARTHY, JENNY	$5,000.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PRESIDENT	ALTA RESOURCES

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: Sch: 2/2 Rpt: 8/16

2 FILER NAME: West U Residents for Better Leadership

3 Filer ID (Ethics Commission Filers): 00085468

4 Date	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____)	**7** Amount of Contribution ($)
04/12/2021	MCLAMB, ROBERT	$1,000.00
	6 Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

8 Principal occupation / Job title (See Instructions)	**9** Employer (See Instructions)
DIRECTOR	ST AGNUS ACADEMY

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
04/14/2021	PELS, GERALD	$500.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PARTNER	LOCKE LORD

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/31/2021	VU, STACEY	$100.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
COUNSEL	VINSON AND ELKINS

Date	Full name of contributor ☐ out-of-state PAC (ID#:_____)	Amount of Contribution ($)
03/31/2021	WALLER, JAMES	$5,000.00
	Contributor address; City; State; Zip Code: HOUSTON, TX 77005	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
PARTNER	HUNTON ANDREWS KURTH LLP

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: Sch: 1/1 Rpt: 9/16

2 FILER NAME: West U Residents for Better Leadership

3 Filer ID (Ethics Commission Filers): 00085468

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS — **$**

5 Date: 04/13/2021

6 Full name of contributor: THOMPSON, GREGG ☐ out-of-state PAC (ID#:_____)

7 Contributor address; City; State; Zip Code: HOUSTON, TX 77005

8 Amount of contribution ($): $145.87

9 In-kind contribution description: MAILBOX RENTAL

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions): SELF-EMPLOYED

11 Employer (FOR NON-JUDICIAL) (See instructions): THOMPSON + HANSON

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Credit Card Payment
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 10/16	West U Residents for Better Leadership	00085468

4 Date: 04/21/2021

5 Payee name: ANEDOT, INC.

6 Amount ($): $185.80

☐ Expenditure from corporate funds

7 Payee address; City; State; Zip Code:
1340 POYDRAS ST
STE. 1770
NEW ORLEANS, LA 70112

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Solicitation/Fundraising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
CREDIT CARD PROCESSING FEES

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name | Office sought | Office held

---

Date: 04/07/2021

Payee name: AXIOM STRATEGIES LLC

Amount ($): $4,285.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code:
3200 SOUTHWEST FREEWAY
STE. 1230
HOUSTON, TX 77027

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
INDEPENDENT EXPENDITURE MAILERS

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name: SAMPLE, SUSAN | Office sought: CITY OF WEST UNIVERSITY | Office held:

Date:

Payee name: (see previous)

Amount ($):

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code:

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule):

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name: BELL, MELANIE | Office sought: CITY OF WEST UNIVERSITY | 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 11/16	West U Residents for Better Leadership	00085468

4 Date

5 Payee name
(see previous)

6 Amount ($)

☐ Expenditure from corporate funds

7 Payee address; City; State; Zip Code

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name: CARROLL, SHANNON
Office sought: CITY OF WEST UNIVERSITY
Office held:

Date

Payee name
(see previous)

Amount ($)

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name: MONTGOMERY, JOHN
Office sought: CITY OF WEST UNIVERSITY
Office held:

Date
04/07/2021

Payee name
WEST UNIVERSITY TRI-SPORTS ASSOCIATION

Amount ($)
$200.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code
PO BOX 272012

HOUSTON, TX 77277

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Advertising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
MAILING LIST RENTAL

Complete ONLY if direct expenditure to benefit C/OH

Candidate/Officeholder name:
Office sought:
Office held:

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/5 Rpt: 12/16	West U Residents for Better Leadership	00085468

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	$

5 Date	6 Payee name
04/20/2021	AXIOM STRATEGIES LLC

7 Amount ($)	8 Payee address; City; State; Zip Code
$5,332.00 ☐ Expenditure from corporate funds	3200 SOUTHWEST FREEWAY STE. 1230 HOUSTON, TX 77027

9 TYPE OF EXPENDITURE	☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Advertising Expense	☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense INDEPENDENT EXPENDITURE MAILERS

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	SAMPLE, SUSAN	CITY OF WEST UNIVERSITY	

Date	Payee name
	(see previous)

Amount ($)	Payee address; City; State; Zip Code
☐ Expenditure from corporate funds	

TYPE OF EXPENDITURE	☐ Political ☐ Non-Political

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
		☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	MONTGOMERY, JOHN	CITY OF WEST UNIVERSITY	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 2/5 Rpt: 13/16	**2** FILER NAME West U Residents for Better Leadership	**3** Filer ID (Ethics Commission Filers) 00085468
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		**$**

5 Date	**6** Payee name (see previous)	
7 Amount ($) ☐ Expenditure from corporate funds	**8** Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	CARROLL, SHANNON	CITY OF WEST UNIVERSITY	

Date	Payee name (see previous)	
Amount ($) ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	BELL, MELANIE	CITY OF WEST UNIVERSITY	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/5 Rpt: 14/16	West U Residents for Better Leadership	00085468

4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS — **$**

5 Date: 04/14/2021

6 Payee name: AXIOM STRATEGIES LLC

7 Amount ($): $4,285.00

☐ Expenditure from corporate funds

8 Payee address; City; State; Zip Code:
3200 SOUTHWEST FREEWAY
STE. 1230
HOUSTON, TX 77027

9 TYPE OF EXPENDITURE

☒ Political ☐ Non-Political

10 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
INDEPENDENT EXPENDITURE MAILERS

11 Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name — Office sought — Office held

---

Date: 04/14/2021

Payee name: AXIOM STRATEGIES LLC

Amount ($): $3,500.00

☐ Expenditure from corporate funds

Payee address; City; State; Zip Code:
3200 SOUTHWEST FREEWAY
STE. 1230
HOUSTON, TX 77027

TYPE OF EXPENDITURE

☒ Political ☐ Non-Political

PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule): Advertising Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
INDEPENDENT EXPENDITURE DIGITAL ADVERITISING

Complete ONLY if direct expenditure to benefit C/OH — Candidate/Officeholder name: SAMPLE, SUSAN — Office sought: CITY OF WEST UNIVERSITY — Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 4/5 Rpt: 15/16	**2** FILER NAME West U Residents for Better Leadership	**3** Filer ID (Ethics Commission Filers) 00085468
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		**$**

5 Date	**6** Payee name (see previous)	
7 Amount ($) ☐ Expenditure from corporate funds	**8** Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
10 PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	MONTGOMERY, JOHN	CITY OF WEST UNIVERSITY	

Date	Payee name (see previous)	
Amount ($) ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code	
TYPE OF EXPENDITURE	☐ Political ☐ Non-Political	
PURPOSE OF EXPENDITURE	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	CARROLL, SHANNON	CITY OF WEST UNIVERSITY	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee
Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 5/5 Rpt: 16/16	**2** FILER NAME West U Residents for Better Leadership	**3** Filer ID (Ethics Commission Filers) 00085468
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		**$**
5 Date	**6** Payee name (see previous)	
7 Amount ($) ☐ Expenditure from corporate funds	**8** Payee address; City; State; Zip Code	
9 **TYPE OF EXPENDITURE**	☐ Political ☐ Non-Political	
10 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule)	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	BELL, MELANIE	CITY OF WEST UNIVERSITY	