



Official Filing Authority of Harris County
Isabel Longoria
Elections Administrator

Campaign Finance Report



Elections Administrator
Harris County, TX

FileNo: 2022180
Received By Clerk: 01/20/2022
File Date: January 18, 2022
Office: Specific-Purpose Committee
Candidate: Friends of Chris Daniel
Treasurer: Edwards, Bobby
Category: Specific-Purpose Committee CFR (SPAC)
Delivered By: U.S. Mail
Type: COR

Harris County No Fee

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <div style="text-align: center; font-size: 2em;">7</div>
3 COMMITTEE NAME Friends of Chris Daniel		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE P.O. BOX 41622, Houston, TX, 77241		Date Received Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Bobby "Mikki" Edwards NICKNAME LAST SUFFIX	Receipt # Amount \$	Date Processed Date Imaged
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE), APT / SUITE #, CITY, STATE, ZIP CODE 10201 Buffalo Speedway #5115 Houston, TX, 77054		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE P.O. Box 41622, Houston, TX, 77241		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 308-0536		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year Month Day Year 07 / 01 / 2021 THROUGH 12 / 31 / 2021		
11 ELECTION	ELECTION DATE Month Day Year 03 / 01 / 2022	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

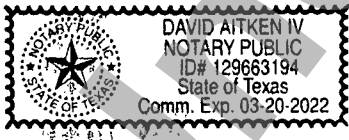
12 COMMITTEE NAME Friends of Chris Daniel		13 Filer ID (Ethics Commission Filers)
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER <input type="checkbox"/> MEASURE	CANDIDATE / OFFICEHOLDER NAME Chris Daniel OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Harris County <i>District Clerk</i>
		BALLOT IDENTIFICATION / #
		ELECTION DATE Month / Day / Year
		DESCRIPTION

15 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 11,875.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,393.18
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,264.00
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25,000.00

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.

Bobbie B Edwards
Signature of Campaign Treasurer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Bobbie EDWARDS, this the 14th day of January, 2022, to certify which, witness my hand and seal of office.

David Aitken IV
Signature of officer administering oath

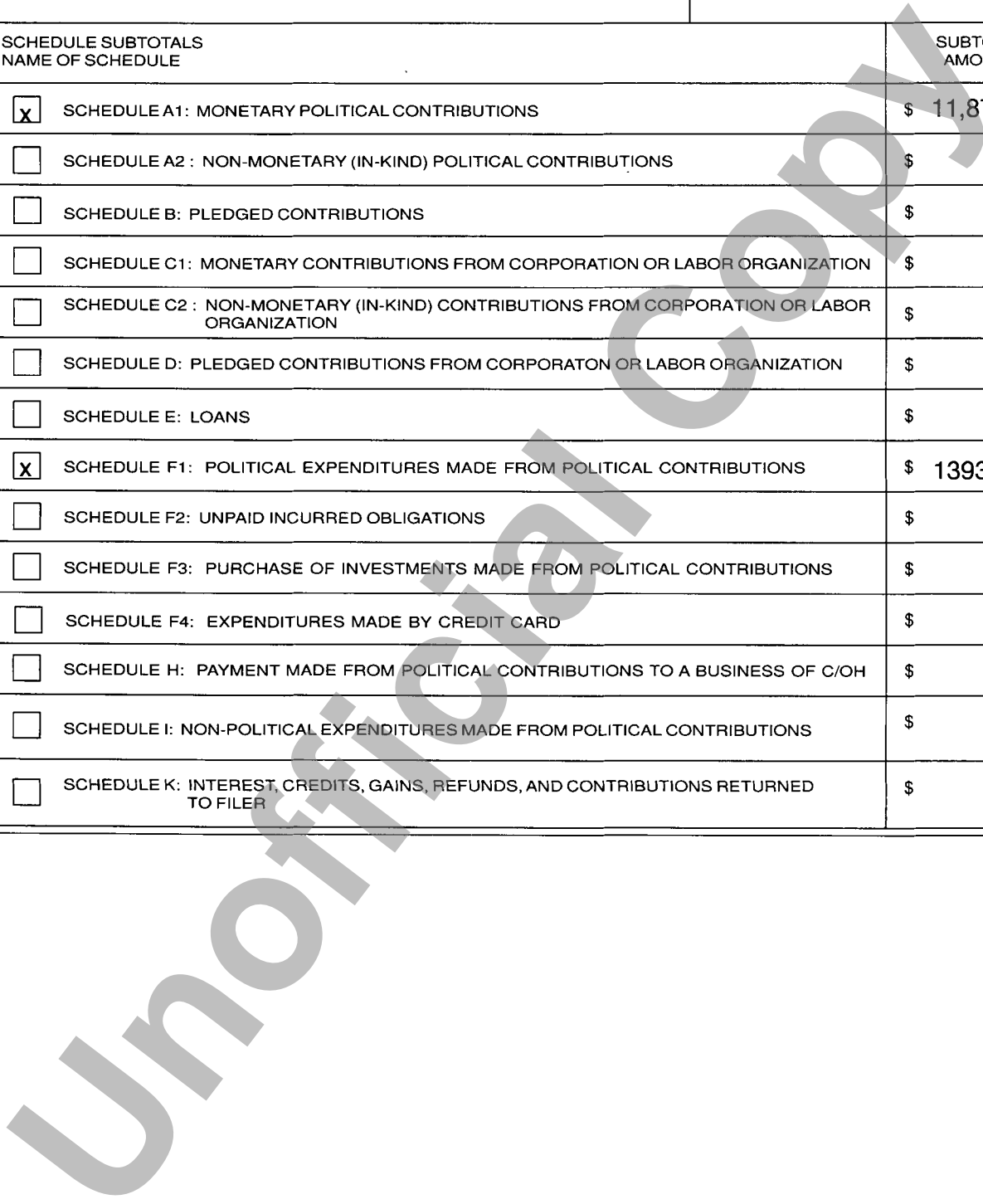
DAVID AITKEN IV
Printed name of officer administering oath

NOTARY PUBLIC
Title of officer administering oath

SUBTOTALS - SPAC

**FORM SPAC
COVER SHEET PG 3**

17 COMMITTEE NAME		18 Filer ID (Ethics Commission Filers)
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 11,875.00
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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1393.18
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$



MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1.
1 of 3

2 FILER NAME
Friends of Chris Daniel

3 Filer ID (Ethics Commission Filers)

4 Date
11/18/21

5 Full name of contributor out-of-state PAC (ID# _____)
Chris Daniel

6 Contributor address; City; State; Zip Code
8134 Caroline Ridge Dr Humble TX 77396

7 Amount of contribution (\$)
25.00

8 Principal occupation / Job title (See Instructions)
Attorney

9 Employer (See Instructions)
Self

Date

Full name of contributor out-of-state PAC (ID# _____)
Kristen Cobb

Contributor address; City; State; Zip Code
7942 Wooded Way Dr Spring TX 77389

Amount of contribution (\$)

12/17/21

500.00

Principal occupation / Job title (See Instructions)
Business Owner

Employer (See Instructions)
Self

Date

Full name of contributor out-of-state PAC (ID# _____)
Holly Frost

Contributor address; City; State; Zip Code
602 Pinehaven Houston TX 77024

Amount of contribution (\$)

12/17/21

5000.00

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
retired

Date

Full name of contributor out-of-state PAC (ID# _____)
Marliese Stripling

Contributor address; City; State; Zip Code
1355 Apache Dr Montgomery TX 77316

Amount of contribution (\$)

12/17/21

1000.00

Principal occupation / Job title (See Instructions)
business owner

Employer (See Instructions)
self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 2 of 3
2 FILER NAME Friends of Chris Daniel		3 Filer ID (Ethics Commission Filers)
4 Date 12/17/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charlotte Lampe	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 12807 Haynes RD, Bldg H Houston TX 77066		
8 Principal occupation / Job title (See Instructions) Business Owner		9 Employer (See Instructions) Self
Date 12/17/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friends of Kevin Roberts	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 8919 Leaning Hollow Ln Spring TX 77379		
Principal occupation / Job title (See Instructions) N/A (SPAC)		Employer (See Instructions) N/A
Date 12/17/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Lanier	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 13706 Falba Houston TX 77070		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Lanier Law Firm
Date 12/17/21	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoover Slovacek LLP	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 5051 Westheimer, STE 1200, Houston TX 77210		
Principal occupation / Job title (See Instructions) Firm PAC		Employer (See Instructions) N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 3

2 FILER NAME
Friends of Chris Daniel

3 Filer ID (Ethics Commission Filers)

4 Date
12/28/21

5 Full name of contributor out-of-state PAC (ID# _____)
Paul Coselli

6 Contributor address; City; State; Zip Code
5311 Huisache Street BELLAIRE TX 77401

7 Amount of contribution (\$)
1000.00

8 Principal occupation / Job title (See Instructions)
attorney

9 Employer (See Instructions)
self

Date
12/30/21

Full name of contributor out-of-state PAC (ID# _____)
Rhonda Walls Kirby

Contributor address; City; State; Zip Code
707 Salerno Street Sugar Land TX 77478

Amount of contribution (\$)
1000.00

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
retired

Date
12/30/21

Full name of contributor out-of-state PAC (ID# _____)
Mark Thiessen

Contributor address; City; State; Zip Code
733 East 12th 1/2 Street Houston TX 77008

Amount of contribution (\$)
1000.00

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
The Thiessen Law Firm

Date
12/31/21

Full name of contributor out-of-state PAC (ID# _____)
Jason Fuller

Contributor address; City; State; Zip Code
1700 Main street, Unit 2B Houston TX 77002

Amount of contribution (\$)
100.00

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 1	2 FILER NAME Friends of Chris Daniel	3 Filer ID (Ethics Commission Filers)
4 Date 11-22-21	5 Payee name Harris County Republican Party	
6 Amount (\$) 1,250.00	7 Payee address; City; State; Zip Code 8588 Katy Freeway, Suite 445 Houston TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Filing Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 12-31-21	Payee name Anedot	
Amount (\$) 143.18	Payee address, City; State; Zip Code 1340 Poydras St., Suite 1770 New Orleans LA 70112	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Online Donation processing fees
	<input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address, City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas Complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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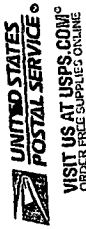
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HARRIS COUNTY, TEXAS

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