

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 LEE, SHEILA JACKSON

ADDRESS (number and street) 4412 Alameda Road Houston TX 77004 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00287904 3. IS THIS REPORT NEW (N) OR AMENDED (A) TX 18

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
[X] October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 07/01/2014 through 09/30/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gerald Womack

Signature of Treasurer Gerald Womack

[Electronically Filed]

Date

MM/DD/YYYY 10/05/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 8 columns and 1 row for Office Use Only.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**LEE, SHEILA JACKSON**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	93175.00	340015.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	93175.00	340015.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	25804.73	124054.48
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	25804.73	124054.48
8. Cash on Hand at Close of Reporting Period (from Line 27).....	301323.60	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**LEE, SHEILA JACKSON**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 09 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	58500.00	196400.00
(ii) Unitemized.....	675.00	5115.00
(iii) TOTAL of contributions from individuals ▶	59175.00	201515.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	34000.00	138500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	93175.00	340015.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....		
	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	500.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶		
	93175.00	340515.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	25804.73	124054.48
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	11510.00	85537.97
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	37314.73	209592.45

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	245463.33
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	93175.00
25. SUBTOTAL (add Line 23 and Line 24).....	338638.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	37314.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	301323.60

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Farida Abdullah**

Mailing Address 5415 Cranston Court

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self employed Business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21464**

Amount of Each Receipt this Period  
 Contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Anwar Ahmed**

Mailing Address 42 Harbor View Dr.

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self employed Physican

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21447**

Amount of Each Receipt this Period  
 Contribution 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Saeeda Aijaz**

Mailing Address 110 Chandler Court

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Spring Research Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21483**

Amount of Each Receipt this Period  
 Contribution 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>S. Javaid Anwar</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 8703 Iris Arbor Lane		<b>Transaction ID : SA11AI.21435</b>	
City Houston	State TX	Zip Code 77095	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Self employed	Occupation business owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>Tariq Aziz</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 2525 Calder Ave.		<b>Transaction ID : SA11AI.21504</b>	
City Beaumont	State TX	Zip Code 77706	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Setma	Occupation Business Partner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>Taseer Badar</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 4265 San Felipe #1100		<b>Transaction ID : SA11AI.21497</b>	
City Houston	State TX	Zip Code 77027	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer ZT Global Investment	Occupation Investment Banker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7800.00
<b>TOTAL</b> This Period (last page this line number only).....	7800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Nawab Baloch**

Mailing Address 2006 Wineberry Dr.

City Katy	State TX	Zip Code 77450
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Retail business owner
-----------------------------------	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21466**

Amount of Each Receipt this Period  
 Contribution 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Ghulam Bombaywala**

Mailing Address 11 Greenlaw St

City Sugar Land	State TX	Zip Code 77479
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FEC ID number of contributing federal political committee. **C**

Name of Employer Michelangelo's Restaurant	Occupation Business owner
---	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21457**

Amount of Each Receipt this Period  
 Contribution 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Marshall Brachman**

Mailing Address 634 A St. N.E.

City Washington	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed	Occupation Lobbyist
-----------------------------------	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11AI.21617**

Amount of Each Receipt this Period  
 Contribution 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Sajjad Burki**

Mailing Address 32 Glen Loch Ct.

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Retail shop owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21458**

Amount of Each Receipt this Period  
Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Syed Gardezi**

Mailing Address 1726 Peppervine

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Retail business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21477**

Amount of Each Receipt this Period  
Contribution 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Omar Ilahi**

Mailing Address 8660 Memorial Drive

City State Zip Code  
Houston TX 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Health provider

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21470**

Amount of Each Receipt this Period  
Contribution 500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Arif Iqbal**

Mailing Address 2315 Woodsatream Blvd

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Business owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21452**

Amount of Each Receipt this Period  
2500.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Abdullah Jafari**

Mailing Address 3611 Carnegie St.

City State Zip Code  
Houston TX 77005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self employed Retail shop owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21474**

Amount of Each Receipt this Period  
500.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
**M. Sahid Javed**

Mailing Address 2280 Avalon

City State Zip Code  
Beaumont TX 77707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shanai Restaurant Business partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21508**

Amount of Each Receipt this Period  
2600.00  
In-kind - Food and beverage for event

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Muhammed T. Javed**

Mailing Address 2295 Avalon

City State Zip Code  
Beaumont TX 77707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Starco Import Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21510**

Amount of Each Receipt this Period  
2600.00

In-kind - Food and decoration to Shahnai Restaurant

**B.** Full Name (Last, First, Middle Initial)  
**Rubina Javed**

Mailing Address 2280 Avalon

City State Zip Code  
Beaumont TX 77707

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Shahnai Restaurant Restaurant partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21506**

Amount of Each Receipt this Period  
1500.00

In-kind - Entertainment for gathering

**C.** Full Name (Last, First, Middle Initial)  
**Amin Karim**

Mailing Address 6445 Belmont St.

City State Zip Code  
Houston TX 77005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Physican

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21485**

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 41  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Attiya S. Khan**

Mailing Address 1201 Wilding Lane

City State Zip Code  
Houston TX 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Employed Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21482**

Amount of Each Receipt this Period  
 500.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Nasreen T. Khan**

Mailing Address 4610 Sylvan Glen Dr,

City State Zip Code  
Houston TX 77084

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Zaba Search Marketing executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21520**

Amount of Each Receipt this Period  
 2600.00  
 In-kind - payment on full page color ad

**C.** Full Name (Last, First, Middle Initial)  
**Tariq N. Khan**

Mailing Address 1301 Pennsylvania Aver.

City State Zip Code  
Ft. Worth TX 76104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Texas Health Resources Physican

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21518**

Amount of Each Receipt this Period  
 2600.00  
 In-kind - Payment on 2 full page ad

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5700.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Sultan Mahmood**

Mailing Address 8310 Cheshire Vale

City Houston State TX Zip Code 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Business owner Occupation retail shop

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21498**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Sabeen Malook**

Mailing Address 2215 Laurel Birch Dr.

City Houston State TX Zip Code 77014

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Physican

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21450**

Amount of Each Receipt this Period  
 2600.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Mustaq Maredia**

Mailing Address P.O. Box 1679

City Sugar Land State TX Zip Code 77487

FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed Occupation Physican

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21437**

Amount of Each Receipt this Period  
 2600.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6200.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Baig Mohammed</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 2372 Bering Dr.		<b>Transaction ID : SA11AI.21500</b>	
City Houston	State TX	Zip Code 77057	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self employed	Occupation Marketing executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Aflab Mujiaba</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 2215Laurel Birch Dr.		<b>Transaction ID : SA11AI.21445</b>	
City Houston	State TX	Zip Code 77014	Amount of Each Receipt this Period Contribution 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Business owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>C. Dawood Nasir</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 3200 Vernillion Dr.		<b>Transaction ID : SA11AI.21454</b>	
City Plano	State TX	Zip Code 75093	Amount of Each Receipt this Period Contribution 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self employed	Occupation Physician		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4600.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Anwar I. Qadeer**

Mailing Address 2822 S Bartell

City Houston State TX Zip Code 77054

FEC ID number of contributing federal political committee. **C**

Name of Employer Anwar Qadeer & Associates Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21443**

Amount of Each Receipt this Period  
 2600.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**Asaf Qadeer**

Mailing Address 8660 Memorial Drive

City Houston State TX Zip Code 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Baylor College of Medicine Occupation physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21441**

Amount of Each Receipt this Period  
 2600.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**Tahseen Qadeer**

Mailing Address 8660 Memorial Dr.

City Houston State TX Zip Code 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21442**

Amount of Each Receipt this Period  
 2600.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Shahed Rashid</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2014	
Mailing Address 112 Canary Ave.		<b>Transaction ID : SA11AI.21480</b>	
City McAllen	State TX	Zip Code 78504	Amount of Each Receipt this Period Contribution 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer South Texas Clinic	Occupation Medical doctor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. Asif Rehman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2014	
Mailing Address 225 Route 106		<b>Transaction ID : SA11AI.21487</b>	
City Muttontown	State NY	Zip Code 11753	Amount of Each Receipt this Period Contribution 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Self employed	Occupation Medical doctor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>C. Iqbal Shaikh</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 18 / 2014	
Mailing Address 10817 Amblerwood Way		<b>Transaction ID : SA11AI.21472</b>	
City Austi	State TX	Zip Code 78753	Amount of Each Receipt this Period Contribution 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Cybertex	Occupation President and CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Muhammad Shaikh**

Mailing Address 11327 Bissonnet Street

City State Zip Code  
Houston TX 77099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21503**

Amount of Each Receipt this Period  
2600.00  
In-kind - Food and beverage for event

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Yaqoob Shaikh**

Mailing Address 11327 Bissonnet St.

City State Zip Code  
Houston TX 77099

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Doctor Express Urgent Care Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21522**

Amount of Each Receipt this Period  
2600.00  
Catering to Shahnai Restaurant

**C.** Full Name (Last, First, Middle Initial)  
**Dominic Sreshta**

Mailing Address 26 Berenger Place

City State Zip Code  
Sugar Land TX 77479

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self employed Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2014

**Transaction ID : SA11AI.21462**

Amount of Each Receipt this Period  
1000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6200.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**Osman Swati**

Mailing Address 8146 9th Street

City Port Arthur State TX Zip Code 77642

FEC ID number of contributing federal political committee. **C**

Name of Employer Self employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21491**

Amount of Each Receipt this Period  
 Contribution 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Shugat Swati**

Mailing Address 7910 Greenhill Drive

City Port Arthur State TX Zip Code 77642

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21489**

Amount of Each Receipt this Period  
 Contribution 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mustafa Tameez**

Mailing Address 909 Texas St. Suite 1218

City Houston State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C**

Name of Employer Outreach Strategists, LLC Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 18 / 2014

**Transaction ID : SA11AI.21456**

Amount of Each Receipt this Period  
 Contribution 1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 41
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Arshad Umer</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 10911 Wildcat Bridge Ln.		<b>Transaction ID : SA11AI.21460</b>	
City State Zip Code Sugar Land TX 77498	Amount of Each Receipt this Period Contribution 1000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation MediStop Clinic Medical doctor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Gwen Williams</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address P.O. Box 5482		<b>Transaction ID : SA11AI.21468</b>	
City State Zip Code Kingwood TX 77325	Amount of Each Receipt this Period Contribution 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation self employed account executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 500.00		

Full Name (Last, First, Middle Initial) <b>C. Jeanne Patrice Willoughby</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 7503 Calderon Court Unit J		<b>Transaction ID : SA11AI.21615</b>	
City State Zip Code Alexandria VA 22306	Amount of Each Receipt this Period Contribution 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Heather Podesta Partners Lawyer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	58500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 41  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 Massachusetts Ave. NW  
8th Floor

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00035451**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2014

**Transaction ID : SA11C.21534**

Amount of Each Receipt this Period  
 4000.00  
 contribution

**B.** Full Name (Last, First, Middle Initial)  
**AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTION COMMITTEE**

Mailing Address 80 F STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00009936**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2014

**Transaction ID : SA11C.21561**

Amount of Each Receipt this Period  
 1500.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 25 MASSACHUSETTS AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2014

**Transaction ID : SA11C.21535**

Amount of Each Receipt this Period  
 2000.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 501 WESTLAKE PARK BLVD

City HOUSTON State TX Zip Code 77079

FEC ID number of contributing federal political committee. **C** C00060103

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11C.21580**

Amount of Each Receipt this Period  
 Contribution 3000.00

**B.** Full Name (Last, First, Middle Initial)  
**BROTHERHOOD OF LOCOMOTIVE ENGINEERS AND TRAINMEN PAC FUND**

Mailing Address 1370 Ontario St

City Cleveland State OH Zip Code 44113

FEC ID number of contributing federal political committee. **C** C00099234

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2014

**Transaction ID : SA11C.21583**

Amount of Each Receipt this Period  
 Contribution 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION**

Mailing Address 6001 Bollinger Canyon Road  
Building A2114

City San Ramon State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11C.21613**

Amount of Each Receipt this Period  
 Contribution 3000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>ENPAC - Federal</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2014	
Mailing Address 101 CONSTITUTION AVE. NW Suite 200 East		<b>Transaction ID : SA11C.21609</b>	
City Washington State DC Zip Code 20001	Amount of Each Receipt this Period Contribution 1000.00		
FEC ID number of contributing federal political committee. <b>C C00363879</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 1000.00		

Full Name (Last, First, Middle Initial) <b>GOOGLE INC. NETPAC</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2014	
Mailing Address 1101 NEW YORK AVE NW SECOND FLOOR		<b>Transaction ID : SA11C.21626</b>	
City WASHINGTON State DC Zip Code 20005	Amount of Each Receipt this Period Contribution 2000.00		
FEC ID number of contributing federal political committee. <b>C C00428623</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 2000.00		

Full Name (Last, First, Middle Initial) <b>MIDWEST REGION LABORERS' POLITICAL LEAGUE</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2014	
Mailing Address 117 SOUTH FIFTH STREET SUITE 720		<b>Transaction ID : SA11C.21562</b>	
City SPRINGFIELD State IL Zip Code 62701	Amount of Each Receipt this Period Contribution 5000.00		
FEC ID number of contributing federal political committee. <b>C C00342907</b>	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date Contribution 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C70002563

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 22 / 2014

**Transaction ID : SA11C.21582**

Amount of Each Receipt this Period  
 3000.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL ASSOCIATION OF REALTORS**

Mailing Address 430 N MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C70002563

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11C.21578**

Amount of Each Receipt this Period  
 1000.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
**NOBLE ENERGY INC POLITICAL ACTION COMMITTEE**

Mailing Address 100 GLENBOROUGH DRIVE SUITE 100

City HOUSTON State TX Zip Code 77067

FEC ID number of contributing federal political committee. **C** C00479873

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11C.21624**

Amount of Each Receipt this Period  
 1000.00  
 contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 23 OF 41

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial)  
 PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

**A.** Mailing Address 2600 SOUTH RIVER ROAD

City State Zip Code  
 DES PLAINES IL 60018

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11C.21612**

Amount of Each Receipt this Period  
 Contribution 1000.00

Full Name (Last, First, Middle Initial)  
 SEAFARERS POLITICAL ACTIVITY DONATION-SEAFARERS INTERNATIONAL UNION OF N.A.-AGLIWD/NMU

**B.** Mailing Address 5201 Auth Way

City State Zip Code  
 Camp Springs MD 20746

FEC ID number of contributing federal political committee. **C** C00004325

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11C.21625**

Amount of Each Receipt this Period  
 Contribution 1000.00

Full Name (Last, First, Middle Initial)  
**SOUTHWEST AIRLINES CO. FREEDOM FUND**

**C.** Mailing Address P O BOX 36611, HDQ 4GA

City State Zip Code  
 DALLAS TX 75235

FEC ID number of contributing federal political committee. **C** C00341602

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2014

**Transaction ID : SA11C.21610**

Amount of Each Receipt this Period  
 Contribution 2000.00

**SUBTOTAL** of Receipts This Page (optional).....

4000.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 41
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

**A.** Full Name (Last, First, Middle Initial)  
**TREASURY EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address 1750 H Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2014

**Transaction ID : SA11C.21581**

Amount of Each Receipt this Period  
 Contribution 1000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

34000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. A-Rocket Moving &amp; Storage, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2014
Mailing Address 3401 Corder Street		Amount of Each Disbursement this Period 38.13 <b>Transaction ID : SB17.21555</b>
City Houston State TX Zip Code 77021	Purpose of Disbursement Storage space rental	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. A-Rocket Moving &amp; Storage, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2014
Mailing Address 3401 Corder Street		Amount of Each Disbursement this Period 38.13 <b>Transaction ID : SB17.21542</b>
City Houston State TX Zip Code 77021	Purpose of Disbursement Storage space rental	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. A-Rocket Moving &amp; Storage, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 3401 Corder Street		Amount of Each Disbursement this Period 38.13 <b>Transaction ID : SB17.21527</b>
City Houston State TX Zip Code 77021	Purpose of Disbursement Storage space rental	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. At &amp; T</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address P.O. Box 16730		Amount of Each Disbursement this Period 142.36 <b>Transaction ID : SB17.21556</b>
City Mesa	State AZ	
Zip Code 85211	Purpose of Disbursement Phone bill	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. At &amp; T</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014
Mailing Address P.O. Box 16730		Amount of Each Disbursement this Period 152.89 <b>Transaction ID : SB17.21543</b>
City Mesa	State AZ	
Zip Code 85211	Purpose of Disbursement Phone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. At &amp; T</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014
Mailing Address P.O. Box 16730		Amount of Each Disbursement this Period 156.36 <b>Transaction ID : SB17.21586</b>
City Mesa	State AZ	
Zip Code 85211	Purpose of Disbursement Phone bill	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	451.61
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Tariq Aziz</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 2525 Calder Ave.		Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : SB17.21516</b>
City Beaumont	State TX	
Zip Code 77706	Purpose of Disbursement In-kind - Food and Beverage for event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Danielle Bess</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 3244 Wentworth Street		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.21547</b>
City Houston	State TX	
Zip Code 77004	Purpose of Disbursement Process payables	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Danielle Bess</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 3244 Wentworth Street		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.21528</b>
City Houston	State TX	
Zip Code 77004	Purpose of Disbursement Process payables	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3400.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Danielle Bess</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3244 Wentworth Street		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.21604</b>
City Houston	State TX Zip Code 77004	
Purpose of Disbursement Process payables for campaign committee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CBC Institute</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 413 New Jewrsey Ave. SW		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : SB17.21622</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Space rental for event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ipayment, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address P.O. Box 3429		Amount of Each Disbursement this Period 104.90 <b>Transaction ID : SB17.21565</b>
City Thousand Oaks	State CA Zip Code 91359	
Purpose of Disbursement Online contribution processing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1204.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Ipayment, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address P.O. Box 3429		Amount of Each Disbursement this Period 104.90 <b>Transaction ID : SB17.21566</b>
City Thousand Oaks	State CA	
Zip Code 91359	Purpose of Disbursement Online contribution processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ipayment, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address P.O. Box 3429		Amount of Each Disbursement this Period 104.90 <b>Transaction ID : SB17.21587</b>
City Thousand Oaks	State CA	
Zip Code 91359	Purpose of Disbursement On line contribution processing monthly charges	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. M. Sahid Javed</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 2280 Avalon		Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : SB17.21514</b>
City Beaumont	State TX	
Zip Code 77707	Purpose of Disbursement In-kind - Food and beverage for event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2809.80
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Muhammed T. Javed</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 2295 Avalon		Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : SB17.21513</b>
City Beaumont	State TX	
Zip Code 77707	Purpose of Disbursement In-kind - Food and decoration to Shahnai Restaurant	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Rubina Javed</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 2280 Avalon		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17.21515</b>
City Beaumont	State TX	
Zip Code 77707	Purpose of Disbursement In-kind - Entertainment for gathering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jewish Herald Voice</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address P O Box 153		Amount of Each Disbursement this Period 490.00 <b>Transaction ID : SB17.21532</b>
City Houston	State TX	
Zip Code 77001	Purpose of Disbursement Advertisement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4590.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 41			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Clariiece Johnson-Dooley</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 12014 Chessington Dr.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.21546</b>
City Houston State TX Zip Code 77031	Purpose of Disbursement Process contribution received and issue thank you letter	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Clariiece Johnson-Dooley</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2014
Mailing Address 12014 Chessington Dr.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.21530</b>
City Houston State TX Zip Code 77031	Purpose of Disbursement Process contribution received and issue thank you letters.	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Clariiece Johnson-Dooley</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 12014 Chessington Dr.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.21605</b>
City Houston State TX Zip Code 77031	Purpose of Disbursement Process contribution received and issue thank you letters update contributors data base	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Nasreen T. Khan</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 4610 Sylvan Glen Dr,			Amount of Each Disbursement this Period 2600.00	
City Houston	State TX	Zip Code 77084	Transaction ID : SB17.21525	
Purpose of Disbursement In-kind - payment on full page color ad		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tariq N. Khan</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014	
Mailing Address 1301 Pennsylvania Aver.			Amount of Each Disbursement this Period 2600.00	
City Ft. Worth	State TX	Zip Code 76104	Transaction ID : SB17.21526	
Purpose of Disbursement In-kind - Payment on 2 full page ad		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Miranda Lee</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 2601 Augusta Dr.			Amount of Each Disbursement this Period 1000.00	
City Houston	State TX	Zip Code 77057	Transaction ID : SB17.21554	
Purpose of Disbursement Campaign account maintenance and file FEC report		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Miranda Lee</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 2601 Augusta Dr.		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.21545</b>
City Houston State TX Zip Code 77057	Purpose of Disbursement data entry for FEC report, campaign account maintenance	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Miranda Lee</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 2601 Augusta Dr.		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : SB17.21606</b>
City Houston State TX Zip Code 77057	Purpose of Disbursement Account maintenance and prepare FEC report	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.21548</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Building access fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1610.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 41		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 290.63 <b>Transaction ID : SB17.21560</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Banquet expense	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2014
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.21564</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Building Accessment	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. National Democratic Club</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : SB17.21588</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Building assessment fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	310.63
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 41		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Muhammad Shaikh</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 11327 Bissonnet Street		Amount of Each Disbursement this Period 2600.00 <b>Transaction ID : SB17.21517</b>
City Houston	State TX Zip Code 77099	
Purpose of Disbursement In-kind - Food and beverage for event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address P.O. Box 773600		Amount of Each Disbursement this Period 177.74 <b>Transaction ID : SB17.21549</b>
City Houston	State TX Zip Code 77215	
Purpose of Disbursement Cellular phone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address P.O. Box 773600		Amount of Each Disbursement this Period 177.70 <b>Transaction ID : SB17.21531</b>
City Houston	State TX Zip Code 77215	
Purpose of Disbursement Cellular phone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2955.44
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 41	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2014	
Mailing Address P.O. Box 773600			Amount of Each Disbursement this Period 177.70	
City Houston	State TX	Zip Code 77215	Transaction ID : SB17.21585	
Purpose of Disbursement Cellular phone bill		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Bronson E. Woods</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014	
Mailing Address 3435 Westheimer Suite 208			Amount of Each Disbursement this Period 219.76	
City Houston	State TX	Zip Code 77027	Transaction ID : SB17.21550	
Purpose of Disbursement Reimbursement for event supplies		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	397.46
<b>TOTAL</b> This Period (last page this line number only).....	25244.23

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 41	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. A-Rocket Moving &amp; Storage, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 3401 Corder Street		Amount of Each Disbursement this Period 510.00 <b>Transaction ID : SB21.21537</b>
City Houston	State TX Zip Code 77021	
Purpose of Disbursement Charity to deceased - Tony Morris rental on storage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HARRIS COUNTY DEMOCRATIC PARTY</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 1445 N.Loop W. Ste 110		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : SB21.21608</b>
City Houston	State TX Zip Code 77008	
Purpose of Disbursement Sponsorship of annual dinner		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Houston Area Urban League</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 1301 Texas Ave.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB21.21568</b>
City Houston	State TX Zip Code 77002	
Purpose of Disbursement Sponsorship		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4510.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 41			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Jazz Education Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address P.O. Box 8031		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : SB21.21552</b>
City Houston	State TX	
Zip Code 77288	Purpose of Disbursement Scholarship sponsor	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Kashmere PTSO</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 5716 Hirsch		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB21.21592</b>
City Houston	State TX	
Zip Code 77026	Purpose of Disbursement Sponsor banquet	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Mabrie Funeral Homes</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2014
Mailing Address 5000 Alameda Road		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.21539</b>
City Houston	State TX	
Zip Code 77004	Purpose of Disbursement Charity - donation on funeral charges for Tony Morris, deceased	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2050.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 41			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Pleasantville Re-Union Committe</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014	
Mailing Address 8774 Guinevere			Amount of Each Disbursement this Period 500.00	
City Houston	State TX	Zip Code 77029	Transaction ID : SB21.21599	
Purpose of Disbursement Sponsor voters' awareness event		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Senate District 15 Democrats</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014	
Mailing Address P.O. Box 7271			Amount of Each Disbursement this Period 250.00	
City Houston	State TX	Zip Code 77248	Transaction ID : SB21.21600	
Purpose of Disbursement Sponsor event		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Texas Black Expo, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 9301 SW Frwy Suite 250			Amount of Each Disbursement this Period 900.00	
City Houston	State TX	Zip Code 77074	Transaction ID : SB21.21569	
Purpose of Disbursement Sponsorship		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1650.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 41
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. Texas Democratic Women</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014
Mailing Address P.O. Box 684906		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB21.21558</b>
City Austin	State TX	
Zip Code 78768	Purpose of Disbursement Sponsorship for event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Theater Heights Area Chamber of Commerce</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2014
Mailing Address 545 West 19th Street		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : SB21.21594</b>
City Houston	State TX	
Zip Code 77008	Purpose of Disbursement Sponsor luncheon	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Theater Zion MBC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1620 Dolly Wright Street		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : SB21.21575</b>
City Houston	State TX	
Zip Code 77088	Purpose of Disbursement Table Sponsorship at event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 41
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**LEE, SHEILA JACKSON**

Full Name (Last, First, Middle Initial) <b>A. WATERS, MAXINE</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2014
Mailing Address 1044 W. 82ND ST.		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : SB21.21627</b>
City LOS ANGELES State CA Zip Code 90044	Purpose of Disbursement campaign contribution	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 35		

Full Name (Last, First, Middle Initial) <b>B. World Youth Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address P.O. Box 479		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB21.21576</b>
City Houston State TX Zip Code 77001	Purpose of Disbursement Sponsorship and Advertisement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	11510.00