

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mrs

Laura

Morrison

OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX

APT / SUITE #

CITY

STATE

ZIP CODE

610 Baylor St

Austin, Texas 78703

☐ change of address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 974-2258

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mr.

Mark

Perlmutter

7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE)

APT / SUITE #

CITY

STATE

ZIP CODE

1717 W. 6th St Suite 375

Austin, Texas 78703

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512) 476-4944

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(officeholder only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500
limit

☐ Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year

01 / 01 / 13

THROUGH

Month Day Year

06 / 30 / 13

11 ELECTION

Month Day Year

/ /

ELECTION TYPE

☐ Primary

☐ Runoff

☐ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

Austin City Council
Place 4

13 OFFICE SOUGHT (if known)

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 918.00

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 3416.22

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 AFFIDAVIT

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



Laura Morrison

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Laura Morrison, this the 8 day of July, 20 13, to certify which, witness my hand and seal of office.

Candy Hinkle

Signature of officer administering oath

Candy Hinkle

Printed name of officer administering oath

Notary Public

Title of officer administering oath

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2		2 FILER NAME LAURA MORRISON		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3/22/13		5 Payee name RECA (Real Estate Council of Austin) Community Fund			
6 Amount (\$) \$350.00		7 Payee address; City; State; Zip Code 98 San Jacinto Blvd., Suite 510 Austin, Texas 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) Gardner Bells Project Bridge Sponsorship	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/1/13		Payee name University of Texas at Austin (Project 2013) UT Division of Diversity & Community Engagement			
Amount (\$) \$200.00		Payee address; City; State; Zip Code 100 W. Dean Keeton St., Stop A6300 Austin, Texas 78712			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) 3RD Annual Student Volunteer Day Project 2013 Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/12/13		Payee name Preservation Austin			
Amount (\$) \$168.00		Payee address; City; State; Zip Code PO Box 2113 Austin, Texas 78768			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) Tickets to Heritage Homes Tour for self & staff	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/29/13		Payee name Annie's List			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 506 W. 7th St Austin, Texas 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		Description (If travel outside of Texas, complete Schedule T) 2013 Austin Annie's List Luncheon Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
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Gift/Awards/Memorials Expense
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Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

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1 Total pages Schedule F: <u>2</u>	2 FILER NAME <u>Laura Morrison</u>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <u>4/30/13</u>	5 Payee name <u>IACT Interfaith Action of Central Texas</u>	
6 Amount (\$) <u>\$100.00</u>	7 Payee address; City; State; Zip Code <u>2921 E. 17th St, Building D, Suite 3</u> <u>Austin, Texas</u>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <u>Contributions/Donations Made By</u> <u>Candidate/Officeholder/Political Committee</u>	
	(b) Description (If travel outside of Texas, complete Schedule T) <u>Hope Awards Gala + Fundraiser Sponsorship</u>	
9 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 (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held	
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