

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) 00376972	2 PAGE # 1 of 6
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Sabino	MI MI
	NICKNAME Pio	LAST Renteria	SUFFIX Sr.
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	1511 Haskell St. Austin, TX 78702		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Cristina	MI MI
	NICKNAME	LAST Valdes	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY; STATE; ZIP CODE
902 E. 2nd St. Austin, TX 78702			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
(512) 789-0309			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
05/13/2014			06/30/2014
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE	
11/04/2014		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)	
		Austin City Council District 3	

OFFICE USE ONLY	
Date Received	2014 JUL 13 PM 1:43 AUSTIN CITY CLERK RECEIVED
Date Hand-delivered or Date Permailed	
Receipt #	
Date Processed	
Date Imaged	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

13 C/OH NAME Renteria, Sabino Sr. (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00376972

15 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures 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. ..

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

additional pages

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
---	----	------

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	499.00
--	----	--------

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
---	----	------

4. TOTAL POLITICAL EXPENDITURES	\$	275.96
---------------------------------	----	--------

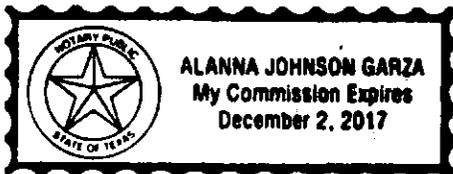
CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	74.96
--	----	-------

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,000.00
---	----	----------

17 AFFIDAVIT



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

Sabino Pio Renteria Sabino Pio Renteria
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sabino Renteria, this the 11 day of June, 2014, to certify which, witness my hand and seal of office.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/6	
2 FILER NAME Renteria, Sabino Sr. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00376972	
4 Date 06/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bradley, Vicki Clark (Mrs.) 6 Contributor address; City; State; Zip Code 4202 Sinclair Austin, TX 78756	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Oscar (Mr.) Contributor address; City; State; Zip Code 5001 Convict Hill 12D #803 Austin, TX 78749	Amount of contribution (\$) \$49.00	In-kind contribution description (if applicable) Food for kick off party (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pantin, Tomas (Mr.) Contributor address; City; State; Zip Code 1601 E 7th Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) Photos shoot (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Mary Jane (Mrs.) Contributor address; City; State; Zip Code 1708Canterbury Austin, TX 78702	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 06/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thompson, Wordy (Mr.) Contributor address; City; State; Zip Code 1708Canterbury Austin, TX 78702	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial 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 PAGE # Schedule: 1/2 Report: 5/6		2 FILER NAME Renteria, Sabino Sr. (Mr.)		3 ACCOUNT # (TEC filers) 00376972	
4 Date 06/26/2014	5 Payee name Badge A Mint				
6 Amount (\$) \$37.95	7 Payee address City; State; Zip Code 345 N. Lewis Ave. Oglesby, IL 61348				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office supply		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/05/2014	Payee name GoDaddy				
Amount (\$) \$12.18	Payee address City; State; Zip Code 14455 N. Hayden Rd. Scottsdale, AZ 85260				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/26/2014	Payee name Jerry Artarama				
Amount (\$) \$8.82	Payee address City; State; Zip Code 6010 N. IH 35 Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 06/06/2014	Payee name Office Max				
Amount (\$) \$64.95	Payee address City; State; Zip Code 3502 Regency Crest Garland, TX 75041				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign office supplies Printer		
Complete ONLY if direct expenditure	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial 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 PAGE # Schedule: 2/2 Report: 6/6	2 FILER NAME Renteria, Sabino Sr. (Mr.)	3 ACCOUNT # (TEC filers) 00376972
--	---	---

4 Date 06/30/2014	5 Payee name Sixth Street Printing
-----------------------------	--

6 Amount (\$) \$27.06	7 Payee address City; State; Zip Code 1010 E. Sixth Street Austin, TX 78702
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising
---------------------------------	---	---

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

Date 06/09/2014	Payee name Tx. Democratic Party
--------------------	------------------------------------

Amount (\$) \$125.00	Payee address City; State; Zip Code 4818 E. Ben White Austin, TX 78741
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign service
-------------------------------	--	--

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