

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Rangel, Eric (Mr.)

14 ACCOUNT # (Ethics Commission filers)
00001709

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. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

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)

\$ 2,255.00

EXPENDITURE TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 9,158.70

CONTRIBUTION BALANCE

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

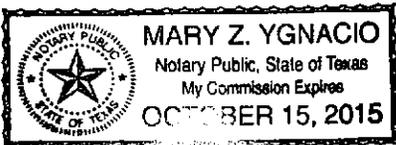
\$ 0.00

OUTSTANDING LOAN TOTALS

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

\$ 0.00

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.

[Handwritten Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said ERIC J. RANGEL, this the 15 day of JULY, 202014, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

MARY Z. YGNACIO
Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/6 Report: 4/12	
2 FILER NAME Rangel, Eric (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00001709	
4 Date 05/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craig, Ken (Mr.) 6 Contributor address; City; State; Zip Code 915 B Sirocco Drive Austin, TX 78745	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Manager		10 Employer (See Instructions) Tammadge Market Research	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craig, Ken (Mr.) Contributor address; City; State; Zip Code 915 B Sirocco Drive Austin, TX 78745	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Tammadge Market Research	
Date 06/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crawford, Jessica (Ms.) Contributor address; City; State; Zip Code 2811 Hardeman St. #A Austin, TX 78704	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Lucky Penny	
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crossley, Cecilia (Ms.) Contributor address; City; State; Zip Code 3100 Catalina Drive Austin, TX 78741	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Retired	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dettmar, Robert (Mr.) Contributor address; City; State; Zip Code 10031 Longhorn Skyway Dripping Springs, TX 78620	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Sr. Account Manager		Employer (See Instructions) David Evans and Associates, Inc	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/6 Report: 5/12	
2 FILER NAME Rangel, Eric (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00001709	
4 Date 05/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) George, Cody (Mr.) 6 Contributor address; City; State; Zip Code 150 Harris Drive Austin, TX 78737	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Realtor		10 Employer (See Instructions) Self Employed	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hiller, Joshua (Mr.) Contributor address; City; State; Zip Code 5815 Dull Knife Dr. Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Mortgage Banker		Employer (See Instructions) Hancock Mortgage Partners	
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hopkins, Franklin (Mr.) Contributor address; City; State; Zip Code 1114 West Oltorf Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) State of Texas	
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horner, Cherilyn (Ms.) Contributor address; City; State; Zip Code 4330 Bull Creek Rd. #3409 Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) School Social Worker		Employer (See Instructions) Jervy & Associates Psychotherapy	
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Islas, Fermin (Mr.) Contributor address; City; State; Zip Code P.O. Box 1125 Lockhart, TX 78644	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 6/12	
2 FILER NAME Rangel, Eric (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00001709	
4 Date 06/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Olga (Ms.) 6 Contributor address; City; State; Zip Code 1205 Space Lane Austin, TX 78758	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) CPA		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Munoz, Alfred (Mr.) Contributor address; City; State; Zip Code 1701 Plum Street Lockhart, TX 78644	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) County Commissioner		Employer (See Instructions) Caldwell County	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nava, Lori (Ms.) Contributor address; City; State; Zip Code P.O. Box 150113 Austin, TX 78715	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Youth Minister		Employer (See Instructions) St. Ignatius Martyr Catholic Church	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nielsen, Chris (Mr.) Contributor address; City; State; Zip Code 5011 East Cesar Chavez Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Electric Cab of Austin	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olives, Patricia (Ms.) Contributor address; City; State; Zip Code 1100 Emmitt Run Austin, TX 78741	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Art Director		Employer (See Instructions) GolfSmith	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 7/12	
2 FILER NAME Rangel, Eric (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00001709	
4 Date 05/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ormand, Bruce (Mr.) 6 Contributor address; City; State; Zip Code 4709 Pinehurst Drive Austin, TX 78747	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Director of Finance		10 Employer (See Instructions) A1 Parts Mart	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 05/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rangel, Bernie (Mr.) Contributor address; City; State; Zip Code 1524 Parkview Lockhart, TX 78644	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
County Treasurer		Retired	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rangel, Lori (Ms.) Contributor address; City; State; Zip Code 301 White Oak Lockhart, TX 78644	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
County Treasurer		Caldwell County	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reeves, Sarah (Mrs.) Contributor address; City; State; Zip Code 4208 Hoffman Drive Austin, TX 78749	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Social Media Manager		GDD Ineractive	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 06/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reeves, Sarah (Mrs.) Contributor address; City; State; Zip Code 4208 Hoffman Drive Austin, TX 78749	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Social Media Manager		GDD Ineractive	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/6 Report: 8/12

2 FILER NAME Rangel, Eric (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00001709

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
Russo, Matt (Mr.)

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

05/15/2014

6 Contributor address; City; State; Zip Code
9201 Brodie #1703
Austin, TX 78748

\$50.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Senior ASIC Design Engineer

10 Employer (See Instructions)
NVIDIA

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: 1/1 Report: 10/12	2 FILER NAME Rangel, Eric (Mr.)	3 ACCOUNT # (TEC filers) 00001709
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4 Date 06/09/2014	5 Payee name Kelly Graphics
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6 Amount (\$) \$1,609.79	7 Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing Brochures
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 06/30/2014	Payee name PayPal
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Amount (\$) \$36.91	Payee address City; State; Zip Code 1840 Embarcadero Rd. Palo Alto, CA 94303
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fees, PayPal
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 05/23/2014	Payee name Thomas Photography
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Amount (\$) \$100.00	Payee address City; State; Zip Code Website Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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: 11/12	2 FILER NAME Rangel, Eric (Mr.)	3 ACCOUNT # (TEC filers) 00001709
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4 Date 05/01/2014	5 Payee name Adrian Gutierrez Photography
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6 Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code Website Austin, TX 78702
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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"/> Photography
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Date 05/01/2014	Payee name Graphic Granola
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Amount (\$) \$1,147.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1012 East 38th 1/2 Street Austin, TX 78751
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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"/> Website
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Date 05/07/2014	Payee name Graphic Granola
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Amount (\$) \$2,145.82 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1012 East 38th 1/2 Street Austin, TX 78751
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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"/> Website
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Date 05/15/2014	Payee name Graphic Granola
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Amount (\$) \$1,147.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1012 East 38th 1/2 Street Austin, TX 78751
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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"/> Website
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**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/2 Report: 12/12	2 FILER NAME Rangel, Eric (Mr.)	3 ACCOUNT # (TEC filers) 00001709
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4 Date 05/29/2014	5 Payee name Graphic Granola
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6 Amount (\$) \$2,210.85 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 1012 East 38th 1/2 Street Austin, TX 78751
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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"/> Website
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Date 05/15/2014	Payee name Juan In A Million
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Amount (\$) \$660.33 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2300 East Cesar Chavez Street Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food/Beverage
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