CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH

L. L			GOVER SHEET PG I
The C/OH Instruction Gui	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 11111111	2 PAGE# 1 of 18 2
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST Mr. Luis NICKNAME LAST Mike Rodriguez	MI	OFFICE USEONLY AU Date Received CT RE C CT
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; 10218 Braemar Dr Austin, TX 78747	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST	, MI	Date Processed
NAME.	Mr. C.		Date Imaged
	NICKNAME LAST Dean Goodnight	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / S 4504 S. Congress Ave Austin, TX 78745	SUITE#; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 422-2619	EXTENSION	
8 REPORT TYPE	January 15 X 30th day before electric July 15 8th day before electric states and states are stated as a second state of the states are stated as a second state of the states are stated as a second state of the sta		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
A DEDICO			
9 PERIOD COVERED	Month Day Year THR	Month Day ROUGH 09/25/20	Year 14
10 ELECTION	ELECTION DATE ELECTION 1 Month Day Year Prim 11/04/2014		General Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)
		Ausnin Citi	1 Council, District 5
	GO ТО	PAGE 2	·

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Rodri	guez, Luis (Mr.)		14 ACCOUNT # 11111111	(Ethics Commission filers)
15 NOTICE FROM	have been made with	otice of political expenditures by political committees to support the conditate's or officeholder's knowledge or consent. Candidate y receive notice of such expenditures	andidate / officeholder. ates and officeholders a	These expenditures may are required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	<u> </u>	
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
		<u> </u>		
16 CONTRIBUTION TOTALS	1. TOTAL I PLEDGE	POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,740.00
EXPENDITURE TOTALS	3. TOTALI	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZ	S S	0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$	6,939.89
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	12,704.83
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	10,000.00
17 AFFIDAVIT				
NO.	ULA M. BOYD TARY PUBLIC tate of Texas 1. Exp. 04-22-2016	I swear, or affirm, under penaltis true and correct and include me under Title 15, Election Co	s all information requ	ired to be reported by
		Signature or	Sandidate of Gilicer)
		he said <u>Luis M. Vodrigue 2</u> rtify which, witness my hand and seal of office.	, this the 4	o ↓ day
Signature of officer admi	niste/ji/g oath	Paula M Boyd Print name of officer administering oath	No fay f	ablic ninistering oath

				<u>.</u>
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1	11 Report: 3/18
2 FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT# 11111111	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Baggett - Wallis, Pamela (Ms.)	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/25/2014	6 Contributor address; City; State; Zip Code 3506 Denbar Ct. Austin, TX 78739	•••••	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Writer	pation / Job title (See Instructions)	10 Employer (See In Self Employed	structions)	
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 10900 River Plantation Dr. Austin, TX 78747	•••••	\$50.00	
	·		/# traval outside of	Texas, complete Schedule T)
Principal occur	Dation / Job title (See Instructions)	Employer (See In		rexas, complete schedule 1)
- Tillicipal occup	Janon / Job tike (See instructions)	Employer (See in	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2014	Contributor address; City; State; Zip Code 10625 Legends Lane Austin, TX 78747	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			L.,	Texas, complete Schedule T)
	pation / Job title (See Instructions) urance and Risk Management Center	Employer (See In University of Ho	structions) ouston Downtown	
Date	Full name of contributor	')	Amount of	In-kind contribution
	Campbell, Rod (Mr.)		contribution (\$)	description (if applicable)
	· · · · · · · · · · · · · · · · · · ·			I
09/14/2014	Contributor address; City; State; Zip Code		\$10.00	i I
	8021 Evadean Cr. Austin, TX 78745			
				' —
			<u> </u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	¥	Amount of	In-kind contribution
	Caudill, Bob and Mary (Mr. / Mrs.)	<u> </u>	contribution (\$)	description (if applicable)
				I
09/24/2014	Contributor address; City; State; Zip Code 10900 Legends Ln.		\$100.00	
	Austin, TX 78747			I
			(If traval autoids as	Towns complete Cabadula Ti
Principal accur	pation / Job title (See Instructions)	Employer /Carl	<u> </u>	Texas, complete Schedule T)
	er/ Lt Colonel (Retired)	Employer (See In U.S. Airforce	structions)	

The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 2/	11 Report: 4/18
2 FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT # 11111111	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Chavez, Yvonne (Ms.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/16/2014	6 Contributor address; City; State; Zip Code 2711 Charlesworth Dr. Austin, TX 78747	•	\$20.00	 - -
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/23/2014	Contributor address; City; State; Zip Code 10900 River Plantation Dr. Austin, TX 78747		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete defledate ()
			su delibris)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
07/17/2014	Contributor address; City; State; Zip Code Unknown Austin, TX 78747		\$50.00	
				Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/29/2014	Contributor address; City; State; Zip Code 10613 River Plantation Dr. Austin, TX 78747	••••	\$250.00	! ! !
		•	(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions) General Manager	Employer (See In Howdy Honda	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Cooper, Paul (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/19/2014	Contributor address; City; State; Zip Code 11032 River Plantation Dr. Austin, TX 78747		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	
		zmpojai (ada ii)		·

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
			Schedule: 3/1	11 Report: 5/18
2 FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT# 11111111	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID) Doyal, John (Mr.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/24/2014	6 Contributor address; City; State; Zip Code 10928 Preston Trls. Austin, TX 78747		\$100.00	
			<u> </u>	Texas, complete Schedule T)
	pation / Job title (See Instructions) Sales Executive	10 Employer (See In MacAllister Rea		
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 4005 North Hills Dr. Austin, TX 78731	•••••	\$100.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See In	structions)	
Military Office	e / Lt. General (Ret.)	U.S.Airforce		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/21/2014	Contributor address; City; State; Zip Code 6528 Heron Dr. Austin, TX 78759	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(Mineson besteller of	Tanana aaamulaka Cabadada Ti
Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Educator		Retired	31 401013)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Contributor address; City; State; Zip Code 10515 River Plantation Dr. Austin, TX 78747	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
	action / Job title (See Instructions) er / Colonel (Ret.)	Employer (See In U.S.Air Force	structions)	
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code 10702 Legends Ln. Austin, TX 78747	•••••	\$200.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See In	·	<u> </u>
None		Retired		

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/1	11 Report: 6/18
2 FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT# 11111111	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (IDa Fier, William (Mr.)	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/16/2014	6 Contributor address; City; State; Zip Code 10702 Legends Ln. Austin, TX 78747		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) er/ Lt. Colonel (Retired)	10 Employer (See In U.S. Air Force	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/03/2014	Contributor address; City; State; Zip Code 10924 River Plantation Dr. Austin, TX 78747	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Software Eng	pation / Job title (See Instructions) gineer	Employer (See In Lower Colorado	structions) River Authority (I	-CRA)
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 10210 Braemar Dr. Austin, TX 78747	• • • • • • • • • • • • • • • • • • • •	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) er/ Colonel (Retired)	Employer (See In U.S. Air Force	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/19/2014	Contributor address; City; State; Zip Code 4603 Merion Cricket Dr. Austin, TX 78747	· · · · · · · · · · · · · · · · · · ·	\$200.00	
			1	Texas, complete Schedule T)
	pation / Job title (See Instructions) as Legislative Staff	Employer (See In Texas State Le	structions) gislature (Retired)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/28/2014	Contributor address; City; State; Zip Code 4435 Frontier Trls. Austin, TX 78745	•••••	\$300.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Owner/Presid	dent Job title (See Instructions)	Employer (See In Haπell Funeral		

The lns	The Instruction Guide explains how to complete this form.			11 Report: 7/18	
2 FILER N	AME Rodriguez, Luis (Mr.)		3 ACCOUNT#	(Ethics Commission filers)	
4 Date	5 Full name of contributor out-of-state PAC (ID Harris, Evelyn A. (Ms.))#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/16/2	6 Contributor address; City; State; Zip Code 2605 Toulouse Austin, TX 78748		\$50.00	 	
	<u> </u>		(If travel outside of	Texas, complete Schedule T)	
9 Principa	occupation / Job title (See Instructions)	10 Employer (See In Retired	istructions)		
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/25/2	014 Contributor address; City; State; Zip Code 2803 Jorwoods Dr. Austin, TX 78745	••••••	\$25.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal	occupation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor ut-of-state PAC (ID	<u>, </u>	Amount of	I la bia di caratta si	
Date	Home Builders of Austin PAC)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/18/2	O14 Contributor address; City; State; Zip Code 8140 Exchange Dr. Austin, TX 78754	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	 	
		,	(If travel outside of	Texas, complete Schedule T)	
Principal	occupation / Job title (See Instructions)	Employer (See In	<u> </u>	toxos, complete contedure 1)	
	Builders Association of Greater Austin	Trade Associati			
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
07/19/2	014 Contributor address; City; State; Zip Code 11004 Point clear Ct. Austin, TX 78747		\$100.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal	occupation / Job title (See Instructions)	Employer (See In Retired	<u> </u>		
			1		
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/15/2	11000 Onion Creek Ct.		\$200.00	 	
	Austin, TX 78747		1	1	
	Austin, TX 78747		(If travel outside of	Texas, complete Schedule T)	
Principal	occupation / Job title (See Instructions)	Employer (See In	<u>l</u>	Texas, complete Schedule T)	

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/	11 Report: 8/18
2 FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT#	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Locke, Torn (Mr.)	<u>*</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/24/2014	6 Contributor address; City; State; Zip Code 10502 La Costa Dr. Austin, TX 78747		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor aut-of-state PAC (ID		Amount of	In-kind contribution
	Machemehl, Leroy (Mr.)	,	contribution (\$)	description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 10617 Legends Lane Austin, TX 78747		\$25.00	
			/If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete scriedule ()
Date	Full name of contributor	#)	Amount of	In-kind contribution
	Mahn, David (Mr.)		contribution (\$)	description (if applicable)
08/18/2014	Contributor address; City; State; Zip Code 200 Congress Ave.		\$50.00	
	Ste 9A Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In		Texas, complete schedule 1)
		, , , , , , , , , , , , , , , , , , , ,		
Date	Full name of contributor ut-of-state PAC (ID#	#)	Amount of	In-kind contribution
	Matthews, Robin (Mr.)		contribution (\$)	description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code		\$25.00	I
09/10/2014	6303 Berkeley Cv.		\$25.00	l
	Austin, TX 78745			l
			(If travel outside of	Texas, complete Schedule T)
Principal occup Teacher (Ret	ation / Job title (See Instructions) ired)	Employer (See In Austin Independ	structions) dent School Distri	ct
Date	Full name of contributor ut-of-state PAC (ID	#)	Amount of	In-kind contribution
	McCall, Brian (Mr.)		contribution (\$)	description (if applicable)
08/12/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	<u> </u> :
35/12/2014	678 Rosewood		ψ 100.00	!
	Boerne, TX 78006			I
				Texas, complete Schedule T)
Principal occup Business Ow	nation / Job title (See Instructions) ner	Employer (See In Self Employed	structions)	

				<u> </u>		
	The Instruction	on Guide explains how to complete this form.		1 PAGE#		
<u> </u>		-			11 Report: 9/18	
2	FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT#	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# McCarthy, F.J. (Mr.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/15/2014	6 Contributor address; City; State; Zip Code 11125 Pinhurst Dr. Austin, TX 78747		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In Retired	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# McComb, Jim (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	07/19/2014	Contributor address; City; State; Zip Code 2507 Braemar Cv. Austin, TX 78747		\$100.00	 	
				<u> </u>	Texas, complete Schedule T)	
	Principal occup Comercial Co	ation / Job title (See Instructions) Instruction	Employer (See In McComb Const			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	07/31/2014	Contributor address; City; State; Zip Code 11000 Legends Ln. Austin, TX 78747		\$75.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Military/ Color	ation / Job title (See Instructions) nel (Retired)	Employer (See In U.S. Air Force	1		
	Date	Full name of contributor out-of-state PAC (ID# Miberger, Donald and Jean (Mr. / Mrs.))	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	07/22/2014	Contributor address; City; State; Zip Code 10519 River Plantation Dr. Austin, TX 78747		\$250.00	 	
				(If travel outside of	Texas, complete Schedule T)	
		ation / Job title (See Instructions) irector of Quality	Employer (See In Retired	structions)		
_	Date	Full name of contributor out-of-state PAC (ID# Montemayor, Jose and Dolores (Mr. / Mrs.)	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	08/06/2014	Contributor address; City; State; Zip Code 10800 Vestavio Austin, TX 78747		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
		ation / Job title (See Instructions)	Employer (See In	structions)		
	Insurance Ex	ecutive	Black Diamond	Partners		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 8/	11 Report: 10/18
2	FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT # 11111111	(Ethics Commission filers)
4	Date	5 Full name of contributor ul-of-state PAC (ID# Morton, Ingrid (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/02/2014	6 Contributor address; City; State; Zip Code 3204 Cupid Dr. Austin, TX 78735		\$10.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Porter, William (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/22/2014	Contributor address; City; State; Zip Code 10501 Pinehurst Dr. Austin, TX 78747		\$50.00	
				1	Texas, complete Schedule T)
		ration / Job title (See Instructions) or / Colonel (Retired)	Employer (See In U.S. Air Force	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Richards, Helen (Mrs.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2014	Contributor address; City; State; Zip Code 2404 Onion Creek Pkwy. Austin, TX 78747		\$50.00	<u>{</u>
				######################################	
	<u> </u>				Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 10406 Pinehurst Dr. Austin, TX 78747		\$200.00	
				/ME Amount	· · · · · · · · · · · · · · · · · · ·
	Principal occup	ation / Job title (See Instructions)	Employer (See In Retired		Texas, complete Schedule T)
	Date	Full name of contributor ut-of-state PAC (ID# Rodriguez, James and Rita (Mr. / Mrs.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 5117 Prairie Dunes Dr. Austin, TX 78747		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In		,
	Health Care E	,			

	The Instruction	ON GUIDE explains how to complete this form.	· - ·	1 PAGE # Schedule: 9/	11 Report: 11/18
2	FILER NAME	Rodriguez, Luis (Mr.)	-	3 ACCOUNT # 11111111	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Savage, Bryant (Mr.)	<u> </u>	7 Amount of contribution (\$)	8
	07/17/2014	6 Contributor address; City; State; Zip Code 10523 River Plantation Dr. Austin, TX 78747		\$300.00	† 1 1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Medical Direc	pation / Job title (See Instructions) etor	10 Employer (See In U.S. Air Force (
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/22/2014	Contributor address; City; State; Zip Code 4804 Interlachen Dr. Austin, TX 78747		\$200.00	
	Oderland			<u> </u>	Texas, complete Schedule T)
		ation / Job title (See Instructions) Owner - Dealer	Employer (See In WRS Auto Sale		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 2300 Interbrook Dr. Austin, TX 78747	••••	\$200.00	
				(If travel outside of	Texas, complete Schedule T)
<u> </u> -	Principal occup	eation / Job title (See Instructions)	Employer (See In		Texas, complete scriedae 1)
		nagement/ Senior Service Executive	AT&T		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
:	07/21/2014	Contributor address; City; State; Zip Code 4700 Toreada Austin, TX 78746		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Executive/ CE	ation / Job title (See Instructions) EO	Employer (See In Tracor (Retired		· ·
	Date	Full name of contributor ut-of-state PAC (ID# Spain, Joshua (Mr.)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/03/2014	Contributor address; City; State; Zip Code 2612 Dryden St. Austin, TX 78748	• • • • • • • • • • • • • • • • • • • •	\$100.00	
				(If travel outside of	Texas, complete Schedule T)
├┈	Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete deligadis 1)
	Software Eng		2p.0 jor (000 fit	3000.10 ₁	

The Instruction	סא Guide explains how to complete this form.		1 PAGE# Schedule: 10	/11 Report: 12/18
2 FILER NAME	Rodriguez, Luis (Mr.)		3 ACCOUNT # 11111111	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Stolp, James (Mr.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/24/2014	6 Contributor address; City; State; Zip Code 10409 La Costa. Dr. Austin, TX 78747		\$100.00	i
		-	(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) or / Colonel (Retired)	10 Employer (See In U.S. Air Force	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code 2404 Castledale Dr. Austin, TX 78748		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) er / Colonel (Retired)	Employer (See In U.S. Air Force	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 2832 Gettysburg Dr. Austin, TX 78745		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/21/2014	Contributor address; City; State; Zip Code 11213 County Down Dr Austin, TX 78747		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Real Estate A	pation / Job title (See Instructions) Agent	Employer (See In ULTD LLC.	structions)	,
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 10916 River Plantation Dr. Austin, TX 78747		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In Retired	structions)	

The Instructi	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 11/11 Report: 13/18						
2 FILER NAME Rodriguez, Luis (Mr.)			3 ACCOUNT # (Ethics Commission filers) 11111111					
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#) Walls, Clyde and Eliza (Mr. / Mrs.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
09/03/2014	6 Contributor address; City; State; Zip Code 4504 Wild Dunes Ct. Austin, TX 78747	\$100.00	 					
			(If travel outside of	Texas, complete Schedule T)				
9 Principal occu Finance/ CF	pation / Job title (See Instructions)	10 Employer (See In Retired						
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
09/14/2014	Contributor address; City; State; Zip Code 4811 Buckskin Pass Austin, TX 78745	• • • • • • • • • • • • • • • • • • • •	\$75.00	 				
				Texas, complete Schedule T)				
Principal occup	pation / Job title (See Instructions) er/ Lt. Colonel (Retired)	Employer (See In	structions)					
Williary Office	en Lt. Colonei (Retired)	U.S. Air Force						
Date	Full name of contributor ut-of-state PAC (ID#		A	1 1:-11				
Date	Workman for Texas	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
09/13/2014 Contributor address; City; State; Zip Code PO Box 90671 Austin, TX 78709			\$350.00	 				
			(If travel outside of	Texas, complete Schedule T)				
	pation / Job title (See Instructions) tor / Representative HD 47	Employer (See Instructions) State of Texas						
	<u> </u>							

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services
Food/Beverage Expense
Polling Expense

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Rodriguez, Luis (Mr.) Schedule: 1/4 Report: 15/18 11111111 4 Date 5 Payee name 07/16/2014 Abbey Printing 6 Amount (\$) Payee address City; State; Zip Code 1310 S. Lamar Austin, TX 78704 \$388.62 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) (b) Description **PURPOSE Business & Rack Cards Printing Expense EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/05/2014 Abbey Printing Amount (\$) Payee address City; State; Zip Code 1310 S. Lamar Austin, TX 78704 \$200.26 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Push Cards Printing Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 08/25/2014 Abbey Printing Amount (\$) Payee address City; State; Zip Code 1310 S. Lamar \$200.26 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Push Cards Printing Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **Austin Cotton** 08/07/2014 Amount (\$) Payee address City; State; Zip Code 400 Manchaca \$345.32 Austin, TX 78748 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense T-Shirts OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Rodriguez, Luis (Mr.) Schedule: 2/4 Report: 16/18 11111111 4 Date 5 Payee name Cathy Miller Communications 08/18/2014 6 Amount (\$) Payee address City; State; Zip Code 2317 Onion Creek Pkwy. Suite 126 \$119.08 Austin, TX 78747 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Business Card Ad Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 09/09/2014 **Designer Graphics** Amount (\$) Payee address City; State; Zip Code 12404 Highway 155 S. Tyler, TX 75703 \$4,334,16 Category (See Categories listed at the top of this schedule) Description. (If travel outside of Texas, complete Schedule T) **PURPOSE** Yard Signs, H-Frames, Road Signs, Door Hangers Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 07/12/2014 Konrad, Jen Amount (\$) Payee address City; State; Zip Code 5701 S. Mopac Expressway \$181.25 Austin, TX 78749 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description. **PURPOSE Business Cards and Facebook** Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee лате 08/02/2014 Konrad, Jen Payee address Amount (\$) City: State; Zip Code 5701 S. Mopac Expressway \$318.75 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense Push Cards OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Travel Out Of District Office Overhead/Rental Expense Candidate/Officeholder/Political Committee Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Rodriguez, Luis (Mr.) Schedule: 3/4 Report: 17/18 11111111 4 Date 5 Payee name 08/31/2014 Konrad, Jen 6 Amount (\$) Payee address City; State; Zip Code 5701 S. Mopac Expressway Austin, TX 78749 \$318.75 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Pocket Cards and Signs Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY it Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 07/03/2014 OfficeMax Amount (\$) Payee address City; State; Zip Code 9600 S. I35 Service Road Southbound \$33.56 Office Max #1287 Austin, TX 78748 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE Printing Expense** Printing Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Principal Distribution - (Bobby Vera) 09/15/2014 Amount (\$) City; State; Zip Code 818 Craters of the Moun Pfluggervile, TX 78660 \$250.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Sign Placements and Sign Pickups Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Randolph Brooks Federal Credit Union 07/01/2014 Amount (\$) Payee address City; State; Zip Code PO Box 2097 \$1.00 Universal City, TX 78748 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Cashiers Check Charge Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

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)

	<u>-</u>	The Instruction Guide explains ho		er a category not listed above)
1 PAGE#		2 FILER NAME	<u> </u>	3 ACCOUNT # (TEC filers)
Schedule: 4/4 Re	epo <u>rt: 18/18</u>	Rodriguez, Luis (Mr.)		11111111
4 Date	5 Payee name			
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6 Amount (\$)	7 Payee addres	,, -, -, -, -, -, -, -, -, -, -, -, -, -		
\$11.00	PO Box 209			
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8 PURPOSE	(a) Category (See	ee Categories listed at the top of this schedule)	(b) Description (If travel outside Bank Charge	le of Texas, complete Schedule T)
OF EXPENDITURE	710002	Saliking	•	
EAT ENDITORS			Check if Austin, TX, officehold	der living expense
9 Complete ONLY if	Candidate / O	Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				
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\$187.37	3267 Bee Ca	aves Road Suite 107-247		ļ
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PURPOSE		ee Categories listed at the top of this schedule)	Description (If travel outside Printing Exprense	e of Texas, complete Schedule T)
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direct expenditure to benefit C/OH			-	-
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08/22/2014	Payee name Your Facebo	ook Ads (Mike Rodriguez)		
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ψυυ.υ .	Austin, TX 7			•
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PURPOSE		e Categories listed at the top of this schedule)		e of Texas, complete Schedule T)
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direct expenditure	Garages, _	Modificial Figure	Office Sought.	Office rieig.
to benefit C/OH	<u> </u>			
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