

# 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) 12121212		2 PAGE # 1 of 22		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Edwin	MI	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> <b>AUSTIN CITY CLERK RECEIVED</b>  2014 OCT 6 PM 1:34 </div>	
	NICKNAME Ed		LAST English	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;		APT / SUITE #;	CITY;		Date Received
	12704 Europa Lane Austin, TX 78727-5131					
<input type="checkbox"/> Change of Address					Date Hand-delivered or Date Postmarked	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		FIRST Edwin	MI	Receipt #	
	NICKNAME Ed		LAST English	SUFFIX	Amount	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	Date Processed	
	12704 Europa Lane Austin, TX 78727-5131				Date Imaged	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER		EXTENSION		
	(512)	835-0000				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)					
	<input 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		Month    Day    Year			
	07/01/2014		THROUGH 09/25/2014			
10 ELECTION	ELECTION DATE		ELECTION TYPE			
	Month    Day    Year 11/04/2014		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 7			
GO TO PAGE 2						

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****13 C/OH NAME** English, Edwin (Mr.)**14 ACCOUNT #** (Ethics Commission filers)  
12121212**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)

\$

6,809.33

**EXPENDITURE  
TOTALS**

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

\$

0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$

10,718.13

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

\$

5,320.37

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

\$

10,000.00

**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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ed English, this the 16th day of October, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Deena Estrada-Salinas

Print name of officer administering oath

Notary Public

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: 1/15 Report: 3/22	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aleman, Tomas  6 Contributor address; City; State; Zip Code 12705 Europa Lane Austin, TX 78727	7 Amount of contribution (\$)  \$60.00	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  08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Gerry  Contributor address; City; State; Zip Code 6026 Abilene Tr Austin, TX 78749	Amount of contribution (\$)  \$50.00	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  07/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Mary  Contributor address; City; State; Zip Code 5019 Placid Pl Austin, TX 78731	Amount of contribution (\$)  \$29.00	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  09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashbaugh, Debbie  Contributor address; City; State; Zip Code 115 Juniper Trail Elgin, TX 78621	Amount of contribution (\$)  \$50.00	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  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ashby, Paul  Contributor address; City; State; Zip Code 812 W. Lee Kingsville, TX 78363	Amount of contribution (\$)  \$25.00	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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/15 Report: 4/22	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baccus, Richard  6 Contributor address; City; State; Zip Code 11504 Oakwood Dr Austin, TX 78753	7 Amount of contribution (\$)  \$350.00	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) Owner		10 Employer (See Instructions) ABC Vacuum Warehouse	
Date  08/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Dirk  Contributor address; City; State; Zip Code 6507 Elmgrove Road Spring, TX 77389	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Regional Sales Manager		Employer (See Instructions) Cameron International	
Date  08/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baker, Roger  Contributor address; City; State; Zip Code 1303 Bentwood Rd Austin, TX 78722	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Retired	
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barlin, Peter  Contributor address; City; State; Zip Code 3306 Windsor Rd Austin, TX 78703	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real estate development		Employer (See Instructions) ERB Inc.	
Date  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Belanger, Mark  Contributor address; City; State; Zip Code 12116 Scribe Dr Austin, TX 78759	Amount of contribution (\$)  \$10.00	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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 3/15 Report: 5/22	
2 FILER NAME English, Edwin (Mr.)				3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  09/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Borgelt, Roger		7 Amount of contribution (\$)  \$350.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 106 Laurel Lane Austin, TX 78705			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Borgelt Law		
Date  08/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunson, Howard		Amount of contribution (\$)  \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3600 Las Colinas Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) N/A			Employer (See Instructions) Retired		
Date  08/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunson, Leigh Ann		Amount of contribution (\$)  \$65.33		In-kind contribution description (if applicable) Food for meet and greet
Contributor address; City; State; Zip Code 1409 Braided Rope Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brunson, Leigh Ann		Amount of contribution (\$)  \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1409 Braided Rope Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bueche, Sherry		Amount of contribution (\$)  \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1210 Oakwood Blvd Round Rock, TX 78681			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/15 Report: 6/22	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bugge, Chris  6 Contributor address; City; State; Zip Code 7029 Greenshores Dr Austin, TX 78730	7 Amount of contribution (\$)  \$300.00	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) Consultant		10 Employer (See Instructions) Worldwide Clinical Trials	
Date  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Kelly  Contributor address; City; State; Zip Code 8504 Millway Austin, TX 78757	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Electrical Engineer		Employer (See Instructions) Retired	
Date  07/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chevalier-Batik, Helen  Contributor address; City; State; Zip Code 10900 River Plantation Dr Austin, TX 78747	Amount of contribution (\$)  \$50.00	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  09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chevalier-Batik, Helen  Contributor address; City; State; Zip Code 10900 River Plantation Dr Austin, TX 78747	Amount of contribution (\$)  \$50.00	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  09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clem Garrett, Joanne  Contributor address; City; State; Zip Code 8006 Burrell Dr Austin, TX 78757	Amount of contribution (\$)  \$100.00	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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 5/15 Report: 7/22	
2 FILER NAME English, Edwin (Mr.)			3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  07/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easter, Lee  6 Contributor address; City; State; Zip Code 7504 Canna Cove Austin, TX 78759		7 Amount of contribution (\$)  \$20.00	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  07/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) English, Robin  Contributor address; City; State; Zip Code 12704 Europa Lane Austin, TX 78727		Amount of contribution (\$)  \$5.00	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  07/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) English, Robin  Contributor address; City; State; Zip Code 12704 Europa Lane Austin, TX 78727		Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Counselor			Employer (See Instructions) Austin ISD	
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flanagan, Karen  Contributor address; City; State; Zip Code 12301 Bar X Drive Austin, TX 78727		Amount of contribution (\$)  \$25.00	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  09/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, John  Contributor address; City; State; Zip Code 7810 Palm Brook Ct Houston, TX 77095		Amount of contribution (\$)  \$100.00	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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/15 Report: 8/22	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  09/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Golden, Ed  6 Contributor address; City; State; Zip Code 7303 Shoal Creek Blvd Austin, TX 78757	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  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gore, Rex  Contributor address; City; State; Zip Code 1304 W. Oltorf Austin, TX 78704	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) PJS of Texas	
Date  08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Bob  Contributor address; City; State; Zip Code 5002 Lynnwood Austin, TX 78756	Amount of contribution (\$)  \$10.00	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  08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griffiths, Paul  Contributor address; City; State; Zip Code 7800 Ginkgo Cove Austin, TX 78750	Amount of contribution (\$)  \$100.00	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  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haddix, Lynn  Contributor address; City; State; Zip Code 1316 Pasa Tiempo Leander, TX 78641	Amount of contribution (\$)  \$40.00	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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 7/15 Report: 9/22	
2 FILER NAME English, Edwin (Mr.)				3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hammontree, Mark		7 Amount of contribution (\$)  \$10.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 12006 Rosethorn Dr Austin, TX 78758			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henderson, Carol		Amount of contribution (\$)  \$20.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 12020 Scribe Austin, TX 78759			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  08/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Jimmy		Amount of contribution (\$)  \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3229 Pearce Rd Austin, TX 78730			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hootman, Joe		Amount of contribution (\$)  \$25.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11919 Meadowfire Austin, TX 78758			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hootman, Joe		Amount of contribution (\$)  \$10.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11919 Meadowfire Austin, TX 78758			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 8/15 Report: 10/22	
2 FILER NAME English, Edwin (Mr.)				3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huerta, Javier		7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 13413 Kinder Pass Austin, TX 78727		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  08/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, David		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 532 1/2 W. Kleberg Ave Kingsville, TX 78363		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  08/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Tony		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 4101 Brett St, #U02 Corpus Christi, TX 78411		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  08/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Murray		Amount of contribution (\$)  \$40.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3804 Beaconsdale Austin, TX 78727		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Murray		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3804 Beaconsdale Austin, TX 78727		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 9/15 Report: 11/22	
2 FILER NAME English, Edwin (Mr.)				3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keyburn, Robert		7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 1405 Braided Rope Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kramer, Matt		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8706 Linkpass Lane Houston, TX 77025			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lobdell, Les		Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3220 Duval Rd Austin, TX 78759			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lutowski, Richard		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 10053 Lachlan Dr Austin, TX 78717			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lutowski, Richard		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 10053 Lachlan Dr Austin, TX 78717			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 10/15 Report: 12/22	
2 FILER NAME English, Edwin (Mr.)				3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marek, Donald		7 Amount of contribution (\$)  \$20.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 2502 CR 61 Robstown, TX 78380			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Gilbert		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 10113 Dobbin Dr Austin, TX 78748			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKnight, John		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 8003 Ash Valley Dr Spring, TX 77379			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moyer, Ken		Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2702 Kerrybrook Lane Austin, TX 78757			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nadler-Olenick, Rae		Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1205 E. 52nd #101 Austin, TX 78713			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/15 Report: 13/22	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nipper, Joe  6 Contributor address; City; State; Zip Code 13316 Armaga Springs Rd Austin, TX 78727	7 Amount of contribution (\$)  \$20.00	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  07/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ogle, Forrest  Contributor address; City; State; Zip Code 4145 Anitra Circle Colorado Springs, CO 80918	Amount of contribution (\$)  \$50.00	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  07/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olbert, Diane  Contributor address; City; State; Zip Code 1906 Raleigh Ave Austin, TX 78703	Amount of contribution (\$)  \$25.00	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  07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olbert, Diane  Contributor address; City; State; Zip Code 1906 Raleigh Ave Austin, TX 78703	Amount of contribution (\$)  \$25.00	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  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Olbert, Diane  Contributor address; City; State; Zip Code 1906 Raleigh Ave Austin, TX 78703	Amount of contribution (\$)  \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 12/15 Report: 14/22	
2 FILER NAME English, Edwin (Mr.)				3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orshalick, David		7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 2710 W. 49 1/2 Street Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Osborne, Greg		Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 3 Bridgenorth Lane San Antonio, TX 78218			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peloquin, Susan		Amount of contribution (\$)  \$10.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 13429 Equestrian Cove Austin, TX 78727			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pence, Burt		Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 10299 Wagon West Rd Austin, TX 78736			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Putram, Wilma Joy		Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 105 Dawson Trail Georgetown, TX 78633			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/15 Report: 15/22	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raine, Patricia  6 Contributor address; City; State; Zip Code 3415 Ambleside Austin, TX 78759	7 Amount of contribution (\$)  \$50.00	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  09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Steven  Contributor address; City; State; Zip Code 8309 Bowling Green Austin, TX 78757	Amount of contribution (\$)  \$50.00	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  08/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ross, George  Contributor address; City; State; Zip Code 2703 Benbrook Austin, TX 78757	Amount of contribution (\$)  \$100.00	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  07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sauve, Michael  Contributor address; City; State; Zip Code 909 Timber Trail Cedar Park, TX 78613	Amount of contribution (\$)  \$25.00	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  08/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, Betty  Contributor address; City; State; Zip Code 4700 Toreador Dr Austin, TX 78746	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) Retired	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 14/15 Report: 16/22	
2 FILER NAME English, Edwin (Mr.)			3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date  08/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, James  6 Contributor address; City; State; Zip Code 4700 Toreador Dr Austin, TX 78746		7 Amount of contribution (\$)  \$350.00	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) Corporate Executive			10 Employer (See Instructions) Retired	
Date  08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Clay  Contributor address; City; State; Zip Code 11906 Conann Court Austin, TX 78753		Amount of contribution (\$)  \$40.00	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  08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sterzing, Phil  Contributor address; City; State; Zip Code 1407 W. 51st St Austin, TX 78756		Amount of contribution (\$)  \$100.00	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  09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tucci, Cathy  Contributor address; City; State; Zip Code 1545 Windcreek Ct Ft. Collins, CO 80526		Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Mother			Employer (See Instructions) Unemployed	
Date  09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walden, Steven  Contributor address; City; State; Zip Code 13130 Bayfield Dr Austin, TX 78727		Amount of contribution (\$)  \$50.00	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 CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		<b>1 PAGE #</b> Schedule: 15/15 Report: 17/22	
<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 12121212	
<b>4 Date</b>  09/08/2014	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Whalen, William  ..... <b>6 Contributor address; City; State; Zip Code</b> 4308 Ganymede Austin, TX 78727	<b>7 Amount of contribution (\$)</b>  \$50.00	<b>8 In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  07/01/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Zigrossi, Patricia  ..... <b>Contributor address; City; State; Zip Code</b> 11300 Pickfair Dr Austin, TX 78750	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>    (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

**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.

<b>1 PAGE #</b> Schedule: 1/5 Report: 18/22		<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 12121212	
<b>4 Date</b> 09/15/2014	<b>5 Payee name</b> Ace Printing				
<b>6 Amount (\$)</b> \$366.60	<b>7 Payee address</b> City: State: Zip Code 7807 Doncaster Austin, TX 78745				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard signs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 08/19/2014	<b>Payee name</b> Azul Strategies				
<b>Amount (\$)</b> \$500.00	<b>Payee address</b> City: State: Zip Code 1802 Ann Arbor Austin, TX 78704				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising assistance and advice		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 09/17/2014	<b>Payee name</b> Azul Strategies				
<b>Amount (\$)</b> \$1,220.00	<b>Payee address</b> City: State: Zip Code 1802 Ann Arbor Austin, TX 78704				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising assistance and advice		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 07/01/2014	<b>Payee name</b> CDM Media				
<b>Amount (\$)</b> \$3,050.00	<b>Payee address</b> City: State: Zip Code 919 Congress #250 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Personal Assistant and Campaign Infrastructure		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 2/5 Report: 19/22		<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 12121212	
<b>4 Date</b> 08/01/2014	<b>5 Payee name</b> CDM Media				
<b>6 Amount (\$)</b> \$3,050.00	<b>7 Payee address</b> City: State: Zip Code 919 Congress #250 Austin, TX 78701				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Personal Assistant and Campaign Infrastructure		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 09/01/2014	<b>Payee name</b> CDM Media				
<b>Amount (\$)</b> \$1,683.00	<b>Payee address</b> City: State: Zip Code 919 Congress #250 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Personal Assistant and Campaign Infrastructure		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 07/31/2014	<b>Payee name</b> Facebook				
<b>Amount (\$)</b> \$21.84	<b>Payee address</b> City: State: Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook page promotion		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Office sought: Office held:				
<b>Date</b> 08/31/2014	<b>Payee name</b> Facebook				
<b>Amount (\$)</b> \$5.00	<b>Payee address</b> City: State: Zip Code 1601 Willow Road Menlo Park, CA 94025				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook page promotion		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 3/5 Report: 20/22		<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 12121212	
<b>4 Date</b> 09/11/2014	<b>5 Payee name</b> Genuine Joe Coffee				
<b>6 Amount (\$)</b> \$22.80	<b>7 Payee address</b> City; State; Zip Code 2001 W. Anderson Lane Austin, TX 78757				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meet and Greet Food		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/09/2014	<b>Payee name</b> It's A Grind				
<b>Amount (\$)</b> \$34.06	<b>Payee address</b> City; State; Zip Code 4005 W. Parmer Lane Austin, TX 78729				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meet and Greet Food		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/31/2014	<b>Payee name</b> Pay Pal				
<b>Amount (\$)</b> \$3.23	<b>Payee address</b> City; State; Zip Code 2211 N. First St San Jose, CA 95131				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service Charge		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/25/2014	<b>Payee name</b> Pay Pal				
<b>Amount (\$)</b> \$1.75	<b>Payee address</b> City; State; Zip Code 2211 N. First St San Jose, CA 95131				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service charge		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
FeesGifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing ExpenseSalaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental ExpenseLoan 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.

<b>1 PAGE #</b> Schedule: 4/5 Report: 21/22		<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 12121212	
<b>4 Date</b> 07/31/2014	<b>5 Payee name</b> Piryx				
<b>6 Amount (\$)</b> \$6.53	<b>7 Payee address</b> City: State: Zip Code 144 Second St San Francisco, CA 94105				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Fees		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service charge		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/31/2014	<b>Payee name</b> Piryx				
<b>Amount (\$)</b> \$66.39	<b>Payee address</b> City: State: Zip Code 144 Second St San Francisco, CA 94105				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service charge		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/25/2014	<b>Payee name</b> Piryx				
<b>Amount (\$)</b> \$162.24	<b>Payee address</b> City: State: Zip Code 144 Second St San Francisco, CA 94105				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service charge		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/20/2014	<b>Payee name</b> Silver Grill				
<b>Amount (\$)</b> \$74.69	<b>Payee address</b> City: State: Zip Code 4005 W. Parmer Lane Austin, TX 78729				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meet and Greet food		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	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.

<b>1 PAGE #</b> Schedule: 5/5 Report: 22/22		<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 12121212
<b>4 Date</b> 08/01/2014	<b>5 Payee name</b> Tuggey Calvoz			
<b>6 Amount (\$)</b> \$450.00	<b>7 Payee address</b> City: State: Zip Code 900 Congress # 210 Austin, TX 78701			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Legal Services		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Finance Report review	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held: