CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C	C/OH INSTRUCTION GUI	E explains how to complete th	is form.	ACCOUNT # Ethics Commission filers)	1	PAGE # 1 of 28			
0	ANDIDATE / DEFICEHOLDER	MS/MRS/MR FIF	ast	МІ		OFFICE U			
IN	AWC	NICKNAME LA Gar		SUFFI:			LJU hlu Ba Nilsny		
O M	CANDIDATE / DEFICEHOLDER MAILING DDRESS Change of Address	P.O. Box 41795 Austin, TX 78704	E <i>₿</i> ; CΠΥ;	STATE; ZIP CC		Hand-delivered C	RECEIVE DE ERK		
5 C	AMPAIGN	MS/MRS/MR FIF	nst	MI		Processed	·		
	REASURER IAME	Jack	kie			Imaged			
		NICKNAME LA	st odman	SUFFI					
T A	AMPAIGN REASURER DDRESS Residence or business)	STREET ADDRESS (NO PO BOX PLEA 1010 Austin Highlands Austin, TX 78745	SE); APT/SUITE#;	CITY; STATE); ZIP (CODE			
Т	CAMPAIGN REASURER HONE	AREA CODE PHONE NU (512) 445-2975	MBER	EXTENSION					
8 .A	EPORT TYPE		h day before election day before election	Runoff Exceeded \$500	<u></u>	15th day after ca appointment (off Final report (Atta			
9 P	ERIOD COVERED	Month Day Year		Month	Day Y	ear			
•		07/01/2014	THROUGH	09/	25/2014				
10 E	LECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE Primary	Runoff	X Gener	al	Special		
11 0	PFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT City Council D					
	GO TO PAGE 2								

Austin, Texas 78711-2070 **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

FORM C/OH COVER SHEET PG 2

00: 1 0:11 a	· O IALO			OOVER	Oneel Fa 2
13 C/OH NAME Garza	a, Delia			14 ACCOUNT # 00000009	(Ethics Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by polit out the candidate's or officeholder's y receive notice of such expenditure	knowledge or consent. Candidate	ndidate / officeholder. es and officeholders a	These expenditures may are required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	· ·		
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURE	ER NAME		
additional pages					
		COMMITTEE CAMPAIGN TREASURE	ER ADDRESS		
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$ S, LOANS, OR GUARANTEES OF		\$	2,365.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GU	JARANTEES OF LOANS)	\$	20,197.00
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$1	100 OR LESS, UNLESS ITEMIZEI	\$	154.16
	4. TOTAL	POLITICAL EXPENDITURES		\$	19,932.02
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAIN AY OF THE REPORTING PERIOD	NTAINED AS OF THE	\$	13,350.81
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUT AY OF THE REPORTING PERIOD	STANDING LOANS AS OF THE	\$	5,025.00
17 AFFIDAVIT					
Description of the Control of the Co		ist	wear, or affirm, under penalty true and correct and includes a under Title 15, Election Code	all information requ	
	SUSAN C. HA Notary Public, State My Commission Mgy 14, 20	of Texas		22	
	May 16, 2015 Signature of Candidate or Officeholder				
AFFIX NOTARY	STAMP / SEAL ABO\	<u> </u>			, 14
Sworn to and subscribed before me, by the said DUNA GAZC, this the day of 10 Gobx, 20 14, to certify which, witness my hand and seal of office.					
\(\frac{1}{\sqrt{3\sqt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqnt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sqrt{3\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}		-	Harn	αl	, No.
	UNI) In Con	TTAKE	/ U (()7/2

Signature of officer administering oath/

Print name of officer administering oath

Title of officer administering oath

	The Instruction	IN GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/	17 Report: 3/28				
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)				
4	Date	5 Full name of contributor	C00011114)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	09/22/2014	6 Contributor address; City; State; Zip Code 1625 L St NW Washington, DC 20036-5665		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	<u> </u>				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/06/2014	Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703-4126		\$100.00	 -				
				<u> </u>	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor ut-of-state PAC (ID# Alvarez, Arturo	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/10/2014	Contributor address; City; State; Zip Code 4801 Allison Cv Austin, TX 78741-7320		\$150.00	1 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor ut-of-state PAC (ID# Anaya, Charles	·	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/04/2014	Contributor address; City; State; Zip Code 217 Rose Ln San Antonio, TX 78212-3732		\$100.00	1 				
				(If travel outside of	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)				
	09/16/2014	Contributor address; City; State; Zip Code 5817 Wilcab Rd		\$350.00	 				
		Ste 4 Austin, TX 78721-2806		(If travel outside of	Texas, complete Schedule T)				
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)					

	OTHER	THAN PLEDGES OR LOAD	49 		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 2/1	17 Report: 4/28
2	FILER NAME	Garza, Delia	_	3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Austin/Travis County EMS Employee Association		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/25/2014	6 Contributor address; City; State; Zip Code 5817 Wilcab Rd Ste 3 Austin, TX 78721-2806		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Calvoz, Raul		Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/25/2014	Contributor address; City; State; Zip Code 3301 Cherry Ln Austin, TX 78703-2717		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Tuggy Calvoz L		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/24/2014	Contributor address; City; State; Zip Code 404 W 32nd St Austin, TX 78705-2306		\$100.00	
	·				Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	tn-kind contribution description (if applicable)
	08/08/2014	Contributor address; City; State; Zip Code 732 Freeman Dr San Antonio, TX 78228-3835		\$200.00	!
				•	Texas, complete Schedule T)
	Principal occup Attorney/Dev	eation / Job title (See Instructions) eloper	Employer (See In Self Employed	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Cirkiel, Bria)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 3208 Sunny Ln Austin, TX 78731-5434		\$350.00	
		Table 1777 OF OTOT		(If travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See In	`	, , , , , , , ,

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/1	7 Report: 5/28
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Cirklel, Martin		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/25/2014	6 Contributor address; City; State; Zip Code 1201 County Road 138 Hutto, TX 78634-5127		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	eation / Job title (See Instructions)	10 Employer (See In Cirkiel and Asso		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 1201 County Road 138 Hutto, TX 78634-5127	•••••	\$350.00	
		,			Texas, complete Schedule T)
	Principal occup Owner/Broke	eation / Job title (See Instructions) r	Employer (See In: M.E.GeneJohns		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 3208 Sunny Ln Austin, TX 78731-5434		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chef/Owner	oation / Job title (See Instructions)	Employer (See In Parkside Projec		
	Date	Full name of contributor ut-of-state PAC (ID# Curtis, Matthew)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 807 Blanco St Apt 203		\$200.00	
		Austin, TX 78703-4956		(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	pation / Job title (See Instructions)	Employer (See In Homeaway	-	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/14/2014	Contributor address; City; State; Zip Code 2514 E Cesar Chavez St		\$150.00	
		Austin, TX 78702-4702		(If travel outside of	Texas, complete Schedule T)
	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)	

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T	he instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 4/1	7 Report: 6/28
2 FI	LER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Eddie Rodriguez Campaign Fund)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07	//31/2014	6 Contributor address; City; State; Zip Code PO Box 2436 Austin, TX 78768-2436		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9 Pi	rincipal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Frank, Abigail		Amount of contribution (\$)	In-kind contribution description (if applicable)
08	3/26/2014	Contributor address; City; State; Zip Code 1920 Mary Ella Dr Leander, TX 78641-2604	******	\$50.00	l
				(If travel outside of	Texas, complete Schedule T)
Pı	rincipal occup	ation / Job title (See Instructions)	Employer (See In	1	· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
09	9/13/2014	Contributor address; City; State; Zip Code 1920 Mary Ella Dr Leander, TX 78641-2604		\$112.00	{
				(If travel outside of	Texas, complete Schedule T)
Ρī	rincipal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Garza, Malorie)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08	3/21/2014	Contributor address; City; State; Zip Code 548 Private Road 180 Helotes, TX 78023-2404		\$100.00	
				(if travel outside of	Texas, complete Schedule T)
Pi	rincipal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
90	3/22/2014	Contributor address; City; State; Zip Code PO Box 1202 East Lansing, MI 48826-1202	• • • • • • • • • • • • • • • • • • • •	\$300.00	
		Last Lationity, 1411 4002071202		(If travel outside of	Texas, complete Schedule T)
		pation / Job title (See Instructions) Ith Investigation Division	Employer (See In State of Michiga	structions)	

	The Instruction	on Guide explains how to com	plete this form.		1 PAGE # Schedule: 5/	17 Report: 7/28			
2	FILER NAME	Garza, Delia			3 ACCOUNT # 00000009	(Ethics Commission filers)			
4	Date	5 Full name of contributor Gene, Fatih	☐ out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	09/16/2014	6 Contributor address; 8106 Chainfire Cv Austin, TX 78729-6421	City; State; Zip Code		\$150.00	 			
					(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instruction	s)	10 Employer (See In	structions)				
	Date	Full name of contributor Goff, Eric	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/22/2014	Contributor address; 2500 E 2nd St Austin, TX 78702-4708	City; State; Zip Code		\$350.00	 			
					· ·	Texas, complete Schedule T)			
	Co-founder	ation / Job title (See Instruction	s)	Employer (See In Compost Pedal					
	Date	Full name of contributor Gonzalez, Adam	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) food & beverages for event			
	08/12/2014	Contributor address; 1111 Red River Austin, TX 78701	City; State; Zip Code		\$350.00	†			
					(if travel outside of	Texas, complete Schedule T)			
	Principal occup Owner	eation / Job title (See Instruction	s)	Employer (See In Serrano's Espe	structions) cial at Symphony	Square			
	Date	Full name of contributor	ut-of-state PAC (ID#	t)	Amount of	In-kind contribution			
		Gonzalez, Julio			contribution (\$)	description (if applicable)			
	09/25/2014	Contributor address; 1408 S 3rd St Austin, TX 78704-2308	City; State; Zip Code		\$100.00] 			
					(if travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	structions)				
	Date	Full name of contributor Gripton, Tanya	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	08/15/2014	Contributor address; 5506 Windward Dr Austin, TX 78723-4015	City; State; Zip Code		\$80.00	 			
					<u> </u>	Texas, complete Schedule T)			
	Principal occup	oation / Job title (See Instruction	is)	Employer (See In	structions)				

The Instruction Guide explains how to complete this form.	1 PAGE#
2 FILER NAME Garza, Delia	Schedule: 6/17 Report: 8/28 3 ACCOUNT # (Ethics Commission filers) 00000009
4 Date 5 Full name of contributor ut-of-state PAC (ID#) Hall, David	7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
09/05/2014 6 Contributor address; City; State; Zip Code 1011 S Indiana Ave Weslaco, TX 78596-7503	\$200.00
	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) Attorney 10 Employer (See Texas Rio Gr	
Date Full name of contributor Out-of-state PAC (ID#) Herring, William	Amount of In-kind contribution contribution (\$) description (if applicable)
09/18/2014 Contributor address; City; State; Zip Code 1000 E 38th St Austin, TX 78705-1813	\$100.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer (See	e Instructions)
Date Full name of contributor Out-of-state PAC (ID#) Hughes Gonzales, Lisa	Amount of contribution (\$) In-kind contribution description (if applicable) room rental for event
O8/12/2014 Contributor address; City; State; Zip Code 1111 Red River St Austin, TX 78701	\$350.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) real estate broker Employer (See self	e Instructions)
Date Full name of contributor out-of-state PAC (ID#) Hutchison, Janet	Amount of In-kind contribution contribution (\$) description (if applicable)
09/22/2014 Contributor address; City; State; Zip Code 2602 Cavileer Ave Austin, TX 78757-2710	\$150.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer (See	e Instructions)
Date Full name of contributor ut-of-state PAC (ID#) Jeffery, Neil	Amount of In-kind contribution contribution (\$) description (if applicable)
07/27/2014 Contributor address; City; State; Zip Code 2303 Dovehill Dr Austin, TX 78744-4313	\$100.00
risouri, 17 rot Tr Tota	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Employer (See	e Instructions)

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OTHER	TITAN PLEDGES OR LOAD	42		
The Instruct	ION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/1	7 Report: 9/28
2 FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Johnson, Cynthia		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/16/2014	6 Contributor address; City; State; Zip Code 6800 W Gate Blvd # 132-332 Austin, TX 78745-4883		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
09/05/2014	Contributor address; City; State; Zip Code 4115 Abingdon Dr Garland, TX 75043-7251		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu COO	pation / Job title (See Instructions)	Employer (See In: Force Multiplier		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 4115 Abingdon Dr Garland, TX 75043-7251		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Homemaker	pation / Job title (See Instructions)	Employer (See In: Homemaker	structions)	
Date	Full name of contributor ut-of-state PAC (ID# La Voz Newspapers)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/12/2014	Contributor address; City; State; Zip Code PO Box 19457 Austin, TX 78760-9457		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Lambert, Ruben		Amount of contribution (\$)	In-kind contribution description (if applicable)
08/21/2014	Contributor address; City; State; Zip Code 302 August Ln Boerne, TX 78006-3519		\$75.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		- The semplete semestre ()

	The Instruction	N Guide explains how to complete this form.		1 PAGE # Schedule: 8/1	17 Report: 10/28
2	FILER NAME	Garza, Delia	1 2 2 2	3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Leonard, Linda		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/11/2014	6 Contributor address; City; State; Zip Code 7122 Royal Ln Dallas, TX 75230-3608		\$350.00	i
				1 -	Texas, complete Schedule T)
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In none	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/11/2014	Contributor address; City; State; Zip Code 7122 Royal Ln Dallas, TX 75230-3608		\$350.00	
				· ·	Texas, complete Schedule T)
	Principal occup Chairman and	ation / Job title (See Instructions) I CEO	Employer (See In Force Multiplier		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 5100 Martin Ave Austin, TX 78751-2119		\$60.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Limon, Jacob)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/10/2014	Contributor address; City; State; Zip Code 1802 Ann Arbor Ave Austin, TX 78704-3229		\$100.00	
				(If travel outside of	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)
	07/01/2014	Contributor address; City; State; Zip Code 9919 Warwana Rd Houston, TX 77080-7609		\$35.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 9/	17 Report: 11/28				
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)				
4	Date	5 Full name of contributor uut-of-state PAC (fD# Littell, Cynthia Gabriella)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	07/01/2014	6 Contributor address; City; State; Zip Code 9919 Warwana Rd Houston, TX 77080-7609		\$35.00	 				
	<u></u>			(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)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/05/2014	Contributor address; City; State; Zip Code 3900 Sidehill Path Austin, TX 78731-1418		\$350.00	1 1				
				, , , , , , , , , , , , , , , , , , , ,	Texas, complete Schedule T)				
		ation / Job title (See Instructions) Affairs Consultant	Employer (See In Philips & Meach	structions) num Public Affairs					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/21/2014	Contributor address; City; State; Zip Code 3412 Green Emerald Ter Austin, TX 78739-7615		\$250.00	 				
				(if travel outside of	Texas, complete Schedule T)				
	Principal occup CPA	ation / Job title (See Instructions)	Employer (See In R. Mendoza & (
	Date	Full name of contributor ut-of-state PAC (ID# Michener, Elizabeth	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	09/16/2014	Contributor address; City; State; Zip Code 146 18th St New Orleans, LA 70124-1226		\$350.00	1 1				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Executive As:	ation / Job title (See Instructions) sistant	Employer (See In Force Multiplier						
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	09/16/2014	Contributor address; City; State; Zip Code 146 18th St New Orleans, LA 70124-1226		\$350.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup Manager	ation / Job title (See Instructions)	Employer (See In Hertz	structions)					

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_	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 10)/17 Report: 12/28
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ortega Law, PLLC	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/15/2014	6 Contributor address; City; State; Zip Code 818 W 10th St Austin, TX 78701-2063		\$100.00	
	•			(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# Ozbirn, Paul	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 1600 West Ave Apt 12		\$350.00	
		Austin, TX 78701-1544		· ·	Texas, complete Schedule T)
	Principal occup Beverage Din	ector	Employer (See In Parkside Projec		
	Date	Full name of contributor ut-of-state PAC (ID: Peavey, Ross	')	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 903 E 15th St Austin, TX 78702-1024		\$100.00	
				(if trave) outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See În	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2014	Contributor address; City; State; Zip Code 3605 Peregrine Falcon Dr Austin, TX 78746-7438		\$350.00	
					Texas, complete Schedule 1)
	Principal occup Consultant	eation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	
		None Austin, TX 78704-5329		(If travel outside of	Texas, complete Schedule T)
	Principal occup Paralegal	oation / Job title (See Instructions)	Employer (See In Loewy Law Firr		

POLITICAL CONTRIBUTIONS

	OTHER	THAN PLEDGES OR LOAN	15		
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 11	/17 Report: 13/28
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/18/2014	6 Contributor address; City; State; Zip Code 349 E Charity Cv Salt Lake City, UT 84103-5205		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Managing Dir	pation / Job title (See Instructions) rector	10 Employer (See In Reagan Nationa		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014 Contributor address; City; State; Zip Code 1775 N Warm Springs Rd Salt Lake City, UT 84116-2353				\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	pation / Job title (See Instructions)	Employer (See In none	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/17/2014	Contributor address; City; State; Zip Code 4100 McBrine Pl Austin, TX 78746-1928		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	pation / Job title (See Instructions)	Employer (See In none	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/17/2014	Contributor address; City; State; Zip Code 1775 N Warm Springs Rd Salt Lake City, UT 84116-2353		\$350.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Chairman	pation / Job title (See Instructions)	Employer (See In The Reagan Co		
	Date	Full name of contributor ut-of-state PAC (ID# Reagan, William)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/17/2014	Contributor address; City; State; Zip Code 4100 McBrine Pl Austin, TX 78746-1928		\$350.00	
		Auguil, 17/0/40-1920			l
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	President	ranou i non una (see iliannennia)	Reagan Nation		

	The Metricion	N GUIDE explains how to complete this form.		1 PAGE#	
	THE INSTRUCTION			Schedule: 12	/17 Report: 14/28
2	FILER NAME	Garza, Delia		3 ACCOUNT#	(Ethics Commission filers)
				00000009	•
4	Date	5 Full name of contributor ut-of-state PAC (ID#Rotkoff, Jeff)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/12/2014	6 Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238		\$75.00	
				(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# Rotkoff, Jeff)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238		\$35.00	
		,		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
		Saenz, Marc Jr.		contribution (\$)	description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 6406 Back Bay Ln		\$75.00	
		Austin, TX 78739-1523			
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
		Scott, Harlan		contribution (\$)	description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 1000 San Marcos St		\$350.00	
		451 Austin, TX 78702-2605			
		,		(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)			Employer (See In		
	Manager		Parkside Projec	ets	
	Date	Full name of contributor ut-of-state PAC (ID# Shade, Randi)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/17/2014	Contributor address; City; State; Zip Code 1822 W 10th St	•••••	\$100.00]
		Austin, TX 78703-3910			l
:				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	V	THAIT EEDGEO ON EOAI	10		
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13.	/17 Report: 15/28
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Sheppard, Jade Chang		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/17/2014	6 Contributor address; City; State; Zip Code 12425 Dorsett Rd Austin, TX 78727-5807		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Construction	ation / Job title (See Instructions)	10 Employer (See In: Gideon	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/13/2014	Contributor address; City; State; Zip Code 1920 Mary Ella Dr. Leander, TX 78641		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
•	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	, , , <u>, –</u>
•	Date	Full name of contributor ut-of-state PAC (ID# Smith, Curtis)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 130 Cumberland Rd Apt 220 Austin, TX 78704-5482		\$100.00	 - -
	Principal occup	eation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
		·	, , ,	,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/01/2014	Contributor address; City; State; Zip Code 1010 Westland Ridge Rd Dripping Springs, TX 78620-4263		\$100.00	
					Texas, complete Schedule T)
	Principal occup	eation / 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 11720 E 21st St		\$350.00	<u> </u>
		Ste D Tulsa, OK 74129-1824		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 14	./17 Report: 16/28
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Stuart, Donald)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/17/2014	6 Contributor address; City; State; Zip Code 4105 Long Champ Dr Austin, TX 78746-1150		\$100.00	
				(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)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/02/2014	Contributor address; City; State; Zip Code 1613 W 9th 1/2 St Austin, TX 78703-4711		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired Firefig	ation / Job title (See Instructions) ghter	Employer (See In Retired	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/11/2014	Contributor address; City; State; Zip Code 2018 General Pershing St New Orleans, LA 70115-5436		\$350.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In none	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/11/2014	Contributor address; City; State; Zip Code 2018 General Pershing St New Orleans, LA 70115-5436		\$350.00	i ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup EVP	ation / Job title (See Instructions)	Employer (See In Force Multiplier		•
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 12604 Rush Creek Ln Austin, TX 78732-1992		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Marketing			Employer (See In Force Multiplier	•	

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	OTHER THAN PLEDGES ON LOANS								
	The INSTRUCTION	N GUIDE explains how to complete this form.	***	1 PAGE# Schedule: 15	/17 Report: 17/28				
2	FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)				
4	Date	5 Full name of contributor ut-of-state PAC (ID# Taylor, Elizabeth)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	08/16/2014	6 Contributor address; City; State; Zip Code 4611 Lambs Ln Austin, TX 78744-5202		\$100.00	 				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See Ins	structions)	· · · · · · · · · · · · · · · · · · ·				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) vote file access				
	07/23/2014	Contributor address; City; State; Zip Code 4818 E. Ben White Blvd. Ste. 104 Austin, TX 78741		\$350.00	I I				
		Addut, TATOTAL		(If travel outside of	Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)					
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	08/12/2014	Contributor address; City; State; Zip Code 1201 Tinnin Ford Rd Apt 2 Austin, TX 78741-1601		\$100.00	 				
				(If travel outside of	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)				
	07/17/2014	Contributor address; City; State; Zip Code 11605 Oak Knoll Dr Austin, TX 78759-3804		\$100.00	 				
				(If travel outside of	Texas, complete Schedule T)				
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)					
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	09/22/2014	Contributor address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757-2328	• • • • • • • • • • • • • • • • • • • •	\$200.00	 				
		Ausuri, 1A (0/3/-2320			·				
	Principal cocus	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)				
	Consultant	adon / 300 tide (366 ilistractions)	Austin Energy	au ucuuna)	•				

	The Instruction	on Guide explains how to com	plete this form.		1 PAGE# Schedule: 16	i/17 Report: 18/28
2	FILER NAME	Garza, Delia			3 ACCOUNT# 00000009	(Ethics Commission filers)
4	Date	5 Full name of contributor Uresti, Jaclyn	out-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/16/2014	6 Contributor address; 300 N Lamar Blvd Apt 133 Austin, TX 78703-4653	City; State; Zip Code		\$250.00	
		•			(If travel outside of	Texas, complete Schedule T)
9	Principal occup Senior Adviso	ation / Job title (See Instruction or	ns)	10 Employer (See In State of Texas	structions)	
	Date	Full name of contributor Vale, Kathy	out-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/12/2014	Contributor address; 2702 Dupoint Cv Austin, TX 78748-5154	City; State; Zip Code		\$100.00	1 ! !
	Driverian I and				1 -	Texas, complete Schedule T)
	Manager	ation / Job title (See Instruction	15)	Employer (See In Texas Commis	structions) sion on Environme	ental Quality
	Date	Full name of contributor Vale, Kathy	☐ out-of-state PAC (ID#	})	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2014	Contributor address; 2702 Dupoint Cv Austin, TX 78748-5154	City; State; Zip Code		\$150.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Manager	eation / Job title (See Instruction	ns)	Employer (See Instructions) Texas Commission on Environmental Quality		
	Date	Full name of contributor Valera, Jose	☐ out-of-state PAC (ID#	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; 1601 E 5th St Apt 208 Austin, TX 78702-4495	City; State; Zip Code		\$200.00	
Principal occupation / Job title (See Instructions)			Complement (Comple		Texas, complete Schedule T)	
	Attorney	ation 7 300 title (See Instruction	15)	Employer (See In Wilson Sonsini	Goodrich Rosati	
	Date	Full name of contributor Walker, Nathanie!	out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; 5710 Abilene Trl Austin, TX 78749-2113	City; State; Zip Code		\$200.00	
_					(If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) State Employee				Employer (See In Representative	structions) Eddie Rodriguez	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	1 S		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	/17 Report: 19/28
2 FILER NAME	Garza, Delia		3 ACCOUNT # 00000009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Wang, Li		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/03/2014	6 Contributor address; City; State; Zip Code 4619 Peach Grove Rd Austin, TX 78744-3107		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occur	pation / Job title (See Instructions)	10 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 6509 Scenic Cv Austin, TX 78739-1420		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703-5279		\$100.00	
	Ausun, 17 70703-3279		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	·	Total of the second of the sec

Texas Ethics Com	mission P.O.Box 12070 Austin, Texas 78711	-2070 (512)463-5800 TDD 1-800-735-2989
POLITIC	AL EXPENDITURES	SCHEDULE F
	EXPENDITURE CATE	GORIES
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/ing Legal Services Solicitation/Fund	Contract Labor Iraising Expense Contributions/Donations Made By Strict Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 1/9 Re 4 Date	port: 20/28 Garza, Delia 5 Payee name	00000009
08/12/2014	Aaron Victor Photography	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$225.00	802 Rolling Meadow Dr. Pflugerville, TX 78660	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) photography
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
08/12/2014 Amount (\$)	Aaron Victor Photography Payee address City; State; Zip Code	
\$125.00	802 Rolling Meadow Dr. Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (if travel outside of Texas, complete Schedule T) photography
EAFEIIDII OILE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 07/10/2014	Payee name Ace Printing	
Amount (\$)	Payee address City; State; Zip Code	
\$316.09	7807 Doncaster Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) printing Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 09/15/2014	Payee name Ace Printing	
Amount (\$) \$1,116.11	Payee address City; State; Zip Code 7807 Doncaster Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) printing

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Office sought: Office held:

Category (See Categories listed at the top of this schedule)

Accounting/Banking

Candidate / Officeholder name

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

(If travel outside of Texas, complete Schedule T)

Office held:

Description

credit card processing fees

Office sought:

Check if Austin, TX, officeholder living expense

POLITIC	AL EXPENDITURES	SCHEDULE F
And and other Pro-	EXPENDITURE CATEGORIA	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundr	raising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Plantal Expense OTHER (enter a category not listed above)
1 PAGE# Schedule:3/9 Re	2 FILER NAME Garza, Delia	3 ACCOUNT # (TEC filers) 00000009
4 Date 07/03/2014	5 Payee name First Data	
6 Amount (\$) \$25.90	7 Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description (If travel outside of Texas, complete Schedule T) credit card processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
08/04/2014	First Data	
Amount (\$) \$13.30	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule 1) Credit card processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
08/04/2014	First Data	
Amount (\$) \$137.30	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) credit card processing fees Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	

First Data

Payee address

Accounting/Banking

5565 Glenridge Connector NE Atlanta, GA 30342

Candidate / Officeholder name

Category (See Categories listed at the top of this schedule)

City; State; Zip Code

Description (If travel outside of Texas, complete Schedule T) credit card processing fees

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

08/04/2014 Amount (\$)

PURPOSE

OF EXPENDITURE

Complete ONLY if direct expenditure to benefit C/OH

\$20.13

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES 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

Fees	Printing	Expense The Instruction Gui	Office Overhead/	Rental Expense	OTHER (enter	a category not listed above)
1 PAGE#		2 FILER NAME		•	· · ·	3 ACCOUNT # (TEC filers)
Schedule: 4/9 Re	enort: 23/28	Garza, Delia				00000009
4 Date	5 Payee name					1 00000009
09/03/2014	First Data					•
6 Amount (\$)	7 Payee addres	s City; State; 2	Zin Code			
, , ,	i ,	=	zip Code			
\$8.70	Atlanta, GA	lge Connector NE 30342				
	,					
8	(a) Category (So	Categories listed at the top of the	hio nobodulo)	(b) Description	(If traval autoida	of Texas, complete Schedule T)
PURPOSE	Accounting/E		ilis scriedule)		processing fee	es
OF	riododrinigri	sa ming			,	
EXPENDITURE				Chack is aug	tin, TX, officehold	or Bulga avanga
9 Complete ONLY if	Candidate / O	fficeholder name		Office s		Office held:
direct expenditure	oundidato? o	MOSHOLON MEMO		O IIIOC 3	oogiit.	Cindo ficia.
to benefit C/OH						
Date	Payee name			-		
09/03/2014	First Data					
Amount (\$)	Payee addres	s City; State; 2	Zip Code			
\$12.67		ige Connector NE				
·	Atlanta, GA	30342				
	Category (See	Categories listed at the top of the	his schedule)	Description		of Texas, complete Schedule T)
PURPOSE OF	Accounting/F	Banking		credit card	processing fee	es —
EXPENDITURE				_		
				Check if Aus	tin, TX, officehold	er living expense
Complete ONLY if	Candidate / O	fficeholder name		Office s	ought:	Office held:
direct expenditure to benefit C/OH						
Data	Dayno nomo	-				
Date	Payee name First Data					
09/03/2014		- 0:	7-0-1-			
Amount (\$)	Payee addres	** '	Zip Code			
\$27.11	5565 Glenrio Atlanta, GA	ige Connector NE				
	Aliania, GA	303 1 2		•		
	Ontono (On	0-4		D	***	
PURPOSE		e Categories listed at the top of the	nis schedule)	Description credit card	processing fee	of Texas, complete Schedule T)
OF	Accounting/t	Danking		0.00.00.00	processing io	
EXPENDITURE				ln		
Complete ONLY if	Candidate / O	fficeholder name		Office s	tin, TX, officehold	er living expense Office held:
direct expenditure	Cardidate / O	moonder neme		Onice 5	vugiii.	Onice neru.
to benefit C/OH				- · · · ·		
Date	Payee name					
07/07/2014	Graphic Gra	nola				
Amount (\$)	Payee addres	s City; State; 2	Zip Code			
\$488.75	1012 E. 38th	n 1/2 St.				
\$ 100.10	Austin, TX 7					
	Category (See	e Categories listed at the top of the	his schedule)	Description	(If travel outside	of Texas, complete Schedule T)
PURPOSE	Consulting E	xpense		Graphic de	esign services	
OF EXPENDITURE				<u> _</u>		
				Check if Aus	tin, TX, officehold	er living expense
Complete ONLY if	Candidate / O	fficeholder name		Office s		Office held:
direct expenditure to benefit C/OH						
	L					. —

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

EXPENDITURE CATEGORIES

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 catagony cell listed above)

Event Expense Fees	Polling Expo Printing Exp		Travel Out Of D	istrict I/Rental Expense	Candi	date/Officel	nolder/Political C egory not listed a	ommittee
. 555	r intang Ex		Guide explains ho			(enter a car	egory nor nateu a	itove)
1 PAGE#	2	FILER NAME				3	ACCOUNT #	(TEC filers)
Schedule: 5/9 Re	I ⁻ a a					00000009		
4 Date	5 Payee name	_	<u> </u>			•		
07/10/2014	Graphic Granol	a						
6 Amount (\$)	7 Payee address	City; State	; Zîp Code					
\$2,868.75	1012 E. 38th 1/ Austin, TX 787							
	Ausun, 12707	Ji						
8	(a) Category (See Ca	ategories listed at the top	of this schedule)	(b) Descrip	ation (It traval o	uteido of To	xas, complete S	chodulo T)
PURPOSE	Consulting Exp				c design servic		, 5511, 5 1010 C	S,1000.00 1,
OF EXPENDITURE								
				Check i	Austin, TX, office	eholder livi	ng expense	
9 Complete ONLY if direct expenditure	Candidate / Offic	eholder name		Off	ice sought:		Office held:	
to benefit C/OH								
Date	Payee name							
09/02/2014	Home Slice Piz	za						
Amount (\$)	Payee address	City; State	; Zip Code					
\$155.06	1415 S Congre							
	Austin, TX 787	04						
				1				
PURPOSE		itegories listed at the top	of this schedule)	Descrip	otion (It travel o For event	utside of Te	xas, complete S	chedule T) 🔲
OF	Event Expense			'000'	or ovone			
EXPENDITURE				Chark I	f Austin, TX, office	aholder livi	na avnanca	
Complete ONLY if	Candidate / Offic	eholder name	****		ice sought:	CHOIGE IIV	Office held:	
direct expenditure to benefit C/OH					_			
	Davis asses							
Date 07/24/2014	Payee name Office Depot							
Amount (\$)	Payee address	City; State	· Zin Code					
\$12.97	500 E Ben Whi	· ·	, 2.p oode					
\$12.97	Austin, TX 787							
		ategories listed at the top	of this schedule)	Descrip		utside of Te	xas, complete S	chedule T)
PURPOSE OF	Office Overhea	d/Rental Expense		omce	supplies			
EXPENDITURE								j
Complete ON V.	Candidate / Office	abolder name	·		f Austin, TX, office	eholder livi		
Complete ONLY if direct expenditure	Candidate / Offic	enoluer haille		Off	ice sought:		Office held:	
to benefit C/OH								
Date	Payee name							
08/21/2014	Office Depot					. <u>.</u>	·	
Amount (\$)	Payee address	City; State	; Zip Code					
\$106.05	500 E Ben Whi Austin, TX 787	te Blvd #200						
•	nusun, IA/0/	∪ 7						
· · · · · · · · · · · · · · · · · · ·	Category (See C	ategories listed at the top	of this schodulo)	Descrip	ofion (# travel o	uteide of To	ixas, complete S	chedule T\
PURPOSE		d/Rental Expense	or and screedure)		supplies	ucaioo Ui Te	ves, willhiele s	Cirectule 1)
OF EXPENDITURE	20				•			
				Check i	f Austin, TX, office	eholder liv	ng expense	
Complete ONLY if	Candidate / Offic	eholder name			ice sought:		Office held:	-
direct expenditure to benefit C/OH								

Description

compliance consulting

Office sought:

Check if Austin, TX, officeholder flving expense

(If travel outside of Texas, complete Schedule T)

Office held:

Category (See Categories listed at the top of this schedule)

Consulting Expense

Candidate / Officeholder name

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense

Event Expense Fees	xpense Food/Beverage Expense Travel In District se Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete thi		ntal Expense	Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) form.			
1 PAGE#		2 FILER NAME				ACCOUNT # /T	TEO Glassa
Schedule: 7/9 Report: 26/28		Garza, Delia				3 ACCOUNT # (T 00000009	EC filers)
4 Date	5 Payee name						
07/15/2014	Susan Harry	Consulting, LLC					
6 Amount (\$)	7 Payee addres	s City; State	; Zip Code		•••		
\$1,400.00	P.O. Box 30 Austin, TX 7						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense			(b) Description (If travel outside of Texas, complete Schedule T) compliance consulting Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name			Office sou		Office held:	
Date	Payee name						
08/01/2014	Susan Harry	Consulting, LLC					
Amount (\$)	Payee addres	s City; State	; Zip Code				
\$575.00	P.O. Box 30 Austin, TX 7						
DUDDOČE		e Categories listed at the top	of this schedule)			Texas, complete Sche	edule T)
PURPOSE OF	Consulting E	xpense		compliance of	consulting		
EXPENDITURE				Check if Austin	ı, TX, officeholder l	living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	fficeholder name		Office sou	ght:	Office held:	
Date	Payee name		. 				
08/29/2014	Susan Harry	Consulting, LLC					
Amount (\$)	Payee addres	s City; State	; Zip Code				
\$575.00	P.O. Box 30 Austin, TX 7						
DUDDOCT		e Categories listed at the top	of this schedule)			Texas, complete Sche	edule T)
PURPOSE OF	Consulting E	xpense		compliance of	consulting		
EXPENDITURE							
Complete Cttl V.	Candid-t- 10	fficeholder name			, TX, officeholder		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / O	mcenotoer name		Office sou	gnt: 	Office held:	
Date	Payee name						
07/10/2014	Texas Demo						
Amount (\$)	Payee addres	•	; Zip Code				
\$225.00	4818 E. Ben Austin, TX 7						
PURPOSE	Category (See Fees	e Categories listed at the top	of this schedule)	Description voter file	(If travel outside of	Texas, complete Sche	edule T)
OF EXPENDITURE				Charle if Access	n, TX, officeholder	liulna arnoso-	
Complete ONLY if	Candidate / O	fficeholder name		Office sou		Office held:	
direct expenditure to benefit C/OH					J	Onio nois.	

Salary

Office sought:

Check if Austin, TX, officeholder living expense

Office held:

PURPOSE

OF EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Salaries/Wages/Contract Labor

Candidate / Officeholder name

Texas Ethics Com	mission P.O.Box 12070 Austin, Texas 78711-2070	(512)463-5800 TDD 1-800-735-2989				
POLITIC	AL EXPENDITURES	SCHEDULE F				
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundraising Expe	pense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Dense OTHER (enter a category not listed above)				
1 PAGE# Schedule: 9/9 Re	2 FILER NAME Garza, Delia	3 ACCOUNT # (TEC filers) 00000009				
4 Date 08/15/2014	5 Payee name Williams, Marisa					
6 Amount (\$) \$750.00	7 Payee address City; State; Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description (If travel outside of Texas, complete Schedule T) Salary					
9 Complete ONLY if direct expenditure to benefit C/OH	Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held:					
Date 08/29/2014	Payee name Williams, Marisa					
Amount (\$) \$750.00	Payee address City; State; Zip Code 6509 Scenic Cove Austin, TX 78739					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description (if travel outside of Texas, complete Schedule T) [Salary Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:				
Date 09/15/2014	Payee name Williams, Marisa					
Amount (\$) \$750.00	Payee address City; State; Zip Code 6509 Scenic Cove Austin, TX 78739					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description (If travel outside of Texas, complete Schedule T) Salary					
Complete ONLY if direct expenditure to benefit C/OH	Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held:					
Date 09/12/2014	Payee name Worley Printing					
Amount (\$) \$1,775.30	Payee address City; State; Zip Code 3217 N Interstate 35 Frontage Rd Austin, TX 78735					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense P	Description (If travel outside of Texas, complete Schedule T)				

Complete ONLY if direct expenditure to benefit C/OH

Candidate / Officeholder name

Check if Austin, TX, officeholder living expense

Office held:

Office sought: