(512)463-5800 TDD 1-800-735-2989

	OFFICEHOLDER			FORI	M C/OH IEET PG 1
The C/OH Instruction Gui	DE explains how to complete this for	m (E	CCOUNT # thics Commission filers) 0000008	2 PAGE # 1 of 55	
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Amanda		MI	OFFICE (JSEONLY
NAMÉ	NICKNAME LAST Mandy Dealey		SUFFIX	Date Received	AUSTIN Re DI4 OCT
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; PO Box 300423 Austin, TX 78703	CITY;	STATE; ZIP CODE	Date Hand-delivere	
Change of Address				Receipt #	H 36 Amount
5 CAMPAIGN	MS/MRS/MR FIRST		MI	Date Processed	
TREASURER NAME	Gary			Date Imaged	
	NICKNAME LAST Valdez	· · · · · · · · · · · ·	SUFFIX	L	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); P.O. Box 685008 Austin, TX 78768	APT / SUITE #:	CITY; STATE;	ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 537-5473		EXTENSION		
8 REPORT TYPE	January 15 X 30th day	before election	Runoff		campaign treasurer officeholder only)
	July 15 8th day b	pefore election	Exceeded \$500 limit	Final report (A	ttach C/OH - FR)
9 PERIOD COVERED	Month Day Year		Month Day	Year	
	07/01/2014	THROUGH	09/25/2	014	
10 ELECTION	ELECTION DATE E Month Day Year [11/04/2014	Primary	Runoff X	General	Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if know City Council Distric		
GO TO PAGE 2					

P.O. Box 12070

Austin, Texas 78711-2070

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Dealey, Amanda 14 ACCOUNT # (Ethics Commission 00000008)					
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the ca out the candidate's or officeholder's knowledge or consent. Candida y receive notice of such expenditures			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE				
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	1,515.00	
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	47,519.00	
EXPENDITURE TOTALS	3. TOTAL I	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	ED \$	205.67	
	4. TOTAL I	POLITICAL EXPENDITURES	\$	57,150.22	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	53,183.59	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	25, ∳ 00.00	
17 AFFIDAVIT					
		l swear, or affirm, under penalt is true and correct and includes me under Title 15, Election Coo	s all information requ		
	SUSAN C. HA Notary Public, Stati My Commission Moy 16, 20	Expires II	Deal	and the second s	
Signature of Gandidate or Officeholder					
AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said Mar Alg Lele , this the day of, 20, to certify which, witness my hand and seal of office.					
Signature of officer adm	Signature of officer administering oath (Print name of officer administering oath Title of officer administering dath				

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

<u> </u>				• •	
		ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3	39 Report: 3/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor IX out-of-state PAC (ID# AFSCME PEOPLE	C00011114)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/22/2014	 Contributor-address; City; State; Zip Code 1625 L St NW Washington, DC 20036-5665 		\$350.00	
		······································			Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Alvis, Grant)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/02/2014	Contributor address; City; State; Zip Code 4002 Petes Path Austin, TX 78731-6123		\$100.00	
					· ·
			E	•	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Dout-of-slate PAC (ID# Anderson, Ada)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/27/2014	Contributor address; City; State; Zip Code 5613 Palisade Ct Austin, TX 78731-4508		\$350.00	
					Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Armstrong, James)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/13/2014	Contributor address; City; State; Zip Code 2518 El Greco Cv Austin, TX 78703-1510	· · · · · · · · · · · · · · · · · · ·	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Baer, Therese	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/11/2014	Contributor address; City; State; Zip Code 7756 Northcross Dr Ste 211		\$100.00	
1		Austin, TX 78757-1738			
				L	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3	39 Report: 4/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Bailey, Chuck)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/24/2014	6 Contributor address; City; State; Zip Code 720 Brazos St Ste 700 Austin, TX 78701-2531	••••••	\$350.00	
9 Principal occur Lawyer	Jation / Job title (See Instructions)	10 Employer (See In Self	·	Texas, complete Schedule T)
Date	Full name of contributor Dout-of-state PAC (ID# Banda, Jennifer)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/04/2014	Contributor address; City; State; Zip Code 2501 Galewood Pl Austin, TX 78703-1737		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Lawyer	pation / Job title (See Instructions)	Employer (See In Texas Hospital		
Date	Full name of contributor Dout-of-state PAC (ID# Barnes, Ben)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2014	Contributor address; City; State; Zip Code 901 S Mo Pac Expy # 1		\$350.00	┃ · · · ·
	Austin, TX 78746-5776		(if travel outside of	Texas, complete Schedule T)
Principal occup CEO	L bation / Job title (See Instructions)	Employer (See In Ben Barnes Gro	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Barnes, Melanie)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 1511 Woodlawn Blvd Austin, TX 78703-3330		\$350.00	1 1 1
			·	f Texas, complete Schedule T)
Principal occuj Attorney	pation / Job title (See Instructions)	Employer (See In Melanie H. Barr	structions) nes Attorney, PLL	c
Date	Full name of contributor Dout-of-state PAC (ID# Basciano, Joyce	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/14/2014	Contributor address; City; State; Zip Code 1907 W 34th St Austin, TX 78703-1318		\$150.00	
	L			Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See In	structions)	

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POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 3/39 Report: 5/55 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Dealey, Amanda 80000008 4 Date 5 Full name of contributor D out-of-state PAC (ID# 7 In-kind contribution Amount of 18 contribution (\$) description (if applicable) Beasley, Roger 6 Contributor address; 09/08/2014 City; State; Zip Code \$350.00 6503 Santolina Cv Austin, TX 78731-2806 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Auto Dealer Roger Beasley Mazda Full name of contributor D out-of-state PAC (ID#_ Date In-kind contribution Amount of contribution (\$) description (if applicable) Beattie, Chester Jr. 08/12/2014 Contributor address; City: State: Zip Code \$200.00 8402 Burkwood Cv Austin, TX 78735-1503 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Assistant General Counsel Health & Human Services Commission for the State of Texas Full name of contributor 🛛 🔲 out-of-state PAC (ID#_ Date Amount of In-kind contribution contribution (\$) description (if applicable) Beaver, Becky Contributor address; 07/22/2014 City; State; Zip Code \$350.00 816 Congress Ave Ste 1600 Austin, TX 78701-2638 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Law Offices of Becky Beaver Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Bennett, Frances Contributor address; 09/23/2014 City; State; Zip Code \$350.00 4120 Edwards Mountain Dr Austin, TX 78731-3901 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Bennett Flaherty, pllc Attorney Full name of contributor D out-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Bennett, Keith . Contributor address; 09/23/2014 City; State; Zip Code \$350.00 4120 Edwards Mountain Dr Austin, TX 78731-3901 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) CPA Texas Oncology

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
	ON GUIDE explains how to complete this form.	· · · · · · · · · · · ·	1 PAGE #	39 Report: 6/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
Date	5 Full name of contributor Dout-of-state PAC (ID#_ Betts, Charles)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/25/2014	6 Contributor address; City; State; Zip Code 14741 Arrowhead Dr Volente, TX 78641-9122		\$150.00	-
				Texas, complete Schedule T)
) · Principal occur	pation / Job title (See Instructions)	10 Employer (See in	structions)	
Date	Full name of contributor Dout-of-state PAC (ID#_ Black, Dawn)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/20/2014	Contributor address; City; State; Zip Code 13 Niles Rd Austin, TX 78703-3138		\$100.00	
Principal occup	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Date	Full name of contributor D out-of-state PAC (ID#		Amount of	In-kind contribution
	Blodgett, Terrell		contribution (\$)	description (if applicable)
07/18/2014	Contributor address; City; State; Zip Code 4100 Jackson Ave Apt 250 Austin, TX 78731-6052		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup None	pation / Job title (See Instructions)	Employer (See In Not Employed	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Bohart, Holly	>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 5513 Cuesta Verde Austin, TX 78746-1533		\$350.00	 !
			(if travel outside of	Texas, complete Schedule T)
Principal occuj Lawyer	bation / Job title (See Instructions)	Employer (See In Green Mountair		
Date	Full name of contributor Dout-of-state PAC (ID# Bommarito-Crouch, Marla)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 4705 Island Cv Austin		\$100.00	
	Austin, TX 78731-5144		()6 America 1 - 1 - 1 - 1	1 Taylog, com-late C-b-duit, Th
Principal occur	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/3	39 Report: 7/55
FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
Date	5 Full name of contributor Dout-of-state PAC (ID# Bonner, Cathy)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/01/2014	 Contributor address; City; State; Zip Code 4303 Canyonside Trl Austin, TX 78731-2858 		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Advertising C	ation / Job title (See Instructions) onsultant	10 Employer (See In Bonner, Inc.	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Borders, Mary)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2014	Contributor address; City; State, Zip Code 610 Guadalupe St Austin, TX 78701-2926		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Homemaker	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Bright, Elise	·)	Amount of contribution (\$)	In-kind contribution description (if applicable
08/23/2014	Contributor address; City; State; Zip Code PO Box 4753 Austin, TX 78765-4753		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Professor	pation / Job title (See Instructions)	Employer (See In Texas A&M Un		
Date	Full name of contributor D out-of-state PAC (ID# Brim, Jay)	Amount of contribution (\$)	In-kind contribution description (if applicable
08/12/2014	Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746-6316		\$35.00	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Brim; Jay	·)	Amount of contribution (\$)	In-kind contribution description (if applicable
09/09/2014	Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746-6316		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
			1	· · · · · · · · · · · · · · · · · · ·

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POLITICAL CONTRIBUTIONS **OTHER THAN PLEDGES OR LOANS**

SCHEDULE	A
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		GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/3	39 Report: 8/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Brimble, Raymond)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/10/2014	6 Contributor address; City; State; Zip Code 2800 Robbs Run Austin, TX 78703-1637		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup President & C	bation / Job title (See Instructions) DEO	10 Employer (See In Lynxs Group, Ll		
	Date	Full name of contributor Dout-of-state PAC (ID# Brooks, Daniel)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/23/2014	Contributor address; City; State; Zip Code 4500 Crestway Dr Austin, TX 78731-5202		\$200.00	I [
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Architect	bation / Job title (See Instructions)	Employer (See In Page Southerla		
	Date	Full name of contributor Dout-of-state PAC (ID# Bryant, Suzanne)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/27/2014	Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703-2404		\$100.00	
					Texas, complete Schedule T)
	Principal occus Attorney	pation / Job title (See Instructions)	Employer (See In Law Office of S		
	Date	Full name of contributor Dout-of-state PAC (ID# Bryant, Suzanne	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/12/2014	Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703-2404		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Law Office of S		
	Date	Full name of contributor Dout-of-state PAC (ID# Bullock, Dan	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/12/2014	Contributor address; City; State; Zip Code PO Box 5627 Austin, TX 78763-5627		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
 	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS	, <i>, , , , , , , , , , , , , , , , , , </i>	SCHEDULE A
	The Instruction	Guide explains how to complete this form.		1 PAGE # Schedule: 7/	39 Report: 9/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Cain, Joe)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/10/2014	6 Contributor address; City; State, Zip Code 6001 Westside Dr Austin, TX 78731-4260		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Lawyer	ation / Job title (See Instructions)	10 Employer (See In: Duggins Wren N	structions) Mann & Romero, I	LLP
	Date	Full name of contributor ☐ out-of-state PAC (ID# Carlozzi, Annette)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/12/2014	Contributor address; City; State; Zip Code 8103 Asmara Dr Austin, TX 78750-7807		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor D out-of-state PAC (ID#)	Amount of	In-kind contribution
		Carrington, Edwina		contribution (\$)	description (if applicable)
	08/15/2014	Contributor address; City; State; Zip Code 404 Cedar Oak Dr West Lake Hills, TX 78746-3656		\$200.00	1
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In		······································
	Independent	Affordable Housing Consultant	Retired		
	Date	Full name of contributor Dout-of-state PAC (ID# Cartwright, Deborah	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/12/2014	Contributor address; City; State; Zip Code 8200 Neely Dr Apt 216		\$350.00	
		Austin, TX 78759-8552		(If travel outside of	Texas, complete Schedule T)
	Principal occup Director	ation / Job title (See Instructions)	Employer (See In TX Comptroller	structions) of Public Account	ts
	Date	Full name of contributor Dout-of-state PAC (ID# Chapman, Jim	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/14/2014	Contributor address; City; State; Zip Code 1107 The Cape Rd		\$350.00	
		Horseshoe Bay, TX 78657-6066			I
			·····	ļ ,	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)	

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/	39 Report: 10/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID#_ Chimenti, Danette)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/18/2014	6 Contributor address; City; State; Zip Code 200 The Cir Austin, TX 78704-2418	· · · · · · · · · · · · · · · · · · ·	\$100.00	
<u> </u>				Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID#_ Clark, Stephen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/06/2014	Contributor address; City; State; Zip Code 301 Congress Ave Ste 500 Austin, TX 78701-3046		\$350.00	
			•	i Texas, complete Schedule T)
Principal occup Chairman	pation / Job title (See Instructions)	Employer (See In Cypress Real E	structions) state Advisors, Ir	IC.
Date	Full name of contributor Dout-of-state PAC (ID# Clasquin, Rani)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/15/2014	Contributor address; City; State; Zip Code 911 Old Stonehedge St West Lake Hills, TX 78746-3529		\$350.00	
			(If travel outside of	f Texas, complete Schedule T) 🛛 🗍
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Cochran, James)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/30/2014	Contributor address; City; State; Zip Code PO Box 5054 Austin, TX 78763-5054		\$100.00	1 1 1
				f Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Cockrum, James)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/06/2014	Contributor address; City; State; Zip Code 3213 Larry Ln Austin, TX 78722-1639		\$200.00	
			(If travel outside o	f Texas, complete Schedule T)
Principal occur Writer	bation / Job title (See Instructions)	Employer (See In Washtag Public		

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	CAL CONTRIBUTIONS R THAN PLEDGES OR LOAM	NS		SCHEDULE A
The Instruct	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/3	39 Report: 11/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
Date	5 Full name of contributor D out-of-slate PAC (ID# Cofer, George)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/02/2014	6 Contributor address; City; State; Zip Code 3306 Gentry Dr Rollingwood, TX 78746-5507		\$35.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Cofer, George	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2014	Contributor address; City; State; Zip Code 3306 Gentry Dr Rollingwood, TX 78746-5507		\$20.00	 1
			 (If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID#		Amount of	In-kind contribution
	Cofer, George		contribution (\$)	description (if applicable)
08/01/2014	Contributor address; City; State; Zip Code 3306 Gentry Dr Rollingwood, TX 78746-5507	· · · • • • · · · · · · · · · · · · · ·	\$20.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Cofer, George	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/13/2014	Contributor address; City; State; Zip Code 3306 Gentry Dr Rollingwood, TX 78746-5507		\$20.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Conn, Jerry	4)	Amount of contribution (\$)	In-kind contribution description (if applicable
07/17/2014	Contributor address; City; State; Zip Code 3219 Gilbert St Austin, TX 78703-2221		\$100.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		

TDD 1-800-735-2989

4 Date S Full name of contributor out-of-state PAC (ID#) 7 Amount of contribution (\$) 8 In-kind contribution (\$) 08/14/2014 6 Contributor address; City; State; Zip Code \$350.00 1 In-kind contributor 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) In-kind contribution (\$) 08/11/2014 Full name of contributor out-of-state PAC (ID#) Amount of contribution (\$) In-kind contribution (\$) 08/11/2014 Contributor address; City; State; Zip Code \$100.000 In-kind contribution (\$) In-kind contribution (\$) 08/11/2014 Contributor address; City; State; Zip Code \$100.000 In-kind contribution (\$) In-kind contribution (\$) 08/11/2014 Contributor address; City; State; Zip Code \$100.000 In-kind contributor 08/25/2014 Contributor address; City; State; Zip Code \$200.00 In-kind contributor 09/25/2014 Contributor address; City; State; Zip Code \$200.00 In-kind contributor 09/25/2014 Contributor address; City; State; Zip Code \$200.00 In-kind contributor 09/25/2014 Contributor address; City; State; Zip Code <th></th> <th>CAL CONTRIBUTIONS</th> <th>IS</th> <th></th> <th>SCHEDULE A</th>		CAL CONTRIBUTIONS	IS		SCHEDULE A
2 FillER NAME Dealey, Amanda 3 ACCOUNT # (Effects Commission filers, 00000008 4 Date 5 Full name of contributor out-of-sate PAC (ID#	The Instruction	DN GUIDE explains how to complete this form.			/39 Report: 12/55
Connelly, Owen Jr. contribution (\$) description (# applicat: 2518 El Greco Cv Austin, TX 78703-1510 Principal occupation / Job tille (See Instructions) 10 Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#) Amount of Austin, TX 78703-4872 Amount of Contribution (\$) In-kind contributor (# travel outside of Texas, complete Schedule T Retired Date Full name of contributor Cock, Jerry out-of-state PAC (ID#) Amount of contribution (\$) In-kind contributor description (# applicat S100,00 08/11/2014 Contributor address; Api 281 City, State: Zip Code Api 281 \$100,00 In-kind contributor contribution (\$) Date Full name of contributor Covingtion, Sid City, State: Zip Code Api 281 \$100,00 In-kind contributor contribution (\$) Date Full name of contributor Covingtion, Sid out-of-state PAC (ID#) Amount of contribution (\$) In-kind contributor description (# applicat S200,00 09/25/2014 Contributor address; Astim, TX 78731-5519 City, State, Zip Code S350,00 \$200,00 In-kind contributor description (# applicat S350,00 Principal occupation / Job tille (See Instructions) Employer (See Instructions) In-kind contribution contribution (\$) In-kind contributor description (# applicat S350,00 09/11/2014 Contributor address; S000 Masien Gaks Bid Uat 43 Austin, TX 78731-2015 City, State; Zip	2 FILER NAME	Dealey, Amanda		3 ACCOUNT #	(Ethics Commission filers)
08/14/2014 6. Contributor address; 218 El (greeo Qr Austin, TX 78703-1510 City: State, Zip Code \$350.00 Principal occupation / Job tille (See Instructions) 10 Employer (See Instructions) In -kind contribution (ff yave) outside of Texas, complete Schedule T; Retired Date Full name of contributor Cook, Jerry out-of-state PAC (ID#) Amount of contributor address; Austin, TX 78703-4872 In -kind contribution (fi applicat contributor address; Austin, TX 78703-4872 08/11/2014 Contributor address; Austin, TX 78703-4872 City: State: Zip Code address; Austin, TX 78703-4872 Amount of contribution(s) In-kind contribution (ff travel outside of Texas, complete Schedule T; Austin, TX 7873-15513 Date Full name of contributor Covington, Sid out-of-state PAC (ID#) Amount of contribution (s) In-kind contributor description (ff applicat Austin, TX 78731-5513 09/25/2014 Contributor address; Austin, TX 78731-5513 City: State, Zip Code Austin, TX 78731-5513 Amount of contribution(s) In-kind contributor description (ff applicat Contribution (s) Date Full name of contributor Contributor address; 5000 Mission Cake Blvd Unit 3 Austin, TX 78736-744 City: State, Zip Code S350.00 Amount of contribution(s) In-kind contributor description (ff applicat Contribution (s) Date Full name of contributor Contributor address; 5000 Mission Cake Blvd Unit 3 Austin, TX 78736-744 City: State, Z	l Date)		8 In-kind contribution description (if applicable)
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Retired Retired Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (S) description (II applicat contribution (S) description (II applicat contribution address; Chy; State; Zip Code 1301 W 8h 1/2 S1 App 201 Austin, TX 78703-4872 S100.00 I 08//11/2014 Contributor address; Chy; State; Zip Code 1301 W 8h 1/2 S1 App 201 Austin, TX 78703-4872 S100.00 I Principal occupation / Job title (See instructions) Employer (See Instructions) In-kind contributor description (II applicat contribution (S) description (II applicat 200.00 I Date Full name of contributor out-of-state PAC (ID#) Amount of contribution address; City; State; Zip Code 3200.00 I 09/25/2014 Contributor address; City; State; Zip Code 4310 Pload; Pla S200.00 I In-kind contributor description (II applicat 200.00 I Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contributor description (II applicat 200.00 I 09/25/2014 Contributor address; City; State; Zip Code 3200.00 I \$200.00 I In-kind contributor description (II applicat 200.00 I 09/11/2014 Contributor address; City; State; Zip Code 3300.00 I In-kind contributor description (II applicat 200.00 I In-kind contributor 200.00 I 09/11/2014 Contributor address; City; State; Zip Code 3300.00 I <td></td> <td></td> <td></td> <td>(If travel outside of</td> <td>Texas, complete Schedule T)</td>				(If travel outside of	Texas, complete Schedule T)
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1301 W 9th 1/2 St Apt 201 Image: 201 State of Texas, complete Schedule T, if travel outside of Texas, complete Schedule T, on the travel outside of Texas, complete Schedule T, if travel o	Date)		In-kind contribution description (if applicable)
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Principal occupation / Job tille (See instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (\$) In-kind contribution description (if applicat contribution (\$) 09/25/2014 Contributor address; City; State; Zip Code 4810 Placid Pl Austin, TX 78731-5519 City; State; Zip Code 4810 Placid Pl Austin, TX 78731-5519 \$200.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) City; State; Zip Code 85200.00 \$200.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contributor 10 In-kind contribution 10 Date Full name of contributor cut-of-state PAC (ID#) Amount of 10 In-kind contribution 10 09/11/2014 Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd Unit 43 Sign Oaks Blvd 11 In-kind contributor 10 09/11/2014 Contributor address; City; State; Zip Code 3000 Mission Oaks Blvd Unit 43 Employer (See Instructions) Employer (See Instructions) Date Full name of contributor cut-of-state PAC (ID#				lifter of enteride of	l Tayan namulata Sabadula T) . [
O9/25/2014 Contributor address; Contributor address; 4810 Placid Pl Austin, TX 78731-5519 City; State; Zip Code 4810 Placid Pl Austin, TX 78731-5519 S200.00 1 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#) Crowley, Berry Amount of 1 In-kind contribution description (if applicat s350.00 09/11/2014 Contributor address; 5000 Mission Caks Blvd Unit 43 Austin, TX 78735-6744 City; State; Zip Code 5000 Mission Caks Blvd Unit 43 Austin, TX 78735-6744 In-kind contribution (if travel outside of Texas, complete Schedule T \$350.00 Date Full name of contributor out-of-state PAC (ID#) DeGolyer, Everett III Amount of contribution (S) In-kind contribution (if travel outside of Texas, complete Schedule T (if travel outside of Texas, complete Schedule T (State; Zip Code 4125 Honeycomb Rock Cir Austin, TX 78731-2015 In-kind contribution (if applicat (if travel outside of Texas, complete Schedule T (if travel outside of Texas, complete Schedule T	Principal occuj	pation / Job title (See Instructions)	Employer (See In		
O9/25/2014 Contributor address; Contributor address; 4810 Placid Pl Austin, TX 78731-5519 City; State; Zip Code 4810 Placid Pl Austin, TX 78731-5519 \$200.00 1 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#) Crowley, Berry Amount of Crowley, Berry In-kind contribution description (if applicat 5000 Mission Caks Blvd Unit 43 Austin, TX 78735-6744 09/11/2014 Contributor address; 5000 Mission Caks Blvd Unit 43 Austin, TX 78735-6744 City: State; Zip Code 5000 Mission Caks Blvd Unit 43 Austin, TX 78735-6744 Amount of In-kind contribution (if travel outside of Texas, complete Schedule T Fincipal occupation / Job title (See Instructions) Attorney Date Full name of contributor out-of-state PAC (ID#) DeGolyer, Everett III Amount of Contribution (S) In-kind contribution (if applicat S100.00 08/28/2014 Contributor address; City: State; Zip Code 4125 Honeycomb Rock Cir Austin, TX 78731-2015 City: State; Zip Code 4125 Honeycomb Rock Cir Austin, TX 78731-2015 State; Zip Code (if travel outside of Texas, complete Schedule T (if travel outside of Texas, complete Schedule T (if travel outside of Texas, complete Schedule T	Data .	Full same of contributor		Amount of	In kind contribution
4810 Placid Pl Austin, TX 78731-5519 (If travel outside of Texas, complete Schedule T Principal occupation / Job title (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#) Amount of contribution (\$) in-kind contribution description (if applicat 5000 Mission Oaks Blvd Unit 43 Austin, TX 78735-6744 Principal occupation / Job title (See Instructions) Attorney City: State: Zip Code 5000 Mission Oaks Blvd Unit 43 Austin, TX 78735-6744 City: State: Zip Code contribution (\$) \$350.00 Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Beryl P. Crowley Attorney and Couselor at Law Date Full name of contributor DeGolyer, Everett III out-of-state PAC (ID#) DeGolyer, Everett III Amount of contribution (\$) In-kind contribution description (if applicat contribution (\$) 08/28/2014 Contributor address; Austin, TX 78731-2015 City: State: Zip Code 4125 Honeycomb Rock Cir Austin, TX 78731-2015 City: State: Zip Code (If travel outside of Texas, complete Schedule T	bute		/		description (if applicable)
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Retired Date Full name of contributor out-of-state PAC (ID#) Crowley, Berry Amount of contribution (\$) In-kind contribution description (if applicat s350.00 09/11/2014 Contributor address; 5000 Mission Oaks Blvd Unit 43 Austin, TX 78735-6744 City; State; Zip Code 5000 Mission Oaks Blvd Unit 43 Austin, TX 78735-6744 \$350.00 Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Beryl P. Crowley Attorney and Couselor at Law Date Full name of contributor out-of-state PAC (ID#) DeGolyer, Everett III Amount of contribution (\$) In-kind contribution description (if applicat s100.00 08/28/2014 Contributor address; Austin, TX 78731-2015 City; State; Zip Code s100.00 \$100.00 (if travel outside of Texas, complete Schedule T structure) (if travel outside of Texas, complete Schedule T contribution (\$)	09/25/2014	4810 Placid Pl		\$200.00	
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5000 Mission Oaks Blvd Unit 43 Austin, TX 78735-6744 (If travel outside of Texas, complete Schedule T Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Beryl P. Crowley Attorney and Couselor at Law Date Full name of contributor DeGolyer, Everett III out-of-state PAC (ID#) DeGolyer, Everett III 08/28/2014 Contributor address; 4125 Honeycomb Rock Cir Austin, TX 78731-2015 City; State; Zip Code (If travel outside of Texas, complete Schedule T	Date)		In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Beryl P. Crowley Attorney and Couselor at Law Date Full name of contributor out-of-state PAC (ID#) DeGolyer, Everett III Amount of contribution (\$) In-kind contribution (\$) 08/28/2014 Contributor address; City; State; Zip Code \$100.00 4125 Honeycomb Rock Cir Austin, TX 78731-2015 City; State; Zip Code (If travel outside of Texas, complete Schedule T	09/11/2014	5000 Mission Oaks Blvd Unit 43			
08/28/2014 Contributor address; City; State; Zip Code \$100.00 4125 Honeycomb Rock Cir Austin, TX 78731-2015 (If travel outside of Texas, complete Schedule T		pation / Job title (See Instructions)		structions)	
4125 Honeycomb Rock Cir Austin, TX 78731-2015 (If travel outside of Texas, complete Schedule T	Date)		In-kind contribution description (if applicable)
	08/28/2014	4125 Honeycomb Rock Cir		\$100.00	
				 (If travel outside of	Texas, complete Schedule T)
	Principal occuj	pation / Job title (See Instructions)	Employer (See In	1 '	

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		CAL CONTRIBUTIONS	IS		SCHEDULE A
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 11	//39 Report: 13/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Dickie, Martha)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/14/2014	6 Contributor address; City; State; Zip Code 503 Brookhaven Trl Austin, TX 78746-5452	• . • • • • • • • • • • • • • • • • • •	.\$100.00	1
				(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 Dout-of-state PAC (ID# Ducloux, Claude	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/31/20 1 4	Contributor address; City; State; Zip Code 3512 Native Dancer Cv Austin, TX 78746-1434		\$150.00	
				(If travel outside of	f Texas, complete Schedule T)
	Principal occup	vation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Duncan, John)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/22/2014	Contributor address; City; State; Zip Code 4601 Bull Creek Rd. Austin, TX 78731		\$350.00	1
				(If travel outside of	f Texas, complete Schedule T)
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Dunnam Tita, Wendy)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/18/2014	Contributor address; City; State; Zip Code 5905 Tumbling Cir Austin, TX 78731-4053		\$100.00	
					f Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Dunning, Logan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 8519 Cahill Dr Austin, TX 78729-7286		\$350.00	
					f Texas, complete Schedule T)
	Principal occup Field Director	pation / Job title (See Instructions)	Employer (See In Mandy Dealey	'	

1 PAGE #

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SCHEDULE A

_		CAL CONTRIBUTIONS THAN PLEDGES OR LOANS	DGES OR LOANS
	The Instruction	N GUIDE explains how to complete this form.	
2	FILER NAME	Dealey, Amanda	-

				Schedule: 12	/39 Report: 14/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT #	(Ethics Commission filers)
				0000008	
4	Date	5 Full name of contributor D out-of-state PAC (ID#)		8 In-kind contribution
		Elliott, Chris		contribution (\$)	description (if applicable)
	09/23/2014	6 Contributor address; City; State; Zip Code 1705 Rabb Rd		\$100.00	
		Austin, TX 78704-2811			
				(If travel outside of	Texas, complete Schedule T}
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	· · · · · · · · · · · · · · · · · · ·	
		,	10		
_	<u> </u>				
	Date	Full name of contributor Dout-of-state PAC (ID# Enniss, Stephen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/02/2014	Contributor address; City; State; Zip Code		\$100.00	
		2628 Jefferson St Austin, TX 78703-1801		• • • • • •	
					l
		·			Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor 🔲 out-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
		Farmer, Matthew		contribution (\$)	description (if applicable)
			· · · · · <i>· · · · ·</i> · · · · · · · · ·		I .
	09/19/2014	Contributor address; City; State; Zip Code 5508 Janice Ave		\$350.00	I
		Kenner, LA 70065-1540			
				(If travel outside of	Texas, complete Schedule T)
-		ation / Job title (See Instructions)	Employer (See In		
	Programmer		Force Multiplier	Solutions, Inc.	
-	Date	Full name of contributor Gout-of-state PAC (ID#	±)	Amount of	In-kind contribution
		Fath, Shudde	,	contribution (\$)	description (if applicable)
	07/16/2014	Contributor address; City; State; Zip Code		\$350.00	
		1005 Bluebonnet Ln Austin, TX 78704-2003			
	Principal occur	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
	Retired		Retired		
	Date	Full name of contributor D out-of-state PAC (ID# Fellers, Stacey	۲ <u></u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
					, , , , , , , , , , , , , , , , ,
	09/16/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • •	\$100.00	
		5603 Caprice Dr Austin, TX 78731-4835			1
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
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	CAL CONTRIBUTIONS	NS		SCHEDULE A
The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 13	3/39 Report: 15/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Ferchill, Cary	٤ <u>ــــــــــــــــــــــــــــــــــــ</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/16/2014	6 Contributor address; City; State; Zip Code 2524 Tanglewood Trl Austin, TX 78703-1540		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Lawyer	bation / Job title (See Instructions)	10 Employer (See In Reed & Scardin		
Date	Full name of contributor D out-of-state PAC (ID# Fiedorek, Sandra)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 2206 Matthews Dr Austin, TX 78703-2019		\$350.00	
			(If travel outside of	i Texas, complete Schedule T}
Principal occup Artist	pation / Job title (See Instructions)	Employer (See In University of Te		
Date	Full name of contributor Dout-of-state PAC (ID# Fowler, Carol McMurtry	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/13/2014	Contributor address; City; State; Zip Code 10 Woodstone Sq Austin, TX 78703-1164		\$330.00	
			(If travel outside of	f Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Fowler, Carol McMurtry	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/13/2014	Contributor address; City; State; Zip Code 10 Woodstone Sq Austin, TX 78703-1164	· · · · · · · · · · · · · · · · · · ·	\$20.00	1 1
		·····		f Texas, complete Schedule T)
Principal occup Retired	bation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Fredericks Whitcraft, Carol Ph.D.	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/09/2014	Contributor address; City; State; Zip Code 305 E 32nd St Austin, TX 78705-2405		\$350.00	
			(If travel outside of	· I Texas, complete Schedule T)
Principal occup Retired	Dation / Job title (See Instructions)	Employer (See In Retired		

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SCHEDULE A

Schedule: 14/39 Report: 16/55

	POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS						
	The Instruction	ON GUIDE explains how to complete this form.	1 PAGE # Schedui				
2	FILER NAME	Dealey, Amanda	3 ACCOUN 000000				
4	Date	5 Full name of contributor Dout-of-state PAC (ID#) Fuller, Larry Paul	7 Amount contributior				

2 FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Fuller, Larry Paul	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/19/2014	6 Contributor address; City; State; Zip Code 2201 McCullough St Austin, TX 78703-1718	, , ,	\$350.00	
			•	Texas, complete Schedule T)
9 Principal occup Writer/Consul	ation / Job title (See Instructions) Itant	10 Employer (See In: Self LPFuller In:		
Date	Full name of contributor Dout-of-state PAC (ID# Galligan, Jude	\$)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/06/2014	Contributor address; City; State; Zip Code 603 Davis St Apt 102	••••••	\$350.00	 4
	Austin, TX 78701-4227		• • • • • • • • • •	Texas, complete Schedule T)
Principal occup Real Estate	ation / Job tille (See Instructions)	Employer (See In TAGR, Inc.	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Gardner, Margaret Ann	¥)	Amount of contribution (S)	In-kind contribution description (if applicable)
09/03/2014	Contributor address; City; State; Zip Code 3207 Kerbey Ln Austin, TX 78703-1450		\$75.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID) Getter, Becky	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/12/2014	Contributor address; City; State; Zip Code 1101 E 11th St Austin, TX 78702-1908		\$350.00	
			,	' Texas, complete Schedule T)
Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Homemaker	structions)	
Date	Full name of contributor D out-of-state PAC (ID) Getter, Kerry	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/12/2014	Contributor address; City; State; Zip Code 1101 E 11th St Austin, TX 78702-1908		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup CEO	bation / Job title (See Instructions)	Employer (See In Balcones Reso	structions)	

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TDD 1-800-735-2989

	POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A	
		N GUIDE explains how to complete this form.		1 PAGE #	120. Descent 47/56	
2	FILER NAME	Dealey, Amanda	<u> </u>	3 ACCOUNT # 0000008	/39 Report: 17/55 (Ethics Commission filers)	
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Geyer, Richard Jr.	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	08/12/2014	6 Contributor address; City; State; Zip Code 3415 Cascadera Dr Austin, TX 78731-5811		\$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 D out-of-state PAC (ID# Gladish, Kenneth	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/25/2014	Contributor address; City; State; Zip Code 6703 Mesa Dr Austin, TX 78731-2817		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Non Profit Executive		Employer (See In Seton Healthca			
	Date	Full name of contributor Dout-of-state PAC (ID# Goodfriend, Sarah	ŧ)	Arnount of contribution (\$)	description (if applicable)	
	08/27/2014	Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703-2404		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)		
	Date	Full name of contributor Dout-of-state PAC (ID# Goodfriend, Sarah	, ,	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/12/2014	Contributor address; City; State; Zip Code 1500 W 24th St Austin, TX 78703-2404		\$250.00	 - 	
				•	Texas, complete Schedule T)	
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)		
	Date	Full name of contributor D out-of-state PAC (ID# Grammer, Jerry	t)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/12/2014	Contributor address; City; State; Zip Code 1600 W 38th St Ste 404 Austin, TX 78731-6407		\$250.00	 	
				•	Texas, complete Schedule T)	
	Principal occup Clinical Psycl	ation / Job tille (See Instructions) hologist	Employer (See In Jerry R Gramm			

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	CAL CONTRIBUTIONS	NS		SCHEDULE A
	DN GUIDE explains how to complete this form.		1 PAGE # Schedule: 16	/39 Report: 18/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Green, Robert	±)	7 Amount of contribution (S)	8 In-kind contribution description (if applicable)
09/14/2014	6 Contributor address; City; State; Zip Code 3001 Gilbert St Austin, TX 78703-2219		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occur Professor	pation / Job title (See Instructions)	10 Employer (See In University of Te		·•••
Date	Full name of contributor Dout-of-state PAC (ID# Grissom, Joene	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/11/2014	Contributor address; City; State; Zip Code 6603 Shadow Valley Dr Austin, TX 78731-4145		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Hammill, Donald	\$)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/25/2014	Contributor address; City; State; Zip Code 901 W 9th St Apt 804 Austin, TX 78703-4638		\$350.00	
			(if travel outside of	Texas, complete Schedule T)
Principal occuj Owner, Publi	pation / Job title (See Instructions) sher	Employer (See In PRO-ED, Inc.	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Harding, Annie	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/13/2014	Contributor address; City; State; Zip Code 4428 Gillis St Austin, TX 78745-1018		\$250.00	1 1
			(If travel outside of	Texas, complete Schedule T)
Principal occup Associate Pr	pation / Job title (See Instructions) poducer	Employer (See In Armadillo Chris	•	
Date	Full name of contributor Dout-of-state PAC (ID# Harslem, Eric	4)	Amount of contribution (S)	In-kind contribution description (if applicable)
08/15/2014	Contributor address; City; State; Zip Code 911 Old Stonehedge St West Lake Hills, TX 78746-3529		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu; Retired	bation / Job title (See Instructions)	Employer (See In Retired	structions)	

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/	/39 Report: 19/55
FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
Date	5 Full name of contributor D out-of-state PAC (ID# Hatch, Tom)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/07/2014	6 Contributor address; City; State; Zip Code 1102B E 8th St Austin, TX 78702-3225		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Architecture	bation / Job title (See Instructions)	10 Employer (See In h+uo architects		
Date	Full name of contributor Dout-of-state PAC (ID# Heymann, David)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 2206 Matthews Dr Austin, TX 78703-2019		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Architect	pation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Hicks, Sandra)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/03/2014	Contributor address; City; State; Zip Code 3001 Bonnie Rd Austin, TX 78703-2807		\$350.00	
			 (If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) al Consultant	Employer (See In Hicks & Compa		
Date	Full name of contributor D out-of-state PAC (ID# Hilbert, Thomas)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code 414 Sunfish St Lakeway, TX 78734-4404		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Hill, Forest)	Amount of contribution (\$)	In-kind contribution description (if applicable
08/12/2014	Contributor address; City; State; Zip Code 4100 Jackson Ave Apt 311		\$100.00	
	Austin, TX 78731-6052		(If travel outside of	' Texas, complete Schedule T)
Principal occur	pation / Job tille (See Instructions)	Employer (See In	· · · · · · · · · · · · · · · · · · ·	
				Electronic Filing Version

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POLITICAL CONTRIBUTIONS **OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The INSTRUCT	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 18	/39 Report: 20/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Hooser, Greg)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/25/2014	6 Contributor address; City; State; Zip Code 4501 Westlake Dr # 14		\$350.00	
	Austin, TX 78746-1506			
g Principal occur	pation / Job title (See Instructions)	10 Employer (See In		Texas, complete Schedule T)
Attorney/Cor			Consulting, LLC	
Date	Full name of contributor Dout-of-state PAC (ID# Hunt, Meta)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/13/2014	Contributor address; City; State; Zip Code 2 Limerick Ln West Lake Hills, TX 78746-3520		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor Dout-of-state PAC (ID# Ikard Wynne, LLP)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/06/2014	Contributor address; City; State; Zip Code 2901 Via Fortuna Shuite 450 Austin, TX 78746-7565		\$350.00	
D. Starting Laws				Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Johnson, Donald		Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Contributor address; City; State; Zip Code 1135 Burdette St New Orleans, LA 70118-3972		\$350.00	
i. i				Texas, complete Schedule T)
Principal occu Accountant	pation / Job title (See Instructions)	Employer (See In Leon Low and S		
Date	Full name of contributor Dout-of-state PAC (ID# Johnstone, Jim)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/12/2014	Contributor address; City; State; Zip Code 2905 San Gabriel St Austin, TX 78705-3539		\$200.00	
				Texas, complete Schedule T)
Principal occu Retail Sales	pation / Job title (See Instructions)	Employer (See In Johnstone Mad		

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	CAL CONTRIBUTIONS	NS		SCHEDULE A	
	ON GUIDE explains how to complete this form.	<u></u>	1 PAGE # Schedule: 19	/39 Report: 21/55	
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)	
4 Date	5 Full name of contributor D out-of-state PAC (ID# Kadison, Bret	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
08/06/2014	6 Contributor address; City; State; Zip Code 3904 Sycamore Dr Austin, TX 78722-1230		\$100.00	 	
				Texas, complete Schedule T)	
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)		
Date	Full name of contributor Dout-of-state PAC (ID# Kenyon, Terry	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/25/2014	Contributor address; City; State; Zip Code 4913 Rollingwood Dr & West Lake Hilts, TX 78746-5670		\$350.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occus Attorney	pation / Job title (See Instructions)		Employer (See Instructions) Kenyon & Sproull, P.C.		
Date	Full name of contributor Dout-of-state PAC (ID# Kerr, Chris	¢)	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	i 	
				Texas, complete Schedule T)	
Principal occur COO	pation / Job title (See Instructions)	Employer (See In Force Multiplier	,		
Date	Full name of contributor D out-of-state PAC (ID# Kerr, Heather	ŧ)	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	1 	
			Line and the second second	Texas, complete Schedule T)	
Principal occup Homemaker	bation / Job title (See Instructions)	Employer (See In Homemaker	structions)		
Date	Full name of contributor D out-of-state PAC (ID# Kever, Andrew	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/24/2014	Contributor address; City; State; Zip Code 6105 Highland Hills Dr Austin, TX 78731-4101		\$350.00	 	
				Texas, complete Schedule T)	
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Enoch Kever Pi			

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	CAL CONTRIBUTIONS		SCHEDULE A	
The Instructio	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 20)/39 Report: 22/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Keys, Margaret)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/11/2014	6 Contributor address; City; State; Zip Code 1713B West 11th Austin Austin, TX 78703-3962		\$200.00	
9 Principal occup Executive Co	ation / Job title (See Instructions) ach	10 Employer (See In: Self Employed		Texas, complete Schedule T)
Date	Full name of contributor Dout-of-state PAC (ID# Khataw, Nahid)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 7914 Bee Cave Rd Austin, TX 78746-4903		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Owner	ation / Job title (See Instructions)	Employer (See In Accurate Techn	structions) ical Services Inc	
Date	Full name of contributor Dout-of-state PAC (ID# Koch Schilz, Virginia	؛)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 3616 Claburn Dr Austin, TX 78759-8215	, ,	\$100.00	
ł.			(If travel outside of	í Texas, complete Schedule T)
Principal occur	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Korioth, Claire	4)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/06/2014	Contributor address; City; State; Zip Code 2305 Barton Creek Blvd Unit 34 Austin, TX 78735-1651		\$150.00	1
Principal occur	pation / Job title (See Instructions)	Employer (See In	1	f Texas, complete Schedule T)
		Employer (dee in		
Date	Full name of contributor Dout-of-state PAC (ID# Kraus, Lisa	¥}	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/13/2014	Contributor address; City; State; Zip Code 4906 Shadywood Ln Dallas, TX 75209-2024		\$250.00	 / Texas, complete Schedule T) [
Principal occur	pation / Job title (See Instructions)	Employer (See In	1	
Writer		Self Employed	,	

Texas Ethics Commission P.O.Box 12070

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		CAL CONTRIBUTIONS		SCHEDULE A	
	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/39 Report: 23/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor D out-of-state PAC (ID# Lalk, Margaret	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/17/2014	6 Contributor address; City; State; Zip Code 6309 Walebridge Ln Austin, TX 78739-1571		\$100.00	
				· · · · · · · · · · · · · · · · · · ·	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Lancaster, David	<u> </u>	Атоилt of contribution (\$)	In-kind contribution description (if applicable)
	09/18/2014	Contributor address; City; State; Zip Code 1601 Houston St Apt 11 Austin, TX 78756-1316		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Governmenta	ation / Job title (See Instructions) al Affairs	Employer (See In TX Society of A		
,	Date	Full name of contributor D out-of-state PAC (ID# Lastrapes, Sharon	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 12030 Pleasant Panorama Vw Austin, TX 78738-5309		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	bation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Lavine, Richard	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/20/2014	Contributor address; City; State; Zip Code 803 Avondale Rd Austin, TX 78704-2516		\$100.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup	bation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# LeBlanc, Heather	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/12/2014	Contributor address; City; State; Zip Code 2607 Arizona Dr Marrero, LA 70072-6107		\$350.00	
L					Texas, complete Schedule T)
	Principal occup Service Coor	ation / Job title (See Instructions) dinator	Employer (See In Force Multiplier		

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POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 22/39 Report: 24/55 2 FILER NAME Dealey, Amanda 3 ACCOUNT # (Ethics Commission filers) 00000008 4 Date 5 Full name of contributor D out-of-state PAC (ID# In-kind contribution 7 Amount of 18 contribution (\$) description (if applicable) Leche, Paul 6 Contributor address; 08/16/2014 City; State; Zip Code \$100.00 5107 Fairview Dr Austin, TX 78731-5425 (If travel outside of Texas, complete Schedule T) q, Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) Legge, Murray 09/18/2014 Contributor address; City; State; Zip Code \$100.00 4005 Idlewild Rd Austin, TX 78731-6146 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Lentz, Lamar Contributor address; 07/01/2014 City; State; Zip Code \$200.00 PO Box 74 Round Top, TX 78954-0074 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Museum Curator James Dick Foundation Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Leonard, Linda 09/11/2014 Contributor address; City; State; Zip Code \$350.00 7122 Royal Ln Dallas, TX 75230-3608 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker Homemaker Full name of contributor D out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Leonard, Margaret Contributor address; 08/05/2014 City; State; Zip Code \$350.00 5804 River Oaks Rd S New Orleans, LA 70123-2155 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Homemaker Homemaker

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI		SCHEDULE A	
	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 23	/39 Report: 25/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Leonard, Robert	¢)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/05/2014	3/05/2014 6 Contributor address; City; State; Zip Code 5804 River Oaks Rd S New Orleans, LA 70123-2155		\$350.00	
				,	Texas, complete Schedule T)
9	Principal occup Chairman and	ation / Job title (See Instructions) d CEO	10 Employer (See In Force Multiplier		
	Date	Full name of contributor Dout-of-state PAC (ID# Lewis, Carolyn	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/28/2014	Contributor address; City; State; Zip Code 2103 Manana St Austin, TX 78730-4245		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Investor	ation / Job title (See Instructions)	Employer (See In Lewco Interests		
	Date	Full name of contributor Dout-of-state PAC (ID# Lewis, Dawn	¥)	Arnount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 4509 Edgemont Dr Austin, TX 78731-5223		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	bation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Lochridge, Lloyd Jr	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/31/2014	Contributor address; City; State; Zip Code 3400 Hillview Rd Austin, TX 78703-1131		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	bation / Job title (See Instructions)	Employer (See In	structions)	
=	Date	Full name of contributor Dout-of-state PAC (ID)	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 101 Colorado Ave. Apt. 1602 Austin, TX 78701	• • • • • • • • • • • • • • • • • • • •	\$350.00	
				-	·
<u> </u>	Principat occur	pation / Job title (See Instructions)	Employer (See In	•	Texas, complete Schedule T)
	Lawyer	,	Loewy Law Firr		

	CAL CONTRIBUTIONS	NS		SCHEDULE A
The Instruction	DN GUIDE explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE # Schedule: 24	/39 Report: 26/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Lohrmann, Charles	ŧ <u></u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/25/2014	6 Contributor address; City; State; Zip Code PO Box 50291 Austin, TX 78763-0291		\$200.00	
	· · · · · ·		(If travel outside of	Texas, complete Schedule T)
9 Principal occup Editor	pation / Job title (See Instructions)	10 Employer (See In Texas Electric C		
Date	Full name of contributor Dout-of-state PAC (ID# Lyle, Mark	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/11/2014	Contributor address; City; State; Zip Code 4420 Overton Crest St Ft Worth, TX 76109-2521		\$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 Dout-of-state PAC (ID# Marcus, Richard	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/24/2014	Contributor address; City; State; Zip Code 913 Terrace Mountain Dr West Lake Hills, TX 78746-2730		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) arly Stage E-Commerce Companies	Employer (See In Self	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Matheson, Dan	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2014	Contributor address; City; State; Zip Code 2901 Navidad Cv Austin, TX 78735-1439		\$200.00	
		, 		Texas, complete Schedule T)
Principal occuj Attorney	pation / Job title (See Instructions)	Employer (See In Matheson Law		·
Date	Full name of contributor Dout-of-state PAC (ID# Maxwell, Phil	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/22/2014	Contributor address; City; State; Zip Code 2703 Stratford Dr Austin, TX 78746-4624		\$350.00	
	· · · · · · · · · · · · · · · · · · ·			f Texas, complete Schedule T)
Principal occu Attorney	pation / Job title (See Instructions)	Employer (See In Law Offices of I	structions) Philip K. Maxwell	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOAN	SCHEDULE A
The INSTRUCTION GUIDE explains how to complete this form.	1 PAGE #
2 FILER NAME Dealey, Amanda	Schedule: 25/39 Report: 27/55 3 ACCOUNT # (Ethics Commission filers) 00000008
4 Date 5 Full name of contributor □ out-of-state PAC (ID#_ Maxwell, Sue	7 Amount of contribution 8 In-kind contribution (\$) description (if applicable) description (if applicable)
07/22/2014 6 Contributor address; City; State; Zip Code 2703 Stratford Dr Austin, TX 78746-4624	\$350.00
	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) Teacher	Employer (See Instructions) Retired
Date Full name of contributor Dout-of-state PAC (ID# McCalla, Andrew	Amount of In-kind contribution contribution (\$) description (if applicable)
08/27/2014 Contributor address; City; State; Zip Code 1300 W 9th 1/2 St Austin, TX 78703-4810	\$100.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Date Full name of contributor Dout-of-state PAC (ID#_ Meachum, Kurt) Amount of In-kind contribution contribution (\$) description (if applicable)
07/23/2014 Contributor address; City; State; Zip Code 3900 Sidehill Path Austin, TX 78731-1418	\$350.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Public Affairs	Employer (See Instructions) Philips & Meachum
Date Full name of contributor Dout-of-state PAC (ID# Meyer, Stefan	Arnount of In-kind contribution contribution (\$) description (if applicable)
09/16/2014 Contributor address; City; State; Zip Code 1615 Clover St Mandeville, LA 70448-8327	\$350.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Software & Hardware Admin	Employer (See Instructions) Force Multiplier Solutions, Inc.
Date Full name of contributor Dout-of-state PAC (ID#_ Michener, Elizabeth) Amount of In-kind contribution contribution (\$) description (if applicable)
09/11/2014 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 occupation / Job tille (See Instructions) Executive Assistant	Employer (See Instructions) Force Multiplier Solutions, Inc.

	CAL CONTRIBUTIONS	NS		SCHEDULE A
The Instruction	NGUIDE explains how to complete this form.		1 PAGE # Schedule: 26	i/39 Report: 28/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Michener, Patrick)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/11/2014	6 Contributor address; City; State; Zip Code 146 18th St New Orleans, LA 70124-1226	• • • • • • • • • • • • • • • • •	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Manager	pation / Job title (See Instructions)	10 Employer (See In Hertz	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Miller, Laurence)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/01/2014	Contributor address; City; State; Zip Code PO Box 49130 Austin, TX 78765-9130		\$350.00	
·			(If travel outside of	Texas, complete Schedule T)
Principal occup Manager	bation / Job title (See Instructions)	Employer (See In Baluarte Creek	structions)	· · · · ·
Date	Full name of contributor D out-of-state PAC (ID# Miller, William)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/03/2014	Contributor address; City; State; Zip Code 2905 Gilbert St Austin, TX 78703-2217		\$350.00	*
			(If travel outside of	Texas, complete Schedule T)
Principal occup Governmenta	pation / Job title (See Instructions) al Affairs	Employer (See In HillCo Partners	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Mok, Arny)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2014	Contributor address; City; State; Zip Code 6301 Cat Mountain Cv Austin, TX 78731-3502		\$350.00	1
				Texas, complete Schedule T)
Principal occur President & (bation / Job title (See Instructions) CEO	Employer (See In Asian Americar	structions) Cultural Center	<u></u>
Date	Full name of contributor Dout-of-state PAC (ID# Murray, Sondra)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 3202 El Toro Cv Austin, TX 78746-1513		\$100.00	
				Texas, complete Schedule T)
Principal occus	pation / Job title (See Instructions)	Employer (See In	structions)	

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TDD 1-800-735-2989

	SCHEDULE A			
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE #	//20 D
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID#_ Naeve, Pat)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/19/2014	6 Contributor address; City; State; Zip Code 6507 Lost Cv Austin, TX 78746-7128		\$200.00	 [
			(If travel outside of	Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Engineer Architectural Engineers Collaborativ			ative	
Date	Full name of contributor Dout-of-state PAC (ID# Newman, Jolie)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/28/2014	Contributor address; City; State; Zip Code 6308 Tulip Ln Dallas, TX 75230-3830	•••••	\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup None	pation / Job title (See Instructions)	Employer (See In Not Employed	structions)	
Date	Full name of contributor Dout-of-state PAC (ID#_ Nyfeler, John)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 1805 Adriane Dr # B Austin, TX 78721-1213		\$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 Dout-of-state PAC (ID# Ogden, Ron)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2 0 14	Contributor address; City; State; Zip Code 1122 Colorado St Austin, TX 78701-2164		\$199.00	
			-	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Olson, Kris)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/11/2014	Contributor address; City; State; Zip Code 3708 Chimney Ridge Dr Waco, TX 76708-2368		\$100.00	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

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TDD 1-800-735-2989

	CAL CONTRIBUTIONS	IS		SCHEDULE A
	אסטש Guide explains how to complete this form.		1 PAGE # Schedule: 28	/39 Report: 30/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Orr, Bonnie)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/17/2014	 6 Contributor address; City; State; Zip Code 1107 Nueces St Austin, TX 78701-2105 		\$150.00	
				Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Orr, Stephen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/16/2014	Contributor address; City; State; Zip Code 1107 Nueces St Austin, TX 78701-2105		\$350.00	
			L	Texas, complete Schedule T)
Principal occur Attorney	pation / Job title (See Instructions)	Employer (See In Orr & Olavson	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Osborne, Betty	>	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 2106 Meadowbrook Dr Austin, TX 78703-2234	· · · · · · · · · · · · · · · · · · ·	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Artist/Housev	pation / Job title (See Instructions) vife	Employer (See In Self Employed	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Parke, Jessica)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code 449 Bellemeade Blvd Gretna, LA 70056-7220		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Receptionist	bation / Job title (See Instructions)	Employer (See In Force Multiplier		
Date	Full name of contributor Dout-of-state PAC (ID# Peel, Larry)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/12/2014	Contributor address: City; State; Zip Code 2802 Stratford Dr. Austin, TX 78746	····	\$350.00	
			(If travel outside of	I Texas, complete Schedule T)
Principal occup Builder/Deve	bation / Job title (See Instructions) loper	Employer (See In Larry Peel Com		

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 29	1/39 Report: 31/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Pickle, Peggy)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/12/2014	6 Contributor address; City; State; Zip Code 1301 W 9th 1/2 St Apt 201 Austin, TX 78703-4872		\$100.00	
			•	Texas, complete Schedule T)
9 Principal occup	bation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Ponder, Helene)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 6876 General Diaz St New Orleans, LA 70124-3340	• • • • • • • • • • • • • • • • • • • •	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Marketing Ma	aation / Job title (See Instructions) anager	Employer (See In Imperial Trading		
Date	Full name of contributor D out-of-state PAC (ID# Ponder, Michael)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 6876 General Diaz St New Orleans, LA 70124-3340	· · · · · · · · · · · · · · · · · · ·	\$350.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occup Regional Ma	ation / Job title (See Instructions) nager	Employer (See In Force Multiplier	· ·	
Date	Full name of contributor Dout-of-state PAC (ID# Ramsey, George III)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 515 Congress Ave Ste 1900 Austin, TX 78701-3526		\$350.00	
<u> </u>			1	Texas, complete Schedule T)
Principal occup Owner	pation / Job title (See Instructions)	Employer (See In Ramsey Proper		
Date	Full name of contributor Dout-of-state PAC (ID# Randle, Flo Ann)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/20/2014	Contributor address; City; State; Zip Code 3309 Windsor Rd Austin, TX 78703-2245		\$100.00	 · · · · · · · · · · · · · · · · · ·
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	<u>. </u>

	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN		SCHEDULE A	
The Instruction	ON GUIDE explains how to complete this form.	····	1 PAGE # Schedule: 30)/39 Report: 32/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Randle, Flo Ann)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/19/2014	6 Contributor address; City; State; Zip Code 3309 Windsor Rd Austin, TX 78703-2245	• • • • • • • • • • • • • • • • • • • •	\$50.00	
				Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Ratliff, Gay		Amount of contribution (\$)	In-kind contribution description (if applicable)
08/28/2014	Contributor address; City; State; Zip Code 3509 Hampton Rd Austin, TX 78705-1823		\$350.00	
	·		(If travel outside of	Texas, complete Schedule T)
Principal occup Retired	bation / Job title (See Instructions)	Employer (See In Retired	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Reynolds, Katherine)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/16/2014	Contributor address; City; State; Zip Code 610 Coloma St Ste 720 Sausalito, CA 94965-1572		\$350.00	1
		· · · · ·		Texas, complete Schedule T)
Principal occup Investments	pation / Job title (See Instructions)	Employer (See In Self-employed	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Richards, Daniel)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/15/2014	Contributor address; City; State; Zip Code 816 Congress Ave 1200 Austin, TX 78701-2442		\$350.00	
Principal occur	pation / Job title (See Instructions)	Employer (See In		f Texas, complete Schedule T)
Attorney		Self		
Date	Full name of contributor Dout-of-state PAC (ID# Riley, Eva)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/02/2014	Contributor address; City; State; Zip Code 3511 Cherry Ln Austin, TX 78703-2611		\$100.00	
				f Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	istructions)	

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POLITICAL CONTRIBUTIONS **OTHER THAN PLEDGES OR LOANS**

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 31	/39 Report: 33/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Robertson, Pat)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/11/2014	6 Contributor address; City; State; Zip Code 2300 Quarry Rd Austin, TX 78703-3839		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Wealth Advis	vation / Job title (See Instructions) or	10 Employer (See In UBS Financial S		
	Date	Full name of contributor Dout-of-state PAC (ID# Rosato, John)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/21/2014	Contributor address; City; State; Zip Code PO Box 50164 Austin, TX 78763-0164		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Southwest Stra		
	Date	Full name of contributor D out-of-state PAC (ID# Royall, Richard)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/01/2014	Contributor address; City; State; Zip Code PO Box 52 Round Top, TX 78954-0052		\$200.00	l l
	 .				Texas, complete Schedule T)
	Principal occup Managing Dir	ation / Job title (See Instructions) ector	Employer (See In Round Top Fes		
	Date	Full name of contributor Dout-of-state PAC (ID# Rutishauser, Bob	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/20/2014	Contributor address; City; State; Zip Code 4200 Jackson Ave Apt 5015 Austin, TX 78731-6061		\$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 Dout-of-state PAC (ID# Scanlan, William III	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2014	Contributor address; City; State; Zip Code 6303 Highland Hills Dr Austin, TX 78731-4105		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	• •	ation / Job title (See Instructions)	Employer (See In	structions)	
	Entrepreneur		Self		

Texas Ethics Con	nmission P.O.Box 12070 Austin,	Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS		SCHEDULE A
	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 32	/39 Report: 34/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Seeber, Brittany)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/18/2014	6 Contributor address; City; State; Zip Code 4350 Trinity Mills Rd Apt 9103 Dallas, TX 75287-7038		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Executive As	bation / Job title (See Instructions) sistant	10 Employer (See Ins Force Multiplier	,	
Date	Full name of contributor Dout-of-state PAC (ID# Sheppard, Jade)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/17/2014	Contributor address; City; State; Zip Code 12425 Dorsett Rd Austin, TX 78727-5807		\$100.00	
	· ·		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins		
Date	Full name of contributor Dout-of-state PAC (ID# Siff, Ted	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/22/2014	Contributor address; City; State; Zip Code 1601 Rio Grande, Ste 455 Austin, TX 78701	· · · · · · · · · · · · · · · · · · ·	\$150.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:		···· · · · · · · · · ·
Date	Full name of contributor D out-of-state PAC (ID# Sonnenberg, Steve	()	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/07/2014	Contributor address; City; State; Zip Code 3413 Ledgestone Dr Austin, TX 78731-5124		\$100.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occup	L pation / Job title (See Instructions)	Employer (See In:		
Date	Full name of contributor Dout-of-state PAC (ID# Soros, Jennifer	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/09/2014	Contributor address; City; State; Zip Code 70 Greenwich Ave		\$350.00	
	PMB 199 New York, NY 10011-8384			1
				Texas, complete Schedule T)
	pation / Job title (See Instructions) ros Fund Management	Employer (See In: Self Employed	structions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

				4 0405 "	
	The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 33/39 Report: 35/55	
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Stanley, Alfred)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/09/2014	6 Contributor address; City; State; Zip Code PO Box 5674 Austin, TX 78763-5674		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	upation / Job title (See Instructions) 10 Employer (See In		structions)	
	Date	Fuli name of contributor Dout-of-state PAC (ID# Stapleton, Ginny)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/12/2014	Contributor address; City; State; Zip Code 203 Ralph Ablanedo Dr Austin, TX 78748-5524		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	L pation / Job title (See Instructions)	Employer (See In		· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor D out-of-state PAC (ID#	·-···	Amount of	In-kind contribution
	Date	Steiner, Anna	<u> </u>	contribution (\$)	description (if applicable)
	09/20/2014	Contributor address; City; State; Zip Code 3132 Eanes Cir Austin, TX 78746-6741	,	\$100.00	 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor 🔲 out-of-state PAC (ID# Steiner, Frederick)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/18/2014	Contributor address; City; State; Zip Code 3132 Eanes Cir Austin, TX 78746-6741		\$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 D out-of-state PAC (ID#)	Amount of	In-kind contribution
		Stewart, Jacqueline M.	,	contribution (\$)	description (if applicable)
	09/23/2014	Contributor address; City; State; Zip Code 3717 Stratford Ave Dallas, TX 75205-2812	••••••	\$350.00	1
	,			 (If travel outside of	Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See In	structions)		
Realtor		Henry S. Miller			

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	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	IS		SCHEDULE A	
The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 34/39 Report: 36/55			
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)	
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Stuart, Claire)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
09/05/2014	6 Contributor address; City; State; Zip Code 2502 Velasquez Dr Austin, TX 78703-1545		\$350.00 		
			(If travel outside of	Texas, complete Schedule T)	
9 Principal occup Therapist	ation / Job title (See Instructions)	10 Employer (See In Self	structions)		
Date	Full name of contributor Dout-of-state PAC (ID# Sullivan, David)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/21/2014	Contributor address; City; State; Zip Code 1710 Waterston Ave Austin, TX 78703-3937		\$100.00 		
			(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date	Full name of contributor D out-of-state PAC (ID# Susholtz, Gail)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/13/2014	Contributor address; City; State; Zip Code 3834 Spicewood Springs Rd Austin, TX 78759-8976		\$350.00		
			(If travel outside of	Texas, complete Schedule T)	
Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)		
Date	Full name of contributor Dout-of-state PAC (ID# Sushoitz, Rodney)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
08/13/2014	Contributor address; City; State; Zip Code 3834 Spicewood Springs Rd Austin, TX 78759-8976		\$350.00		
			(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Employer (See In Architect Susholtz Prope					
Date	Full name of contributor Dout-of-state PAC (ID# Swartwood, Alison)	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		
Principal assure	ation / Job title (See Instructions)	Employee (Dec.)		Texas, complete Schedule T)	
Principal occup Housewife	ation / Job title (See Instructions)	Employer (See In Housewife	SILUCIIONS)		
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Texas Ethics Commission

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 35	5/39 Report: 37/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Swartwood, Kathryn)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/11/2014	6 Contributor address; City; State; Zip Code 2018 General Pershing St New Orleans, LA 70115-5436		\$350.00	1 1 1
			(If travel outside of	f Texas, complete Schedule T)
9 Principal occup Homemaker	bation / Job title (See Instructions)	10 Employer (See In Homemaker	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Swartwood, Slater)	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	
			{If travel outside of	f Texas, complete Schedule T)
Principal occu; EVP	bation / Job title (See Instructions)	Employer (See In Force Multiplier		
Date	Full name of contributor D out-of-state PAC (ID# Swartwood, Slater Jr.)	Amount of contribution (S)	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	f Texas, complete Schedule T)
Principal occup Maketing	pation / Job title (See Instructions)	Employer (See In Force Multiplier	,	
Date	Full name of contributor D out-of-state PAC (ID# Swearingen, Robert)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/07/2014	Contributor address; City; State; Zip Code 4500 Jackson Ave. Apt 5027 Austin, TX 78731		\$50.00	
D A A A				f Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Swearingen, Robert)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/20/2014	Contributor address; City; State; Zip Code 4500 Jackson Ave. Apt 5027 Austin, TX 78731		\$50.00	
····	L			f Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

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	CAL CONTRIBUTIONS R THAN PLEDGES OR LOAN	S		SCHEDULE A
The Instruct	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 36	6/39 Report: 38/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID#_ Swisher, Earl)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/21/2014	6 Contributor address; City; State; Zip Code 900 E 6th St Ste 105 Austin, TX 78702-3281		\$100.00	
			(If travel outside of	f Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID#_ Tai, James)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 1715 Cromwelt HI Austin, TX 78703-3306		\$200.00	1 1 1
			(If travel outside of	f Texas, complete Schedule T)
Principal occu Physician	pation / Job title (See Instructions)	Employer (See In UT Austin	structions)	
Date	Full name of contributor Dout-of-state PAC (ID#_ Taniguchi, Evan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/18/2014	Contributor address; City; State; Zip Code 1809 E 6th St Austin, TX 78702-2703		\$350.00	
			(If travel outside of	f Texas, complete Schedule T)
Principal occu Architect	pation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
Date	Full name of contributor D out-of-state PAC (ID#_ Texas Democratic Party)	Amount of contribution (\$)	In-kind contribution description (if applicable) voter file access
07/17/2014	Contributor address; City; State; Zip Code 4818 East Ben White Blvd., Suite 104 Austin, TX 78741		\$350.00	1
			(If travel outside of	f Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor out-of-state PAC (ID#_ Thomas, Grant)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/23/2014	Contributor address; City; State; Zip Code 4106 Avenue F Austin, TX 78751-4624		\$350.00	
			/If travel outside of	' f Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See In	· · · · · · · · · · · · · · · · · · ·	
Adjunct Prof		University of Te	exas at Austin	

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	CAL CONTRIBUTIONS	IS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/	/39 Report: 39/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT# 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor Dout-of-state PAC (ID# Thomas, Margot)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
08/23/2014	6 Contributor address; City; State; Zip Code 4106 Avenue F Austin, TX 78751-4624		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Homemaker	pation / Job title (See Instructions)	10 Employer (See In Homemaker	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Thompson, Helen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/07/2014	Contributor address; City; State; Zip Code 2304 Tower Dr Austin, TX 78703-2322		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	bation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Thompson, Helen L)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/08/2014	Contributor address; City; State; Zip Code PO Box 50291 Austin, TX 78763-0291		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Trigger, Jeff)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/05/2014	Contributor address; City; State; Zip Code 3106 Lookout Ln Austin, TX 78746-1430		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) onsulting and Management	Employer (See In La Corsha Hosj		
Date	Full name of contributor Dout-of-state PAC (ID# Tynberg, Alex)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/24/2014	Contributor address; City; State; Zip Code 3712 Meredith St Austin, TX 78703-2021		\$100.00	
			 (If travel outside of	' Texas, complete Schedule T)
Principal occup	Dation / Job title (See Instructions)	Employer (See In		

Texas Ethics Commission

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	CAL CONTRIBUTIONS THAN PLEDGES OR LOAN	NS		SCHEDULE A
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 38	/39 Report: 40/55
2 FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Van Zandt, Nicholas	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/06/2014	6 Contributor address; City; State; Zip Code 3001 Bonnie Rd Austin, TX 78703-2807		\$100.00]]
				Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Van Zandt, Thomas	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/06/2014	Contributor address; City; State; Zip Code 3001 Bonnie Rd Austin, TX 78703-2807		\$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 D out-of-state PAC (ID# Waxman, Witliam	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/27/2014	Contributor address; City; State; Zip Code 6400 Dry Bend Cv Austin, TX 78731-3925		\$250.00	;
			(if travel outside of	Texas, complete Schedule T)
Principal occu Financial Se	pation / Job title (See Instructions) rvices	Employer (See In Argus Financial		
Date	Full name of contributor D out-of-state PAC (ID# Webb, Lisa	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Contributor address; City; State; Zip Code 11605 Hobbiton Trl Austin, TX 78739-5628		\$100.00	
			<u> </u>	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Webber, Neil	¢)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/23/2014	Contributor address; City; State; Zip Code 6617 Soter Pkwy Austin, TX 78735-6339		\$350.00	
Principal con	pation / Job title (See Instructions)	Employer (Par I-	-	Texas, complete Schedule T)
None		Employer (See In Retired	1511 UCIIONS)	

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SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 39	/39_Report: 41/55
2	FILER NAME	Dealey, Amanda		3 ACCOUNT # 00000008	(Ethics Commission filers)
4	Date	5 Full name of contributor Cut-of-state PAC (ID# Wittliff, Sally	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/25/2014	6 Contributor address; City; State; Zip Code 1301 Kent Ln Austin, TX 78703-3816		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In: Wittliff Law Firm		
	Date	Full name of contributor Dout-of-state PAC (ID# Wolff, David)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703		\$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 Dout-of-state PAC (ID# Zoranic, Aleksandar	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/19/2014	Contributor address; City; State; Zip Code 1135 Burdette St New Orleans, LA 70118-3972		\$350.00	
		· · · · · · · · · · · · · · · · · · ·		(If travel outside of	Texas, complete Schedule T)
			Employer (See In: Force Multiplier		
					<u>.</u> .

Texas Ethics Commission	P.O.Box 12070

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LOANS		SCHEDULE E
The Instruction Guide explains how to complete this form.	1 PAGE # Schedule: 1/1	Report: 42/55
2 FILER NAME Dealey, Amanda	3 ACCOUNT # (00000008	Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: ⇔⇔⇔⇔⇒⇒		\$
5 Date of Ioan 7 Name of lender □ out-of-state PAC (ID#) □ out-of-stat		9 Loan Amount (\$) \$25,000.00
 6 Is lender a financial Institution? 8 Lender address; City; State; Zip Code 5401 Ridge Oak Dr. Austin, TX 78731 	••••	10 Interest rate
No		11 Maturity date 11/04/2014
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	uctions)	· ·
14 Description of Collateral 15 Check if personal fur Image: Im	nds were deposited inte	o political account
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guaranteed (\$)
18 Guarantor address; City; State; Zip Code ⊠ not applicable		
20 Principal Occupation 21 Employer		L

POLITIC		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fun nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	S/Contract Labor Loan Repayment/Reimbursement draising Expense Transportation Equipment & Related Expense xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx
1 PAGE # Schedule: 1/12 F	2 FILER NAME Dealey, Amanda	3 ACCOUNT # (TEC filers) 00000008
4 Date 08/15/2014	5 Payee name Cashiola, Tyler	
6 Amount (\$) \$700.00	7 Payee address City; State; Zip Code 1773 Wells Branch Parkway #1103 Austin, TX 78728	
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) contract labor
g Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		Office sought: Office held:
Date	Payee name	
09/02/2014	Cashiola, Tyler	Mare 20 - 10/2 - 100 - 10 - 10 - 10 - 10 - 10 - 10 -
Amount (\$) \$1,195.00	Payee address City; State; Zip Code 1773 Wells Branch Parkway #1103 Austin, TX 78728	
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)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
09/12/2014	Cashiola, Tyler	
Amount (S) \$700.00	Payee address City; State; Zip Code 1773 Wells Branch Parkway #1103 Austin, TX 78728	
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) Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
09/02/2014	Cooper, Lucy	
Amount (\$) \$470.00	Payee address City; State; Zip Code 8500 Red Williow #A Austin, TX 78736	
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)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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2070 Austin, Texas 78711-2070

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POLITIC	AL EXPENDITURES		SCHEDULE F
	EVDENDITU		
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Sal ing Legal Services Soli ise Food/Beverage Expense Tra Polling Expense Tra Printing Expense Offi	aries/Wages/Contract Labor L icitation/Fundralsing Expense T vel In District C vel Out Of District	oan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee DTHER (enter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 2/12 F			0000008
4 Date 09/16/2014	5 Payee name Cooper, Lucy		
6 Amount (\$)	7 Payee address City; State; Zip C	Code	<u></u>
\$355.00	8500 Red Williow #A Austin, TX 78736		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule) (b) Description (lf contract labor	travel outside of Texas, complete Schedule T) 📋
		Check if Austin, T	X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	t: Office held:
Date	Payee name		
08/01/2014	Dunning, Logan		
Amount (\$)	Payee address City; State; Zip C	Code	
\$1,815.00	8519 Cahill Dr. # 2505 Austin, TX 78729		
PURPOSE	Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule) Description (If Contract labor	travel outside of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, T	X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	
Date	Payee name		
08/15/2014	Dunning, Logan		
Amount (\$)	Payee address City; State; Zip C	Code	
\$1,125.00	8519 Cahiil Dr. # 2505 Austin, TX 78729		
PURPOSE OF	Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule) Description (If contract labor	travel outside of Texas, complete Schedule T)
EXPENDITURE			X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sough	
Date	Payee name		
09/02/2014	Dunning, Logan		
Amount (\$)	Payee address City; State; Zip C	Code	
\$1,125.00	8519 Cahill Dr. # 2505 Austin, TX 78729		
PURPOSE	Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	chedule) Description (If Contract labor	travel outside of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if	Candidate / Officeholder name	Check if Austin, T. Office sough	X, officeholder living expense t: Office held:
direct expenditure to benefit C/OH			

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POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/F nse Food/Beverage Expense Travel In Dis Polling Expense Travel Out C	ges/Contract Labor Loan Rep. undraising Expense Transport. trict Contributii f District Candid ead/Rental Expense OTHER (¢	ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee inter a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 3/12 F			0000008
4 Date 09/12/2014	5 Payee name Dunning, Logan		
6 Amount (\$)	7 Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	······································
\$1,125.00	Austin, TX 78729		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel out contract labor	side of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officer	older living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name	,	
07/03/2014	First Data	· · · ·	
Amount (\$)	Payee address City; State; Zip Code		
\$281.76	5565 Glenridge Connector NE Atlanta, GA 30342		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel out credit card processing	side of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officel	nolder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/03/2014 Amount (\$)	First Data Payee address City; State; Zip Code		
\$326.72			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel ou credit card processing	iside of Texas, complete Schedule T)
		Check if Austin, TX, office	nolder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name First Data		
07/03/2014 Amount (S)			
\$28.40	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342		
PURPOSE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel out credit card processing	side of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officel	older living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Adventising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Sala ing Legal Services Soli ise Food/Beverage Expense Tra Potling Expense Tra Printing Expense Offi	RE CATEGORIES aries/Wages/Contract Labor citation/Fundraising Expense vel In District vel Out of District ce Overhead/Rental Expense xplains how to complete this form	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) n.
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 4/12 F			0000008
4 Date 08/04/2014	5 Payee name First Data		
6 Amount (S)	7 Payee address City; State; Zip C	Code	
\$82.20	5565 Glenridge Connector NE Atlanta, GA 30342		
8 PURPOSE	(a) Category (See Categories listed at the top of this so Accounting/Banking	hedule) (b) Description (in credit card pro	If travel outside of Texas, complete Schedule T)
			TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sough	
direct expenditure to benefit C/OH		- · · · · · · · · · · · · · · · · · · ·	N N
Date	Payee name		
08/04/2014 Amount (\$)	First Data Payee address City; State; Zip C	lada	· · · · · · · · · · · · · · · · · · ·
\$534.08	5565 Glenridge Connector NE	2006	
\$354.08	Atlanta, GA 30342		
PURPOSE	Category (See Categories listed at the top of this so	chedule) Description (I credit card pro	If travel outside of Texas, complete Schedule T)
OF	Accounting/Banking	oroun ouro pre	
EXPENDITURE		Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht: Office held:
Date	Payee name		
08/04/2014	First Data	2 - 4-	
Amount (\$) \$27.00	Payee address City; State; Zip C 5565 Glenridge Connector NE	vode	
\$27.00	Atlanta, GA 30342		
PURPOSE OF	Category (See Categories listed at the top of this so Accounting/Banking	chedule) Description (credit card pro	If travel outside of Texas, complete Schedule T)
EXPENDITURE		Check if Austin.	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	
Date	Payee name		
09/03/2014	First Data		
Amount (\$)	Payee address City; State; Zip C 5565 Glenridge Connector NE	Lode	
\$15.60	Atlanta, GA 30342		
DURDOOS	Category (See Categories listed at the top of this so	chedule) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	credit card pro	cessing rees
EXPENDITURE		Check if Austin	TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office soug	
direct expenditure to benefit C/OH		-	

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POLITIC	AL EXPENDITURES	SCHEDULE F			
		ECODIES			
Accounting/Bank					
1 PAGE #	2 FILER NAME	3 ACCOUNT # (TEC filers)			
Schedule: 5/12 F	Report: 47/55 Dealey, Amanda	0000008			
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·			
09/03/2014	First Data				
6 Amount (\$) \$227.15	Atlanta, GA 30342				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)			
OF	Accounting/Banking	credit card processing fees			
EXPENDITURE					
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:			
direct expenditure to benefit C/OH					
Date	Payee name	``			
09/03/2014	First Data				
Amount (\$)	Payee address City; State; Zip Code				
\$91.09	5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)			
OF	Accounting/Banking				
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:			
direct expenditure to benefit C/OH		Office sought: Office held:			
Date	Payee name				
07/01/2014	GNI Strategies, LLC				
Amount (\$)	Payee address City; State; Zip Code				
\$5,843.19	P.O. Box 685008 Austin, TX 78768				
	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) General consulting			
EXPENDITURE		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				
07/15/2014	GNI Strategies, LLC				
Amount (\$)	Payee address City; State; Zip Code				
\$2,818.97	P.O. Box 685008 Austin, TX 78768				
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)			
PURPOSE OF	Consulting Expense	General campaign management, printing			
EXPENDITURE		Check if Austin, TX, officeholder living expense			
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:			
direct expenditure to benefit C/OH					

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POLITIC		,	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ting Legal Services Solicitation/Func nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	/Contract Labor Loan Rep draising Expense Transport to Contributi istrict Candic I/Rental Expense OTHER (payment/Reimbursement lation Equipment & Related Expense ions/Donations Made By late/Officeholder/Political Committee enter a category not listed above)
1 PAGE # Schedule: 6/12 F	Report: 48/55 2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008
4 Date 08/08/2014	5 Payee name GNI Strategies, LLC		
6 Amount (\$) \$6,190.44	7 Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	Printing and mailing s	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, office Office sought:	Office held:
Date	Payee name		
08/08/2014 Amount (\$)	GNI Strategies, LLC Payee address City; State; Zip Code		
\$6,190.44	P.O. Box 685008 Austin, TX 78768		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel ou Printing and mailing s	itside of Texas, complete Schedule T)
····		Check if Austin, TX, office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
08/13/2014 Amount (\$)	GNI Strategies, LLC Payee address City; State; Zip Code		
\$2,650.22	P.O. Box 685008 Austin, TX 78768		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel ou General consulting	itside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, office Office sought:	holder living expense Office held:
Date	Payee name		
09/12/2014	GNI Strategies, LLC		
Amount (\$) \$5,012.73	Payee address City; State; Zip Code P.O. Box 685008 Austin, TX 78768		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel ou General management	tside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundra	ontract Labor Loan Rep Ising Expense Transport Contribut ict Candic ental Expense OTHER (ayment/Reimbursement ation Equipment & Related Expense ons/Donations Made By late/Officeholder/Political Committee enter a category not listed above)
1 PAGE # Schedule: 7/12 F	2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008
4 Date	5 Payee name		0000000
07/28/2014	Great Austin Chamber of Commerce		
6 Amount (S) \$110.00	7 Payee address City; State; Zip Code 535 E 5th St. Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel ou event tickets	tside of Texas, complete Schedule T)
		Check if Austin, TX, office	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
. Date	Payee name		
08/01/2014 Amount (\$)	Hardwick, Andrew Payee address City; State; Zip Code		
\$820.00	417 Canterberry New Braunfels, TX 78132		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel ou Contract labor	tside of Texas, complete Schedule T) 🔲
EXPENDITURE		Check if Austin, TX, office	holder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		••••••••••
08/15/2014 Amount (\$)	Hardwick, Andrew Payee address City; State; Zip Code		
\$975.00	417 Canterberry New Braunfels, TX 78132		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel ou contract labor	tside of Texas, complete Schedule T)
		Check if Austin, TX, office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 09/02/2014	Payee name Hardwick Andrew		
09/02/2014 Amount (\$)	Hardwick, Andrew Payee address City; State; Zip Code		
\$675.00	417 Canterberry New Braunfels, TX 78132		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel ou Contract labor	tside of Texas, complete Schedule T)
		Check if Austin, TX, office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	SCHEDULE F		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fundr	Contract Labor Loan Repay aising Expense Transportat Contribution trict Candida: Rental Expense OTHER (er	/ment/Reimbursement ion Equipment & Related Expense is/Donations Made By :e/Officeholder/Political Committee ter a category not listed above)
1 PAGE # Schedule: 8/12 F	2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008
4 Date 09/12/2014	5 Payee name Hardwick, Andrew		
6 Amount (\$) \$300.00	7 Payee address City; State; Zip Code 417 Canterberry New Braunfels, TX 78132		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outs contract labor	ide of Texas, complete Schedule T) 🔲
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeho Office sought:	older living expense Office held:
Date	Payee name		
09/17/2014 Amount (\$)	Kelly Graphics Payee address City; State; Zip Code		
\$1,223.36	1409 Quaker Ridge Austin, TX 78746		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outs Printing	ide of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	L Check if Austin, TX, officeho Office sought:	older living expense Office held:
Date 09/16/2014	Payee name Kornely, Analiese		
Amount (\$)	Payee address City; State; Zip Code		
\$2,000.00	96 CHICON ST AUSTIN, TX 78702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outs Consulting	ide of Texas, complete Schedule T)
		Check if Austin, TX, officehe	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	. Office sought:	Office held:
Date	Payee name		
09/25/2014 Amount (\$)	Littlefield Consulting Payee address City; State; Zip Code		
\$1,400.00	PO Box 90591 Austin, TX 78709		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Consulting	ide of Texas, complete Schedule T
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officehe Office sought:	older living expense Office held:
direct expenditure to benefit C/OH		Unice sought.	Onice field.

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POLITIC		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fund	Contract Labor raising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By candidate/Officeholder/Political Committee (Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 9/12 F	2 FILER NAME Dealey, Amanda	3 ACCOUNT # (TEC filers) 00000008
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·
09/05/2014 6 Amount (\$) \$146.62	Lowe's 7 Payee address City; State; Zip Code 8000 Shoal Creek Blvd. Austin, TX 78757	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) yard sign hardware
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
08/15/2014 Amount (\$)	NGP Van, Inc. Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$250.00	1101 15th Street, NW, Suite 500 Washington, DC 20005	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (if travel outside of Texas, complete Schedule T) database software
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 09/10/2014	Payee name Office Max	·
Amount (\$)	Payee address City; State; Zip Code	
\$220.00	10001 Research Blvd #300 Austin, TX 78759	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
08/01/2014 Amount (\$)	Opinion Analysts Payee address City; State; Zip Code	
\$324.75	906 Rio Grande St. Austin, TX 78701	
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Voter data
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundr	Contract Labor Loan Repayn raising Expense Transportatio Contributions strict Candidate /Rental Expense OTHER (ente	nent/Reimbursement n Equipment & Related Expense /Donations Made By /Officeholder/Political Committee rr a category not listed above)
1 PAGE #	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 10/12			0000008
4 Date 07/01/2014	5 Payee name Susan Harry Consulting, LLC		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$1,300.00	P.O. Box 301074 Austin, TX 78703		· · · ·
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking 	(b) Description (If travel outsid Fundraising & compliance	e of Texas, complete Schedule T) 🔲 e consulting
		Check if Austin, TX, officehol	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
08/06/2014	Susan Harry Consulting, LLC		
Amount (\$) \$1,300.00	Payee address City; State; Zip Code P.O. Box 301074		
\$1,300.00	Austin, TX 78703		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outsid Fundraising & compliand	e of Texas, complete Schedule T)
	Consulting Expense		
		Check if Austin, TX, officehol	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
09/01/2014	Susan Harry Consulting, LLC		
Amount (\$) \$1,300.00	Payee address City; State; Zip Code P.O. Box 301074		
\$1,300.00	Austin, TX 78703		
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outsic fundraising & compliance	e of Texas, complete Schedule T)
EXPENDITURE		Check If Austin, TX, officehol	der living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
07/17/2014	Texas Democratic Party		
Amount (\$) \$550.00	Payee address City; State; Zip Code 4818 East Ben White Blvd., Suite 104 Austin, TX 78741		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outsic voter data	le of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officehol	dar living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

P.O.Box 12070 Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

POLITIC	SCHEDULE F	
	EXPENDITURE CA	TEGORIES
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wag ing Legal Services Solicitation/F nse Food/Beverage Expense Travel In Dis Polling Expense Travel Out O	ges/Contract Labor Loan Repayment/Reimbursement undraising Expense Transportation Equipment & Related Expense trict Contributions/Donations Made By f District Candidate/Officeholder/Political Committee ead/Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 11/12	Report: 53/55 2 FILER NAME Dealey, Amanda	3 ACCOUNT # (TEC filers) 00000008
4 Date	5 Payee name The Home Depot	
09/02/2014 6 Amount (\$)	7 Payee address City; State; Zip Code	
\$4.83	10515 N Mopac Expy Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) yard sign hardware
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
09/02/2014 Amount (\$)	The Home Depot Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$141.00		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T)
EXPENDITURE		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	······································
09/02/2014	The Home Depot	
Amount (\$) \$75 .41	Payee address City; State; Zip Code 10515 N Mopac Expy Austin, TX 78759	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) yard sign hardware
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
08/15/2014	Wallace, John	· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address City; State; Zip Code	
\$737.50	11316 Jollyville Rd. Austin, TX 78759	
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)
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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70 Austin, Texas 78711-2070

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POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundrais	ntract Labor Loan Repayment/Reimbursement sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By candidate/Officeholder/Political Committee ntal Expense OTHER (enter a category not listed above)
1 PAGE #	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 12/12		0000008
4 Date 09/02/2014	5 Payee name Wallace, John	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$1,025.00	11316 Jollyville Rd. Austin, TX 78759	
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) Contract labor
		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	
09/12/2014 Amount (\$)	Wailace, John Payee address City; State; Zip Code	······································
\$660.00	11316 Jollyville Rd. Austin, TX 78759	
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)
-		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	
09/19/2014 Amount (\$)	Wonk Consulting Payee address City; State; Zip Code	
\$200.00	1163 Poquito St. Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Consulting
		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	
07/24/2014	Worley Printing Co.	
Amount (\$) \$652.75	Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Printing
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

	AL EXPEN	NDITURES SONAL FUNDS		(*)	403-3600	SCHEDU	LE G
Accounting/Bank							
1 PAGE # Schedule: 1/1 Re		2 FILER NAME Dealey, Amanda			3	ACCOUNT # 00000008	(TEC filers)
4 Date 07/18/2014	5 Payee name Clary, Anne						
6 Amount (\$) \$606.25 ⊠ Reimbursement from political contributions intended	7 Payee address 1510 Newnin Austin, TX 7	iq i i i i i i i i i i i i i i i i i i					
8 PURPOSE OF EXPENDITURE	(a) Category (See	e Categories listed at the top of this schedule) ges/Contract Labor	d)) Description (If tr contract labor	avel outside of 1	Texas, complete So	hedule T) 🗌
Data				Check if Austin, TX	, officeholder liv	ving expense	
Date 08/29/2014	Payee name Clary, Anne						
Amount (\$) \$950.00 Reimbursement from political contributions intended	Austin, TX 7	iq					
PURPOSE OF EXPENDITURE		Categories listed at the top of this schedule) ges/Contract Labor		Description (If tr contract labor		Texas, complete So	:hedule T)
Date	Payee name	<u> </u>	<u> L</u>			Allia exhense	
09/19/2014 Amount (\$) \$67.09 Keimbursement form political contributions intended	Austin, TX 7	s City; State; Zip Code ar Blvd.					
PURPOSE OF EXPENDITURE		e Categories listed at the top of this schedule) ead/Rental Expense		Description (If tr office supplies	avel outside of T	Texas, complete So	:hedule T) 🗌
				Check if Austin, TX	, officeholder li	ving expense	