

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000008	2 PAGE # 1 of 55
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Amanda		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Mandy Dealey		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 300423 Austin, TX 78703		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Gary		
	NICKNAME LAST SUFFIX Valdez		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 685008 Austin, TX 78768		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 537-5473		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2014 THROUGH 09/25/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) City Council District 10

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

13 C/OH NAME Dealey, Amanda

14 ACCOUNT # (Ethics Commission filers)
0000000815 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

1,515.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

47,519.00

EXPENDITURE
TOTALS

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

\$

205.67

4. TOTAL POLITICAL EXPENDITURES

\$

57,150.22

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

53,183.59

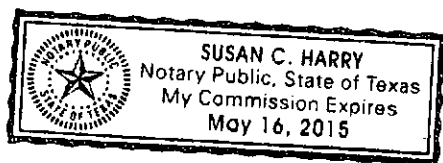
OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

25,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Mandy Dealey
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mandy Dealey, this the 6th day of October, 2014, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/39 Report: 3/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/22/2014

5 Full name of contributor ☒ out-of-state PAC (ID# C00011114)
AFSCME PEOPLE

6 Contributor address; City; State; Zip Code
1625 L St NW
Washington, DC 20036-5665

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/02/2014

Full name of contributor ☐ out-of-state PAC (ID#)
Alvis, Grant

Contributor address; City; State; Zip Code
4002 Petes Path
Austin, TX 78731-6123

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/27/2014

Full name of contributor ☐ out-of-state PAC (ID#)
Anderson, Ada

Contributor address; City; State; Zip Code
5613 Palisade Ct
Austin, TX 78731-4508

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

08/13/2014

Full name of contributor ☐ out-of-state PAC (ID#)
Armstrong, James

Contributor address; City; State; Zip Code
2518 El Greco Cv
Austin, TX 78703-1510

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Retired

Date

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID#)
Baer, Therese

Contributor address; City; State; Zip Code
7756 Northcross Dr
Ste 211
Austin, TX 78757-1738

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/39 Report: 4/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Bailey, Chuck

6 Contributor address; City; State; Zip Code

720 Brazos St
Ste 700
Austin, TX 78701-2531

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Lawyer

10 Employer (See Instructions)
Self

Date

09/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Banda, Jennifer

Contributor address; City; State; Zip Code

2501 Galewood Pl
Austin, TX 78703-1737

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Lawyer

Employer (See Instructions)
Texas Hospital Association

Date

07/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Barnes, Ben

Contributor address; City; State; Zip Code

901 S Mo Pac Expy
1
Austin, TX 78746-5776

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Ben Barnes Group

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Barnes, Melanie

Contributor address; City; State; Zip Code

1511 Woodlawn Blvd
Austin, TX 78703-3330

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Melanie H. Barnes Attorney, PLLC

Date

09/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Basciano, Joyce

Contributor address; City; State; Zip Code

1907 W 34th St
Austin, TX 78703-1318

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/39 Report: 5/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/08/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Beasley, Roger

6 Contributor address; City; State; Zip Code

6503 Santolina Cv
Austin, TX 78731-2806

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Auto Dealer

10 Employer (See Instructions)
Roger Beasley Mazda

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Beattie, Chester Jr.

Contributor address; City; State; Zip Code

8402 Burkwood Cv
Austin, TX 78735-1503

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Assistant General Counsel

Employer (See Instructions)
Health & Human Services Commission for the State of
Texas

Date

07/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Beaver, Becky

Contributor address; City; State; Zip Code

816 Congress Ave
Ste 1600
Austin, TX 78701-2638

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Law Offices of Becky Beaver

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bennett, Frances

Contributor address; City; State; Zip Code

4120 Edwards Mountain Dr
Austin, TX 78731-3901

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Bennett Flaherty, pllc

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bennett, Keith

Contributor address; City; State; Zip Code

4120 Edwards Mountain Dr
Austin, TX 78731-3901

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
CPA

Employer (See Instructions)
Texas Oncology

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/39 Report: 6/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Betts, Charles

6 Contributor address; City; State; Zip Code

14741 Arrowhead Dr
Volente, TX 78641-9122

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See instructions)

10 Employer (See instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Black, Dawn

Contributor address; City; State; Zip Code

13 Niles Rd
Austin, TX 78703-3138

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

07/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Blodgett, Terrell

Contributor address; City; State; Zip Code

4100 Jackson Ave
Apt 250
Austin, TX 78731-6052

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)
None

Employer (See instructions)
Not Employed

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bohart, Holly

Contributor address; City; State; Zip Code

5513 Cuesta Verde
Austin, TX 78746-1533

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)
Lawyer

Employer (See instructions)
Green Mountain Energy

Date

09/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bommarito-Crouch, Marla

Contributor address; City; State; Zip Code

4705 Island Cv
Austin
Austin, TX 78731-5144

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See instructions)

Employer (See instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/39 Report: 7/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/01/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Bonner, Cathy

6 Contributor address; City; State; Zip Code

4303 Canyonside Trl
Austin, TX 78731-2858

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Advertising Consultant

10 Employer (See Instructions)
Bonner, Inc.

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Borders, Mary

Contributor address; City; State; Zip Code

610 Guadalupe St
Austin, TX 78701-2926

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
Homemaker

Date

08/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bright, Elise

Contributor address; City; State; Zip Code

PO Box 4753
Austin, TX 78765-4753

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Professor

Employer (See Instructions)
Texas A&M University

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Brim, Jay

Contributor address; City; State; Zip Code

1309 Lost Creek Blvd
Austin, TX 78746-6316

Amount of
contribution (\$)

\$35.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Brim, Jay

Contributor address; City; State; Zip Code

1309 Lost Creek Blvd
Austin, TX 78746-6316

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/39 Report: 8/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/10/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Brimble, Raymond

6 Contributor address; City; State; Zip Code

2800 Robbs Run
Austin, TX 78703-1637

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
President & CEO

10 Employer (See Instructions)
Lynxs Group, LLC

Date

07/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Brooks, Daniel

Contributor address; City; State; Zip Code

4500 Crestway Dr
Austin, TX 78731-5202

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Architect

Employer (See Instructions)
Page Southerland Page, Inc.

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bryant, Suzanne

Contributor address; City; State; Zip Code

1500 W 24th St
Austin, TX 78703-2404

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Law Office of Suzanne Bryant

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bryant, Suzanne

Contributor address; City; State; Zip Code

1500 W 24th St
Austin, TX 78703-2404

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Law Office of Suzanne Bryant

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Bullock, Dan

Contributor address; City; State; Zip Code

PO Box 5627
Austin, TX 78763-5627

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/39 Report: 9/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/10/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Cain, Joe

6 Contributor address; City; State; Zip Code

6001 Westside Dr
Austin, TX 78731-4260

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Lawyer

10 Employer (See Instructions)

Duggins Wren Mann & Romero, LLP

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Carlozzi, Annette

Contributor address; City; State; Zip Code

8103 Asmara Dr
Austin, TX 78750-7807

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Carrington, Edwina

Contributor address; City; State; Zip Code

404 Cedar Oak Dr
West Lake Hills, TX 78746-3656

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Independent Affordable Housing Consultant

Employer (See Instructions)

Retired

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cartwright, Deborah

Contributor address; City; State; Zip Code

8200 Neely Dr
Apt 216
Austin, TX 78759-8552

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Director

Employer (See Instructions)

TX Comptroller of Public Accounts

Date

09/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Chapman, Jim

Contributor address; City; State; Zip Code

1107 The Cape Rd
Horseshoe Bay, TX 78657-6066

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/39 Report: 10/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/18/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Chimenti, Danette

6 Contributor address; City; State; Zip Code
200 The Cir
Austin, TX 78704-2418

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Clark, Stephen

Contributor address; City; State; Zip Code
301 Congress Ave
Ste 500
Austin, TX 78701-3046

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Chairman

Employer (See Instructions)
Cypress Real Estate Advisors, Inc.

Date

08/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Clasquin, Rani

Contributor address; City; State; Zip Code
911 Old Stonehedge St
West Lake Hills, TX 78746-3529

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

07/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cochran, James

Contributor address; City; State; Zip Code
PO Box 5054
Austin, TX 78763-5054

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cockrum, James

Contributor address; City; State; Zip Code
3213 Larry Ln
Austin, TX 78722-1639

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Writer

Employer (See Instructions)
Washtag Publications

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/39 Report: 11/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/02/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Cofer, George

6 Contributor address; City; State; Zip Code

3306 Gentry Dr
Rollingwood, TX 78746-5507

7 Amount of
contribution (\$)

\$35.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cofer, George

Contributor address; City; State; Zip Code

3306 Gentry Dr
Rollingwood, TX 78746-5507

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cofer, George

Contributor address; City; State; Zip Code

3306 Gentry Dr
Rollingwood, TX 78746-5507

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cofer, George

Contributor address; City; State; Zip Code

3306 Gentry Dr
Rollingwood, TX 78746-5507

Amount of
contribution (\$)

\$20.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Conn, Jerry

Contributor address; City; State; Zip Code

3219 Gilbert St
Austin, TX 78703-2221

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/39 Report: 12/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/14/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Connelly, Owen Jr.

6 Contributor address; City; State; Zip Code

2518 El Greco Cv
Austin, TX 78703-1510

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
Retired

Date

08/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cook, Jerry

Contributor address; City; State; Zip Code

1301 W 9th 1/2 St
Apt 201
Austin, TX 78703-4872

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Covington, Sid

Contributor address; City; State; Zip Code

4810 Placid Pl
Austin, TX 78731-5519

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Crowley, Berry

Contributor address; City; State; Zip Code

5000 Mission Oaks Blvd
Unit 43
Austin, TX 78735-6744

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Beryl P. Crowley Attorney and Counselor at Law

Date

08/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

DeGolyer, Everett III

Contributor address; City; State; Zip Code

4125 Honeycomb Rock Cir
Austin, TX 78731-2015

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/39 Report: 13/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/14/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Dickie, Martha

6 Contributor address; City; State; Zip Code

503 Brookhaven Trl
Austin, TX 78746-5452

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ducloux, Claude

Contributor address; City; State; Zip Code

3512 Native Dancer Cv
Austin, TX 78746-1434

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Duncan, John

Contributor address; City; State; Zip Code

4601 Bull Creek Rd.
Austin, TX 78731

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Dunnam Tita, Wendy

Contributor address; City; State; Zip Code

5905 Tumbling Cir
Austin, TX 78731-4053

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Dunning, Logan

Contributor address; City; State; Zip Code

8519 Cahill Dr
Austin, TX 78729-7286

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Field Director

Employer (See Instructions)
Mandy Dealey Campaign

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/39 Report: 14/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/23/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Elliott, Chris

6 Contributor address; City; State; Zip Code
1705 Rabb Rd
Austin, TX 78704-2811

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/02/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Enniss, Stephen

Contributor address; City; State; Zip Code
2628 Jefferson St
Austin, TX 78703-1801

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Farmer, Matthew

Contributor address; City; State; Zip Code
5508 Janice Ave
Kenner, LA 70065-1540

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Programmer

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

07/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fath, Shudde

Contributor address; City; State; Zip Code
1005 Bluebonnet Ln
Austin, TX 78704-2003

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fellers, Stacey

Contributor address; City; State; Zip Code
5603 Caprice Dr
Austin, TX 78731-4835

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/39 Report: 15/55	
2 FILER NAME Dealey, Amanda		3 ACCOUNT # (Ethics Commission filers) 00000008	
4 Date 08/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferchill, Cary 6 Contributor address; City; State; Zip Code 2524 Tanglewood Trl Austin, TX 78703-1540	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Lawyer		10 Employer (See Instructions) Reed & Scardino	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fiedorek, Sandra Contributor address; City; State; Zip Code 2206 Matthews Dr Austin, TX 78703-2019	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) University of Texas	
Date 08/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fowler, Carol McMurtry Contributor address; City; State; Zip Code 10 Woodstone Sq Austin, TX 78703-1164	Amount of contribution (\$) \$330.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 08/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fowler, Carol McMurtry Contributor address; City; State; Zip Code 10 Woodstone Sq Austin, TX 78703-1164	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fredericks Whitcraft, Carol Ph.D. Contributor address; City; State; Zip Code 305 E 32nd St Austin, TX 78705-2405	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/39 Report: 16/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/19/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Fuller, Larry Paul

6 Contributor address; City; State; Zip Code

2201 McCullough St
Austin, TX 78703-1718

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Writer/Consultant

10 Employer (See Instructions)
Self LPFuller Inc

Date

08/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Galligan, Jude

Contributor address; City; State; Zip Code

603 Davis St
Apt 102
Austin, TX 78701-4227

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
TAGR, Inc.

Date

09/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Gardner, Margaret Ann

Contributor address; City; State; Zip Code

3207 Kerbey Ln
Austin, TX 78703-1450

Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Getter, Becky

Contributor address; City; State; Zip Code

1101 E 11th St
Austin, TX 78702-1908

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
Homemaker

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Getter, Kerry

Contributor address; City; State; Zip Code

1101 E 11th St
Austin, TX 78702-1908

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Balcones Resources

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/39 Report: 17/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/12/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Geyer, Richard Jr.

6 Contributor address; City; State; Zip Code

3415 Cascadera Dr
Austin, TX 78731-5811

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Gladish, Kenneth

Contributor address; City; State; Zip Code

6703 Mesa Dr
Austin, TX 78731-2817

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Non Profit Executive

Employer (See Instructions)
Seton Healthcare Family

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Goodfriend, Sarah

Contributor address; City; State; Zip Code

1500 W 24th St
Austin, TX 78703-2404

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Goodfriend, Sarah

Contributor address; City; State; Zip Code

1500 W 24th St
Austin, TX 78703-2404

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Grammer, Jerry

Contributor address; City; State; Zip Code

1600 W 38th St
Ste 404
Austin, TX 78731-6407

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Clinical Psychologist

Employer (See Instructions)
Jerry R Grammer PhD

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 16/39 Report: 18/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/14/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Green, Robert

6 Contributor address; City; State; Zip Code
3001 Gilbert St
Austin, TX 78703-2219

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Professor

10 Employer (See Instructions)
University of Texas at Austin

Date

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Grissom, Joene

Contributor address; City; State; Zip Code
6603 Shadow Valley Dr
Austin, TX 78731-4145

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hammill, Donald

Contributor address; City; State; Zip Code
901 W 9th St
Apt 804
Austin, TX 78703-4638

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Owner, Publisher

Employer (See Instructions)
PRO-ED, Inc.

Date

09/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harding, Annie

Contributor address; City; State; Zip Code
4428 Gillis St
Austin, TX 78745-1018

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Associate Producer

Employer (See Instructions)
Armadillo Christmas Bazaar

Date

08/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harslem, Eric

Contributor address; City; State; Zip Code
911 Old Stonehedge St
West Lake Hills, TX 78746-3529

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 17/39 Report: 19/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/07/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Hatch, Tom

6 Contributor address; City; State; Zip Code

1102B E 8th St
Austin, TX 78702-3225

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Architecture

10 Employer (See Instructions)
h+uo architects

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Heymann, David

Contributor address; City; State; Zip Code

2206 Matthews Dr
Austin, TX 78703-2019

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Architect

Employer (See Instructions)
Self Employed

Date

09/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Hicks, Sandra

Contributor address; City; State; Zip Code

3001 Bonnie Rd
Austin, TX 78703-2807

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Environmental Consultant

Employer (See Instructions)
Hicks & Company

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Hilbert, Thomas

Contributor address; City; State; Zip Code

414 Sunfish St
Lakeway, TX 78734-4404

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

08/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Hill, Forest

Contributor address; City; State; Zip Code

4100 Jackson Ave
Apt 311
Austin, TX 78731-6052

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 18/39 Report: 20/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Hooser, Greg

6 Contributor address; City; State; Zip Code

4501 Westlake Dr
14
Austin, TX 78746-1506

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Attorney/Consultant

10 Employer (See Instructions)
Greg D Hooser Consulting, LLC

Date

09/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Hunt, Meta

Contributor address; City; State; Zip Code

2 Limerick Ln
West Lake Hills, TX 78746-3520

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ikard Wynne, LLP

Contributor address; City; State; Zip Code

2901 Via Fortuna
Suite 450
Austin, TX 78746-7565

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Johnson, Donald

Contributor address; City; State; Zip Code

1135 Burdette St
New Orleans, LA 70118-3972

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Accountant

Employer (See Instructions)
Leon Low and Sons

Date

07/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Johnstone, Jim

Contributor address; City; State; Zip Code

2905 San Gabriel St
Austin, TX 78705-3539

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retail Sales

Employer (See Instructions)
Johnstone Made to Measure

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/39 Report: 21/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/06/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Kadison, Bret

6 Contributor address; City; State; Zip Code
3904 Sycamore Dr
Austin, TX 78722-1230

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kenyon, Terry

Contributor address; City; State; Zip Code
4913 Rollingwood Dr
West Lake Hills, TX 78746-5670

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Kenyon & Sproull, P.C.

Date

09/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kerr, Chris

Contributor address; City; State; Zip Code
4115 Abingdon Dr
Garland, TX 75043-7251

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
COO

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kerr, Heather

Contributor address; City; State; Zip Code
4115 Abingdon Dr
Garland, TX 75043-7251

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Homemaker

Employer (See Instructions)
Homemaker

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kever, Andrew

Contributor address; City; State; Zip Code
6105 Highland Hills Dr
Austin, TX 78731-4101

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Enoch Kever PLLC

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 20/39 Report: 22/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/11/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Keys, Margaret

6 Contributor address; City; State; Zip Code

1713B West 11th
Austin
Austin, TX 78703-3962

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Executive Coach

10 Employer (See Instructions)
Self Employed

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Khataw, Nahid

Contributor address; City; State; Zip Code

7914 Bee Cave Rd
Austin, TX 78746-4903

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Accurate Technical Services Inc

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Koch Schilz, Virginia

Contributor address; City; State; Zip Code

3616 Claburn Dr
Austin, TX 78759-8215

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Koriorh, Claire

Contributor address; City; State; Zip Code

2305 Barton Creek Blvd
Unit 34
Austin, TX 78735-1651

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Kraus, Lisa

Contributor address; City; State; Zip Code

4906 Shadywood Ln
Dallas, TX 75209-2024

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Writer

Employer (See Instructions)
Self Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 21/39 Report: 23/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/17/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Lalk, Margaret

6 Contributor address; City; State; Zip Code
6309 Walebridge Ln
Austin, TX 78739-1571

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lancaster, David

Contributor address; City; State; Zip Code
1601 Houston St
Apt 11
Austin, TX 78756-1316

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Governmental Affairs

Employer (See Instructions)
TX Society of Architects

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lastrapes, Sharon

Contributor address; City; State; Zip Code
12030 Pleasant Panorama Vw
Austin, TX 78738-5309

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lavine, Richard

Contributor address; City; State; Zip Code
803 Avondale Rd
Austin, TX 78704-2516

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

LeBlanc, Heather

Contributor address; City; State; Zip Code
2607 Arizona Dr
Marrero, LA 70072-6107

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Service Coordinator

Employer (See Instructions)
Force Multiplier Solutions, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/39 Report: 24/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/16/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Leche, Paul

6 Contributor address; City; State; Zip Code

5107 Fairview Dr
Austin, TX 78731-5425

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Legge, Murray

Contributor address; City; State; Zip Code

4005 Idlewild Rd
Austin, TX 78731-6146

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lentz, Lamar

Contributor address; City; State; Zip Code

PO Box 74
Round Top, TX 78954-0074

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Museum Curator

Employer (See Instructions)

James Dick Foundation

Date

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Leonard, Linda

Contributor address; City; State; Zip Code

7122 Royal Ln
Dallas, TX 75230-3608

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

Date

08/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Leonard, Margaret

Contributor address; City; State; Zip Code

5804 River Oaks Rd S
New Orleans, LA 70123-2155

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Homemaker

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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 # (Ethics Commission filers)

00000008

4 Date

08/05/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Leonard, Robert

6 Contributor address; City; State; Zip Code

5804 River Oaks Rd S
New Orleans, LA 70123-2155

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Chairman and CEO

10 Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

08/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lewis, Carolyn

Contributor address; City; State; Zip Code

2103 Manana St
Austin, TX 78730-4245

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Investor

Employer (See Instructions)
Lewco Interests, LLC

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lewis, Dawn

Contributor address; City; State; Zip Code

4509 Edgemont Dr
Austin, TX 78731-5223

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lochrige, Lloyd Jr

Contributor address; City; State; Zip Code

3400 Hillview Rd
Austin, TX 78703-1131

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Loewy, Adam

Contributor address; City; State; Zip Code

101 Colorado Ave. Apt. 1602 Austin, TX 78701

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Lawyer

Employer (See Instructions)
Loewy Law Firm

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 24/39 Report: 26/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Lohrmann, Charles

6 Contributor address; City; State; Zip Code

PO Box 50291
Austin, TX 78763-0291

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Editor

10 Employer (See Instructions)
Texas Electric Cooperatives

Date

07/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Lyle, Mark

Contributor address; City; State; Zip Code

4420 Overton Crest St
Ft Worth, TX 76109-2521

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Marcus, Richard

Contributor address; City; State; Zip Code

913 Terrace Mountain Dr
West Lake Hills, TX 78746-2730

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Advisor to Early Stage E-Commerce Companies

Employer (See Instructions)
Self

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Matheson, Dan

Contributor address; City; State; Zip Code

2901 Navidad Cv
Austin, TX 78735-1439

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Matheson Law Partners, PLLC

Date

07/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Maxwell, Phil

Contributor address; City; State; Zip Code

2703 Stratford Dr
Austin, TX 78746-4624

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Law Offices of Philip K. Maxwell

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/39 Report: 27/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Maxwell, Sue

6 Contributor address; City; State; Zip Code

2703 Stratford Dr
Austin, TX 78746-4624

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Teacher

10 Employer (See Instructions)
Retired

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

McCalla, Andrew

Contributor address; City; State; Zip Code

1300 W 9th 1/2 St
Austin, TX 78703-4810

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Meachum, Kurt

Contributor address; City; State; Zip Code

3900 Sidehill Path
Austin, TX 78731-1418

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Public Affairs

Employer (See Instructions)
Philips & Meachum

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Meyer, Stefan

Contributor address; City; State; Zip Code

1615 Clover St
Mandeville, LA 70448-8327

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(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

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Michener, Elizabeth

Contributor address; City; State; Zip Code

146 18th St
New Orleans, LA 70124-1226

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Executive Assistant

Employer (See Instructions)
Force Multiplier Solutions, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 26/39 Report: 28/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/11/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Michener, Patrick

6 Contributor address; City; State; Zip Code

146 18th St
New Orleans, LA 70124-1226

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Manager

10 Employer (See Instructions)
Hertz

Date

09/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Miller, Laurence

Contributor address; City; State; Zip Code

PO Box 49130
Austin, TX 78765-9130

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Manager

Employer (See Instructions)
Baluarte Creek

Date

09/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Miller, William

Contributor address; City; State; Zip Code

2905 Gilbert St
Austin, TX 78703-2217

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Governmental Affairs

Employer (See Instructions)
HillCo Partners

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Mok, Amy

Contributor address; City; State; Zip Code

6301 Cat Mountain Cv
Austin, TX 78731-3502

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
President & CEO

Employer (See Instructions)
Asian American Cultural Center

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Murray, Sonda

Contributor address; City; State; Zip Code

3202 El Toro Cv
Austin, TX 78746-1513

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 27/39 Report: 29/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/19/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Naeve, Pat

6 Contributor address; City; State; Zip Code
6507 Lost Cv
Austin, TX 78746-7128

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Engineer

10 Employer (See Instructions)
Architectural Engineers Collaborative

Date

08/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Newman, Jolie

Contributor address; City; State; Zip Code
6308 Tulip Ln
Dallas, TX 75230-3830

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
None

Employer (See Instructions)
Not Employed

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nyfeler, John

Contributor address; City; State; Zip Code
1805 Adriane Dr
B
Austin, TX 78721-1213

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ogden, Ron

Contributor address; City; State; Zip Code
1122 Colorado St
Austin, TX 78701-2164

Amount of
contribution (\$)

\$199.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Olson, Kris

Contributor address; City; State; Zip Code
3708 Chimney Ridge Dr
Waco, TX 76708-2368

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 28/39 Report: 30/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

07/17/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Orr, Bonnie

6 Contributor address; City; State; Zip Code

1107 Nueces St
Austin, TX 78701-2105

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Orr, Stephen

Contributor address; City; State; Zip Code

1107 Nueces St
Austin, TX 78701-2105

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Orr & Olavson

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Osborne, Betty

Contributor address; City; State; Zip Code

2106 Meadowbrook Dr
Austin, TX 78703-2234

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Artist/Housewife

Employer (See Instructions)
Self Employed

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Parke, Jessica

Contributor address; City; State; Zip Code

449 Bellemeade Blvd
Gretna, LA 70056-7220

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Receptionist

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Peel, Larry

Contributor address; City; State; Zip Code

2802 Stratford Dr. Austin, TX 78746

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Builder/Developer

Employer (See Instructions)
Larry Peel Company

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/39 Report: 31/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/12/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Pickle, Peggy

6 Contributor address; City; State; Zip Code

1301 W 9th 1/2 St
Apt 201
Austin, TX 78703-4872

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ponder, Helene

Contributor address; City; State; Zip Code

6876 General Diaz St
New Orleans, LA 70124-3340

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Marketing Manager

Employer (See Instructions)
Imperial Trading Company

Date

09/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ponder, Michael

Contributor address; City; State; Zip Code

6876 General Diaz St
New Orleans, LA 70124-3340

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Regional Manager

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ramsey, George III

Contributor address; City; State; Zip Code

515 Congress Ave
Ste 1900
Austin, TX 78701-3526

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Ramsey Properties

Date

08/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Randle, Flo Ann

Contributor address; City; State; Zip Code

3309 Windsor Rd
Austin, TX 78703-2245

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 30/39 Report: 32/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/19/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Randle, Flo Ann

6 Contributor address; City; State; Zip Code

3309 Windsor Rd
Austin, TX 78703-2245

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

08/28/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ratliff, Gay

Contributor address; City; State; Zip Code

3509 Hampton Rd
Austin, TX 78705-1823

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

09/16/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Reynolds, Katherine

Contributor address; City; State; Zip Code

610 Coloma St
Ste 720
Sausalito, CA 94965-1572

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Investments

Employer (See Instructions)
Self-employed

Date

09/15/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Richards, Daniel

Contributor address; City; State; Zip Code

816 Congress Ave
1200
Austin, TX 78701-2442

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

Date

09/02/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Riley, Eva

Contributor address; City; State; Zip Code

3511 Cherry Ln
Austin, TX 78703-2611

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 31/39 Report: 33/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/11/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Robertson, Pat

6 Contributor address; City; State; Zip Code

2300 Quarry Rd
Austin, TX 78703-3839

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Wealth Advisor

10 Employer (See Instructions)
UBS Financial Services

Date

07/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Rosato, John

Contributor address; City; State; Zip Code

PO Box 50164
Austin, TX 78763-0164

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Southwest Strategies Group

Date

07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Royall, Richard

Contributor address; City; State; Zip Code

PO Box 52
Round Top, TX 78954-0052

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Managing Director

Employer (See Instructions)
Round Top Festival Institute

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Rutishauser, Bob

Contributor address; City; State; Zip Code

4200 Jackson Ave
Apt 5015
Austin, TX 78731-6061

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Scanlan, William III

Contributor address; City; State; Zip Code

6303 Highland Hills Dr
Austin, TX 78731-4105

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Entrepreneur

Employer (See Instructions)
Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 32/39 Report: 34/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/18/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Seeber, Brittany

6 Contributor address; City; State; Zip Code

4350 Trinity Mills Rd
Apt 9103
Dallas, TX 75287-7038

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Executive Assistant

10 Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Sheppard, Jade

Contributor address; City; State; Zip Code

12425 Dorsett Rd
Austin, TX 78727-5807

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/22/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Siff, Ted

Contributor address; City; State; Zip Code

1601 Rio Grande, Ste 455
Austin, TX 78701

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Sonnenberg, Steve

Contributor address; City; State; Zip Code

3413 Ledgestone Dr
Austin, TX 78731-5124

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/09/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Soros, Jennifer

Contributor address; City; State; Zip Code

70 Greenwich Ave
PMB 199
New York, NY 10011-8384

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Owner of Soros Fund Management

Employer (See Instructions)
Self Employed

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 33/39 Report: 35/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/09/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Stanley, Alfred

6 Contributor address; City; State; Zip Code

PO Box 5674
Austin, TX 78763-5674

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Stapleton, Ginny

Contributor address; City; State; Zip Code

203 Ralph Ablanado Dr
Austin, TX 78748-5524

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Steiner, Anna

Contributor address; City; State; Zip Code

3132 Eanes Cir
Austin, TX 78746-6741

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Steiner, Frederick

Contributor address; City; State; Zip Code

3132 Eanes Cir
Austin, TX 78746-6741

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Stewart, Jacqueline M.

Contributor address; City; State; Zip Code

3717 Stratford Ave
Dallas, TX 75205-2812

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)
Henry S. Miller Interests, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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 # (Ethics Commission filers)

00000008

4 Date

09/05/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Stuart, Claire

6 Contributor address; City; State; Zip Code

2502 Velasquez Dr
Austin, TX 78703-1545

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Therapist

10 Employer (See Instructions)
Self

Date

09/21/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Sullivan, David

Contributor address; City; State; Zip Code

1710 Waterston Ave
Austin, TX 78703-3937

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Susholtz, Gail

Contributor address; City; State; Zip Code

3834 Spicewood Springs Rd
Austin, TX 78759-8976

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)
Retired

Date

08/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Susholtz, Rodney

Contributor address; City; State; Zip Code

3834 Spicewood Springs Rd
Austin, TX 78759-8976

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Architect

Employer (See Instructions)
Susholtz Properties

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Swartwood, Alison

Contributor address; City; State; Zip Code

12604 Rush Creek Ln
Austin, TX 78732-1992

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Housewife

Employer (See Instructions)
Housewife

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 35/39 Report: 37/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/11/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Swartwood, Kathryn

6 Contributor address; City; State; Zip Code

2018 General Pershing St
New Orleans, LA 70115-5436

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Homemaker

10 Employer (See Instructions)
Homemaker

Date

09/11/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Swartwood, Slater

Contributor address; City; State; Zip Code

2018 General Pershing St
New Orleans, LA 70115-5436

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
EVP

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Swartwood, Slater Jr.

Contributor address; City; State; Zip Code

12604 Rush Creek Ln
Austin, TX 78732-1992

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Marketing

Employer (See Instructions)
Force Multiplier Solutions, Inc.

Date

09/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Swearingen, Robert

Contributor address; City; State; Zip Code

4500 Jackson Ave.
Apt 5027
Austin, TX 78731

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/20/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Swearingen, Robert

Contributor address; City; State; Zip Code

4500 Jackson Ave.
Apt 5027
Austin, TX 78731

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 36/39 Report: 38/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/21/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Swisher, Earl

6 Contributor address; City; State; Zip Code

900 E 6th St
Ste 105
Austin, TX 78702-3281

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Tai, James

Contributor address; City; State; Zip Code

1715 Cromwell HI
Austin, TX 78703-3306

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Physician

Employer (See Instructions)
UT Austin

Date

09/18/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Taniguchi, Evan

Contributor address; City; State; Zip Code

1809 E 6th St
Austin, TX 78702-2703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Architect

Employer (See Instructions)
Self Employed

Date

07/17/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Texas Democratic Party

Contributor address; City; State; Zip Code

4818 East Ben White Blvd., Suite 104
Austin, TX 78741

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)
voter file access

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Thomas, Grant

Contributor address; City; State; Zip Code

4106 Avenue F
Austin, TX 78751-4624

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Adjunct Professor

Employer (See Instructions)
University of Texas at Austin

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 37/39 Report: 39/55

2 FILER NAME Dealey, Amanda**3** ACCOUNT # (Ethics Commission filers)

00000008

4 Date

08/23/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Thomas, Margot

6 Contributor address; City; State; Zip Code
4106 Avenue F
Austin, TX 78751-4624**7** Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)
Homemaker**10** Employer (See Instructions)
Homemaker

Date

07/07/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Thompson, Helen

Contributor address; City; State; Zip Code
2304 Tower Dr
Austin, TX 78703-2322Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Thompson, Helen L

Contributor address; City; State; Zip Code
PO Box 50291
Austin, TX 78763-0291Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/05/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Trigger, Jeff

Contributor address; City; State; Zip Code
3106 Lookout Ln
Austin, TX 78746-1430Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Hospitality Consulting and ManagementEmployer (See Instructions)
La Corsha Hospitality Group

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Tynberg, Alex

Contributor address; City; State; Zip Code
3712 Meredith St
Austin, TX 78703-2021Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 38/39 Report: 40/55

2 FILER NAME Dealey, Amanda

3 ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/06/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Van Zandt, Nicholas

6 Contributor address; City; State; Zip Code

3001 Bonnie Rd
Austin, TX 78703-2807

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/06/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Van Zandt, Thomas

Contributor address; City; State; Zip Code

3001 Bonnie Rd
Austin, TX 78703-2807

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Waxman, William

Contributor address; City; State; Zip Code

6400 Dry Bend Cv
Austin, TX 78731-3925

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Financial Services

Employer (See Instructions)

Argus Financial Group

Date

09/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Webb, Lisa

Contributor address; City; State; Zip Code

11605 Hobbiton Trl
Austin, TX 78739-5628

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Webber, Neil

Contributor address; City; State; Zip Code

6617 Soter Pkwy
Austin, TX 78735-6339

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

None

Employer (See Instructions)

Retired

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 39/39 Report: 41/55

2 FILER NAME Dealey, Amanda**3** ACCOUNT # (Ethics Commission filers)

00000008

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Wittliff, Sally

6 Contributor address; City; State; Zip Code

1301 Kent Ln

Austin, TX 78703-3816

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)
Attorney**10** Employer (See Instructions)
Wittliff Law Firm

Date

09/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Wolff, David

Contributor address; City; State; Zip Code

1206 W 8th St

Austin, TX 78703

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/19/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)

Zoranic, Aleksandar

Contributor address; City; State; Zip Code

1135 Burdette St
New Orleans, LA 70118-3972Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Research and DevelopmentEmployer (See Instructions)
Force Multiplier Solutions, Inc.

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 # (Ethics Commission filers) 00000008	
4 TOTAL OF UNITEMIZED LOANS: ⇌⇌⇌⇌⇌⇌		\$	
5 Date of loan 09/25/2014	7 Name of lender Dealey, Amanda <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$) \$25,000.00	
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 5401 Ridge Oak Dr. Austin, TX 78731	10 Interest rate	
		11 Maturity date 11/04/2014	
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)	
20 Principal Occupation		21 Employer	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/12 Report: 43/55		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) <input type="checkbox"/> contract labor <input type="checkbox"/> 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 09/02/2014		Payee name Cashiola, Tyler			
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) <input type="checkbox"/> contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/12/2014		Payee name Cashiola, Tyler			
Amount (\$) \$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) <input type="checkbox"/> contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name Cooper, Lucy			
Amount (\$) \$470.00		Payee address City: State: Zip Code 8500 Red Willow #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) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/12 Report: 44/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 09/16/2014		5 Payee name Cooper, Lucy			
6 Amount (\$) \$355.00		7 Payee address City: State: Zip Code 8500 Red Willow #A Austin, TX 78736			
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) <input type="checkbox"/> contract labor	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/01/2014		Payee name Dunning, Logan			
Amount (\$) \$1,815.00		Payee address City: State: Zip Code 8519 Cahill Dr. # 2505 Austin, TX 78729			
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) <input type="checkbox"/> Contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Dunning, Logan			
Amount (\$) \$1,125.00		Payee address City: State: Zip Code 8519 Cahill Dr. # 2505 Austin, TX 78729			
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) <input type="checkbox"/> contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name Dunning, Logan			
Amount (\$) \$1,125.00		Payee address City: State: Zip Code 8519 Cahill Dr. # 2505 Austin, TX 78729			
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) <input type="checkbox"/> Contract labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/12 Report: 45/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 09/12/2014		5 Payee name Dunning, Logan			
6 Amount (\$) \$1,125.00		7 Payee address City: State: Zip Code 8519 Cahill Dr. # 2505 Austin, TX 78729			
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) <input type="checkbox"/> contract labor <input type="checkbox"/> 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 07/03/2014		Payee name First Data			
Amount (\$) \$281.76		Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data			
Amount (\$) \$326.72		Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data			
Amount (\$) \$28.40		Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/12 Report: 46/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 08/04/2014		5 Payee name First Data			
6 Amount (\$) \$82.20		7 Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> 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 08/04/2014		Payee name First Data			
Amount (\$) \$534.08		Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name First Data			
Amount (\$) \$27.00		Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/03/2014		Payee name First Data			
Amount (\$) \$15.60		Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/12 Report: 47/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 09/03/2014		5 Payee name First Data			
6 Amount (\$) \$227.15		7 Payee address City: State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> 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 09/03/2014		Payee name First Data			
Amount (\$) \$91.09		Payee address City: State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/01/2014		Payee name GNI Strategies, LLC			
Amount (\$) \$5,843.19		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 outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/15/2014		Payee name GNI Strategies, LLC			
Amount (\$) \$2,818.97		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 outside of Texas, complete Schedule T) <input type="checkbox"/> General campaign management, printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/12 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		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing and mailing services <input type="checkbox"/> 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 08/08/2014		Payee name GNI Strategies, LLC			
Amount (\$) \$6,190.44		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) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing and mailing services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/13/2014		Payee name GNI Strategies, LLC			
Amount (\$) \$2,650.22		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 outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/12/2014		Payee name 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 outside of Texas, complete Schedule T) <input type="checkbox"/> General management and social media consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/12 Report: 49/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 07/28/2014		5 Payee name Great Austin Chamber of Commerce			
6 Amount (\$) \$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 outside of Texas, complete Schedule T) <input type="checkbox"/> event tickets <input type="checkbox"/> 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 08/01/2014		Payee name Hardwick, Andrew			
Amount (\$) \$820.00		Payee address City: State: Zip Code 417 Canterbury New Braunfels, TX 78132			
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) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Hardwick, Andrew			
Amount (\$) \$975.00		Payee address City: State: Zip Code 417 Canterbury New Braunfels, TX 78132			
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) <input type="checkbox"/> contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name Hardwick, Andrew			
Amount (\$) \$675.00		Payee address City: State: Zip Code 417 Canterbury New Braunfels, TX 78132			
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) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/12 Report: 50/55		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 Canterbury 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 outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor <input type="checkbox"/> 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 09/17/2014		Payee name Kelly Graphics			
Amount (\$) \$1,223.36		Payee address City: State: Zip Code 1409 Quaker Ridge Austin, TX 78746			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/16/2014		Payee name Kornely, Analiese			
Amount (\$) \$2,000.00		Payee address City: State: Zip Code 96 CHICON 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) <input type="checkbox"/> Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/25/2014		Payee name Littlefield Consulting			
Amount (\$) \$1,400.00		Payee address City: State: Zip Code PO Box 90591 Austin, TX 78709			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/12 Report: 51/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 09/05/2014		5 Payee name Lowe's			
6 Amount (\$) \$146.62		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) <input type="checkbox"/> yard sign hardware <input type="checkbox"/> 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 08/15/2014		Payee name NGP Van, Inc.			
Amount (\$) \$250.00		Payee address City: State: Zip Code 1101 15th Street, NW, Suite 500 Washington, DC 20005			
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) <input type="checkbox"/> database software <input type="checkbox"/> 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 (\$) \$220.00		Payee address City: State: Zip Code 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) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/01/2014		Payee name Opinion Analysts			
Amount (\$) \$324.75		Payee address City: State: Zip Code 906 Rio Grande St. Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Voter data <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/12 Report: 52/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 07/01/2014		5 Payee name Susan Harry Consulting, LLC			
6 Amount (\$) \$1,300.00		7 Payee address City: State: Zip Code 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 outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting <input type="checkbox"/> 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 08/06/2014		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$1,300.00		Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/01/2014		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$1,300.00		Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> fundraising & compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/17/2014		Payee name Texas Democratic Party			
Amount (\$) \$550.00		Payee address City: State: Zip Code 4818 East Ben White Blvd., Suite 104 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> voter data <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/12 Report: 53/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 09/02/2014		5 Payee name The Home Depot			
6 Amount (\$) \$4.83		7 Payee address City: State: Zip Code 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) <input type="checkbox"/> yard sign hardware <input type="checkbox"/> 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 09/02/2014		Payee name The Home Depot			
Amount (\$) \$141.00		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) <input type="checkbox"/> yard sign hardware <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name 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) <input type="checkbox"/> yard sign hardware <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Wallace, John			
Amount (\$) \$737.50		Payee address City: State: Zip Code 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) <input type="checkbox"/> contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/12 Report: 54/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 09/02/2014		5 Payee name Wallace, John			
6 Amount (\$) \$1,025.00		7 Payee address City: State: Zip Code 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) <input type="checkbox"/> Contract labor <input type="checkbox"/> 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 09/12/2014		Payee name Wallace, John			
Amount (\$) \$660.00		Payee address City: State: Zip Code 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) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/19/2014		Payee name Wonk Consulting			
Amount (\$) \$200.00		Payee address City: State: Zip Code 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) <input type="checkbox"/> Consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/24/2014		Payee name Worley Printing Co.			
Amount (\$) \$652.75		Payee address City: State: Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 55/55		2 FILER NAME Dealey, Amanda		3 ACCOUNT # (TEC filers) 00000008	
4 Date 07/18/2014		5 Payee name Clary, Anne			
6 Amount (\$) \$606.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 1510 Newning Austin, TX 78704			
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) <input type="checkbox"/> contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 08/29/2014		Payee name Clary, Anne			
Amount (\$) \$950.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1510 Newning Austin, TX 78704			
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) <input type="checkbox"/> contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 09/19/2014		Payee name Office Depot			
Amount (\$) \$67.09 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2101 S Lamar Blvd. Austin, TX 78704			
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) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	