

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) 00000078	2 PAGE # 1 of 138
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mike NICKNAME LAST SUFFIX Martinez	OFFICE USE ONLY Date Received: 2014 OCT 6 PM 4 37 Austin City Clerk RECEIVED Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 301717 Austin, TX 78703		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Gustavo NICKNAME LAST SUFFIX Gus Garcia		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7401 Ophelia Dr. Austin, TX 78752		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 452-3857		
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) City Council District 2	12 OFFICE SOUGHT (if known) Mayor	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Martinez, Mike

14 ACCOUNT # (Ethics Commission filers)
00000078

15 NOTICE FROM POLITICAL COMMITTEE(S)

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

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 100.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 86,593.09
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 1,294.76
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4. TOTAL POLITICAL EXPENDITURES	\$ 131,017.33
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CONTRIBUTION BALANCE

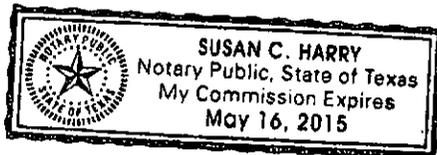
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 102,384.59
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 25,000.00
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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.



Mr. Martinez

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

[Signature]
Signature of officer administering oath

Susan Harry
Print name of officer administering oath

Notary
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: 1/93 Report: 3/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Acker, Robert 6 Contributor address; City; State; Zip Code 12610 Mistletoe Trl Manchaca, TX 78652-3736	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) Firefighter		10 Employer (See Instructions) City of Austin	
Date 09/22/2014	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID# <u>C00011114</u>) AFSCME PEOPLE Contributor address; City; State; Zip Code 1625 L St NW Washington, DC 20036-5665	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)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aghamalian, Brandon Contributor address; City; State; Zip Code 2641 Barton Hills Dr Austin, TX 78704-4539	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Focused Advocacy	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aguirre, Linda Contributor address; City; State; Zip Code 6906 Notre Dame Dr Austin, TX 78723-1346	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aguirre, Lionel Contributor address; City; State; Zip Code 10213 Dahlgreen Ave Austin, TX 78739-1690	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) Consultant		Employer (See Instructions) Target Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/93 Report: 4/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aguirre, Lionel Jr. 6 Contributor address; City; State; Zip Code 1320 Tillerfield Austin, TX 78748-2315	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Legislative Aide		10 Employer (See Instructions) Texas House of Representatives	
Date 08/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alliegro, Nancy Contributor address; City; State; Zip Code 1307 Kinney Ave Apt 124 Austin, TX 78704-2280	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allison, Sharee Contributor address; City; State; Zip Code 16701 Goldenwood Way Austin, TX 78737-9003	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Creative Director		Employer (See Instructions) Square Foot Studios	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Allong, Raeann Contributor address; City; State; Zip Code 6119 Bullard Dr Apt A Austin, TX 78757-4456	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alvarez, Raul Contributor address; City; State; Zip Code 2601 Zaragosa St Austin, TX 78702-3928	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Wells Fargo	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/93 Report: 5/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alvarez, Theresa 6 Contributor address; City; State; Zip Code 2601 Zaragosa St Austin, TX 78702-3928	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) Administrator		10 Employer (See Instructions) AISD	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armitage, Angela Contributor address; City; State; Zip Code 7404 Twilight Mesa Dr Austin, TX 78737-3527	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Armstrong, R.L. Contributor address; City; State; Zip Code 6204 Shadow Mountain Cv Austin, TX 78731-4110	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) none	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Firefighters Association PAC Contributor address; City; State; Zip Code 7537 Cameron Rd Austin, TX 78752-2013	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)		Employer (See Instructions)	
Date 07/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayad, Victor Contributor address; City; State; Zip Code 2100 Hartford Rd Austin, TX 78703-3125	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/93 Report: 6/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balch, Mandy 6 Contributor address; City; State; Zip Code 507 Pressler St Apt 3140 Austin, TX 78703-5190	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) attorney		10 Employer (See Instructions) self	
Date 09/25/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Balch, Mandy Contributor address; City; State; Zip Code 507 Pressler St Apt 3140 Austin, TX 78703-5190	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date 07/18/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Banks, Aletta Contributor address; City; State; Zip Code 9616 Copper Creek Dr Austin, TX 78729-3541	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Asian Contractor Association	
Date 09/19/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barnes, Robert Contributor address; City; State; Zip Code 710 Vanguard St Lakeway, TX 78734-4449	
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) IBC Bank	
Date 08/08/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barrera, Martin Contributor address; City; State; Zip Code 4229 Mattie St Austin, TX 78723-5425	
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: 5/93 Report: 7/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bartholomew, Dana 6 Contributor address; City; State; Zip Code PO Box 252 Pflugerville, TX 78691-0252	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Baum, Gwen Contributor address; City; State; Zip Code 450 Amber Oaks Burnet, TX 78611-5887	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none	
Date 07/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beall, Jon Contributor address; City; State; Zip Code 2503 Flora Cv Austin, TX 78746-6902	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beam, Bradley Contributor address; City; State; Zip Code 3710 Woods Ave Lincoln, NE 68510-1660	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beaman, Jaime Jr. Contributor address; City; State; Zip Code 11702 Uplands Ridge Dr Bee Cave, TX 78738-5043	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Casabella Architects	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/93 Report: 8/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bell, Douglas 6 Contributor address; City; State; Zip Code 9202 Cedar Crest Dr Austin, TX 78750-2719	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) retired engineer		10 Employer (See Instructions) none	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bell, Douglas Contributor address; City; State; Zip Code 9202 Cedar Crest Dr Austin, TX 78750-2719	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired engineer		Employer (See Instructions) none	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benavides, George Contributor address; City; State; Zip Code 5609 Ballenton Ln Austin, TX 78739-1743	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bennett, Margaret Contributor address; City; State; Zip Code 2500 Greenlee Dr Austin, TX 78703-1715	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) rancher		Employer (See Instructions) self	
Date 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bertron, Samuel Contributor address; City; State; Zip Code 1409 Briarcliff Blvd Austin, TX 78723-1808	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
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: 7/93 Report: 9/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bewley, Michael 6 Contributor address; City; State; Zip Code 15306 Dorothy Dr Austin, TX 78734-6259	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bewley, Michael Contributor address; City; State; Zip Code 15306 Dorothy Dr Austin, TX 78734-6259	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Biard, Robert Contributor address; City; State; Zip Code PO Box 33555 Austin, TX 78764-0555	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blair, Al Contributor address; City; State; Zip Code 4008 Duval St Austin, TX 78751-5110	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) engineer		Employer (See Instructions) self	
Date 09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blair, Leslie Contributor address; City; State; Zip Code 4008 Duval St Austin, TX 78751-5110	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) writer/editor		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: 8/93 Report: 10/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bohart, Holly 6 Contributor address; City; State; Zip Code 5513 Cuesta Verde Austin, TX 78746-1533	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bollinger, Steven Contributor address; City; State; Zip Code PO Box 636 Snyder, TX 79550-0636	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) Public Relations		Employer (See Instructions) Runkle Law Firm PLLC	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Branch, Jennifer Contributor address; City; State; Zip Code 16701 Goldenwood Way Austin, TX 78737-9003	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) Owner		Employer (See Instructions) Austin Black Belt Academy	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Braun, Tim Contributor address; City; State; Zip Code 2450 Wickersham Ln Apt 1501 Austin, TX 78741-4756	Amount of contribution (\$) \$26.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brice, William Contributor address; City; State; Zip Code 2502 Pinewood Ter Austin, TX 78757-2135	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)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/93 Report: 12/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burton, Ted 6 Contributor address; City; State; Zip Code 1118 Mission Rd Austin, TX 78704-2632	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Ann Contributor address; City; State; Zip Code 2 Niles Rd Austin, TX 78703-3139	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Edward Contributor address; City; State; Zip Code 301 Hillcrest Ct West Lake Hills, TX 78746-5491	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Radio and Communications		Employer (See Instructions) Self Employed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Renee Contributor address; City; State; Zip Code 301 Hillcrest Ct West Lake Hills, TX 78746-5491	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Roy Jr. Contributor address; City; State; Zip Code 4105 Prince Andrew Ln Austin, TX 78730-3458	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Pilot		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: 11/93 Report: 13/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Sheridan 6 Contributor address; City; State; Zip Code 4105 Prince Andrew Ln Austin, TX 78730-3458	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Social Media Coordinator		10 Employer (See Instructions) Michael McCaul for Congress	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Susan Contributor address; City; State; Zip Code 6710 Bryn Mawr Dr Bldg. 4, Ste. 250 Austin, TX 78723-2202	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bracewell & Giuliani	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caballero, Patrick Contributor address; City; State; Zip Code 11004 Wintergreen Hl Austin, TX 78750-3454	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bracewell & Giuliani	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantu, Gilbert & Mary Contributor address; City; State; Zip Code 3603 Lost Oasis Holw Austin, TX 78739-7506	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bracewell & Giuliani	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Capitol Partners Consulting Contributor address; City; State; Zip Code 823 Congress Ave Ste 1005 Austin, TX 78701-2418	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Bracewell & Giuliani	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/93 Report: 14/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cardenas, Francisco Jr. 6 Contributor address; City; State; Zip Code 300 Bowie St Apt 1501 Austin, TX 78703-4669	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) none	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carpenter, Sue Contributor address; City; State; Zip Code 3028 Sunland Dr Austin, TX 78748-2067	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carr, Mindy Contributor address; City; State; Zip Code 4380 River Garden Trl Austin, TX 78746-2015	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Oncor Electric Delivery	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carr, Snapper Contributor address; City; State; Zip Code 4380 River Garden Trl Austin, TX 78746-2015	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Focused Advocacy	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Casias, Michael Contributor address; City; State; Zip Code 2115 Riverview St Ste 200 Austin, TX 78702-5530	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 13/93 Report: 15/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Castillo, Julie 6 Contributor address; City; State; Zip Code 1912 Wayward Sun Dr Austin, TX 78754-5401	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Castro, M. Contributor address; City; State; Zip Code PO Box 1085 Round Rock, TX 78680-1085	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cesaro, Peter Contributor address; City; State; Zip Code 54 Rainey St Apt 713 Austin, TX 78701-4393	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Champion, Mario Contributor address; City; State; Zip Code 1406A Cinnamon Path Austin, TX 78704-4883	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chapa, Ricardo Contributor address; City; State; Zip Code 9405 Morninghill Dr Austin, TX 78737-3439	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/93 Report: 16/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chapman, Randy 6 Contributor address; City; State; Zip Code 3000 Cedarview Dr Austin, TX 78704-4611	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chavaria, Elvira Contributor address; City; State; Zip Code 6801 River Place Blvd Austin, TX 78726-4530	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chen, Shen Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd Unit 24 Austin, TX 78735-6742	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Dentist		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions) self			
Date 08/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chesky, Laurel Contributor address; City; State; Zip Code 5306 Halwill Pl Austin, TX 78723-3130	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cisneros III, Thomas Contributor address; City; State; Zip Code 4257 Gattis School Rd Round Rock, TX 78664-9323	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/93 Report: 17/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Clements, Jake 6 Contributor address; City; State; Zip Code 12723 Tantara dr Austin, TX 78729-6446	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cobb, Roderick Contributor address; City; State; Zip Code 4424 Gaines Ranch Loop Apt 1832 Austin, TX 78735-6542	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) Director of Communication Services		Employer (See Instructions) City of San Marcos	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cody, David Contributor address; City; State; Zip Code 203 Golf Crest Ln Lakeway, TX 78734-4633	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) Anchor		Employer (See Instructions) FOX 7	
Date 07/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, George Contributor address; City; State; Zip Code 3306 Gentry Dr Rollingwood, TX 78746-5507	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cofer, George Contributor address; City; State; Zip Code 3306 Gentry Dr Rollingwood, TX 78746-5507	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/93 Report: 18/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/31/2014	5 Full name of contributor <input type="checkbox"/> 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 (\$) \$20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collins, Lawrence Contributor address; City; State; Zip Code 2017 Tillotson Ave Austin, TX 78702-2834	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Governmental affairs consultant		Employer (See Instructions) Lawrence Collins and Associates	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Combs, Tara Contributor address; City; State; Zip Code 5701 S Mo Pac Expy Apt 1116 Austin, TX 78749-1443	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Hotze Runkle, PLLC	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Carolyn Contributor address; City; State; Zip Code 11001 Sierra Ridge Ct Austin, TX 78739-2036	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) C'est Chic Gift Shop	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Edwin Contributor address; City; State; Zip Code 11001 Sierra Ridge Ct Austin, TX 78739-2036	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Owner of Accuity Health	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/93 Report: 19/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Kevin 6 Contributor address; City; State; Zip Code 2904 Mossback Ln Austin, TX 78739-4834	7 Amount of contribution (\$) \$250.00	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) Governmental Affairs Advisor		10 Employer (See Instructions) Independent Proprietor	
Date 08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Corbin, Amy Contributor address; City; State; Zip Code 102 Skyline Dr West Lake Hills, TX 78746-3609	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) Promoter		Employer (See Instructions) C3 Presents	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cornell, Carolyn Contributor address; City; State; Zip Code 1000 San Marcos St Unit 169 Austin, TX 78702-2660	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)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cotera, Martha Contributor address; City; State; Zip Code 1502 Norris Dr Austin, TX 78704-2021	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craven, Eric Contributor address; City; State; Zip Code 1036 Liberty Park Dr Apt 29 Austin, TX 78746-7026	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) Vice President, Governmental Relations		Employer (See Instructions) Texas Electric Cooperative	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/93 Report: 20/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Craven, Lisa 6 Contributor address; City; State; Zip Code 1036 Liberty Park Dr Apt 29 Austin, TX 78746-7026	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) None	
Date 08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowther, Nancy Contributor address; City; State; Zip Code 2102 Lewood Cir Austin, TX 78745-3534	Amount of contribution (\$) \$45.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowther, Nancy Contributor address; City; State; Zip Code 2102 Lewood Cir Austin, TX 78745-3534	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowther, Nancy Contributor address; City; State; Zip Code 2102 Lewood Cir Austin, TX 78745-3534	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowther, Nancy Contributor address; City; State; Zip Code 2102 Lewood Cir Austin, TX 78745-3534	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
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: 19/93 Report: 21/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Richard 6 Contributor address; City; State; Zip Code 1305 Leah Ln Round Rock, TX 78665-7841	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawes, Jan Contributor address; City; State; Zip Code 7013 Priscilla Dr Austin, TX 78752-3139	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dawes, Janet Contributor address; City; State; Zip Code 7013 Priscilla Dr Austin, TX 78752-3139	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Day, Aaron Contributor address; City; State; Zip Code 5017 McDade Dr Austin, TX 78735-6395	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deats, Lydia H. Contributor address; City; State; Zip Code 3310 Big Bend Dr Austin, TX 78731-5311	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Licensed Specialist School Psychology		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Licensed Specialist School Psychology		Employer (See Instructions) Eanes Independent School District	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/93 Report: 22/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deshields, Glenn 6 Contributor address; City; State; Zip Code 6503 Treadwell Blvd Austin, TX 78757-4325	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) Government Affairs Consultant		10 Employer (See Instructions) Self-Employed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donnelly, Laura Contributor address; City; State; Zip Code 2012 Tillotson Ave Austin, TX 78702-2835	Amount of contribution (\$) \$30.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Donovan, Brian Contributor address; City; State; Zip Code 508 Genard St Austin, TX 78751-1912	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Austin Cooperative Business Association	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duffy, Tom Contributor address; City; State; Zip Code 1801 Lavaca St Apt 13M Austin, TX 78701-1325	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Earvin, Larry Contributor address; City; State; Zip Code 900 Chicon St Austin, TX 78702-2753	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/93 Report: 23/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Easter, Sr, Robert 6 Contributor address; City; State; Zip Code 7103 W Rim Dr Austin, TX 78731-2024	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eaton, Carmina Contributor address; City; State; Zip Code 4201 W Parmer Ln Bldg B, Ste 170 Austin, TX 78727-4109	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eddie Rodriguez Campaign Fund Contributor address; City; State; Zip Code PO Box 2436 Austin, TX 78768-2436	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Education Austin PAC Contributor address; City; State; Zip Code 316 W 12th St Ste 202 Austin, TX 78701-1815	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, David Contributor address; City; State; Zip Code 2715 Wooldridge Dr Austin, TX 78703	Amount of contribution (\$) \$172.72	In-kind contribution description (if applicable) food & beverages for event
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) The 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: 22/93 Report: 24/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, David 6 Contributor address; City; State; Zip Code 2715 Wooldridge Dr Austin, TX 78703-1953	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) The University of Texas at Austin	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, Layla Contributor address; City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, Sasha Contributor address; City; State; Zip Code 2715 Wooldridge Dr Austin, TX 78703-1953	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ekland-Olson, Sheldon Contributor address; City; State; Zip Code 1115 Westlake Dr West Lake Hills, TX 78746-4513	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliott, Teresa Contributor address; City; State; Zip Code 11105 Champions Ln Austin, TX 78747-1403	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 23/93 Report: 25/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Engel, Dursty 6 Contributor address; City; State; Zip Code 7201 Oak Shores Austin, TX 78730	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) food & beverages for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Estrada, Ana Contributor address; City; State; Zip Code 1144 Airport Blvd Ste 260 Austin, TX 78702-3165	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Estrada, Frank Contributor address; City; State; Zip Code 407 W China St Lockhart, TX 78644-1722	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)		Employer (See Instructions)	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Estrada, Gina Contributor address; City; State; Zip Code 12820 W Parmer Ln Apt 4208 Cedar Park, TX 78613-7522	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Everitt, Richard II Contributor address; City; State; Zip Code 401 W Live Oak St Unit A Austin, TX 78704-5118	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 24/93 Report: 26/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fainter, John Jr. 6 Contributor address; City; State; Zip Code 40 N Interstate 35 9-B-2 Austin, TX 78701-4316	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) Assocaiaation of Electric Companies of Texas, Inc.	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions) Programmer		Employer (See Instructions) Force Multiplier Solutions	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fitzgerald, Eric Contributor address; City; State; Zip Code 7609 Sandia Loop Austin, TX 78735-1519	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Police Sargeant		Employer (See Instructions) City of Austin	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fitzgerald, Erika Contributor address; City; State; Zip Code 7609 Sandia Loop Austin, TX 78735-1519	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Finance Director		Employer (See Instructions) C3 Presents	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Flores, Armandina Contributor address; City; State; Zip Code 1607 Newton St Austin, TX 78704-3032	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 25/93 Report: 27/138

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date 09/17/2014
5 Full name of contributor out-of-state PAC (ID# _____)
Flores, Johnny

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
16204 Double Eagle Dr
Austin, TX 78717-3816

\$150.00

(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# _____)
Fontenette, Susan

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
14037 Maricella Ln
Pflugerville, TX 78660-8874

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 07/30/2014
Full name of contributor out-of-state PAC (ID# _____)
Fox, Marilyn

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6400 Zadock Woods Dr
Austin, TX 78749-2602

\$50.00

(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# _____)
Fox, Marilyn

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6400 Zadock Woods Dr
Austin, TX 78749-2602

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 07/30/2014
Full name of contributor out-of-state PAC (ID# _____)
Frank, Julie

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4805 W Park Dr
Austin, TX 78731-5533

\$150.00

(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: 26/93 Report: 28/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freud, Jessica 6 Contributor address; City; State; Zip Code 7532 Harlow Dr Austin, TX 78739-1979	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Senior Project Manager		10 Employer (See Instructions) K. Friese & Associates	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friese, Karen Contributor address; City; State; Zip Code 6603 Cat Creek Trl Austin, TX 78731-2600	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Senior Project Manager		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Executive Director		10 Employer (See Instructions) Movability Austin	
Date 08/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadbois, Glenn Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Executive Director		10 Employer (See Instructions) Movability Austin	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadbois, Glenn Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Executive Director		10 Employer (See Instructions) Movability Austin	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garcia, Gloria Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758-3818	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/93 Report: 29/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garcia, Gloria 6 Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758-3818	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garretson, Sean Contributor address; City; State; Zip Code 1003 E 14th St Austin, TX 78702-1022	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garriott, Richard Contributor address; City; State; Zip Code 8207 Two Coves Dr Austin, TX 78730-3124	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) Computer Games Developer & Private Astronaut		Employer (See Instructions) Portalarium	
Date 09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Espirion Contributor address; City; State; Zip Code 5815 W William Cannon Dr Ste 105 Austin, TX 78749-1966	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) Info Requested		Employer (See Instructions) Info Requested	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Melissa Contributor address; City; State; Zip Code 8101 Ravella Ridge Cv Austin, TX 78735-1719	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) Human Resources		Employer (See Instructions) Aurena Software	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/93 Report: 30/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/18/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garza, Silver 6 Contributor address; City; State; Zip Code 8101 Ravello Ridge Cv Austin, TX 78735-1719	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Realtor		10 Employer (See Instructions) Self Employed	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gillespie, Roslyn Contributor address; City; State; Zip Code 2402 Elmglen Dr Austin, TX 78704-3821	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Adam Contributor address; City; State; Zip Code 1111 Red River St Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) food for event
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Serrano's Especial at Symphony Square	
Date 08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Israel Contributor address; City; State; Zip Code 21911 Briarcliff Dr Spicewood, TX 78669-2014	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Civil Engineer/Land Surveyor		Employer (See Instructions) IT Gonzalez Engineers	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Raul Contributor address; City; State; Zip Code 1109 Blair Way Austin, TX 78704-5443	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 29/93 Report: 31/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Vanessa 6 Contributor address; City; State; Zip Code 2512 Berwyn Cir Austin, TX 78745-3559	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) CPA		10 Employer (See Instructions) Self Employed	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Charles Contributor address; City; State; Zip Code 2909 Cherry Ln Austin, TX 78703-2821	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Elizabeth Contributor address; City; State; Zip Code 2612 Wooldridge Dr Austin, TX 78703-2538	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Louis Contributor address; City; State; Zip Code 101 Colorado St Apt 1402 Austin, TX 78701-4106	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Private Client Grp		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Tom Contributor address; City; State; Zip Code 2612 Wooldridge Dr Austin, TX 78703-2538	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Midwikis Granger PC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/93 Report: 32/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grant, Kathryn 6 Contributor address; City; State; Zip Code 915 West Johanna Austin, TX 78704	7 Amount of contribution (\$) \$238.00	8 In-kind contribution description (if applicable) food & beverages for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Government Affairs Consultant		10 Employer (See Instructions) self	
Date 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graze, Sue Contributor address; City; State; Zip Code 800 W 5th St Apt 803 Austin, TX 78703-5442	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grimes, Joshua Contributor address; City; State; Zip Code 1781 Spyglass Dr Apt 326 Austin, TX 78746-7919	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Client Services Manager		Employer (See Instructions) Carollo	
Date 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guller, Doug Contributor address; City; State; Zip Code 3506 Mount Bonnell Rd Austin, TX 78731-5829	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) Owner		Employer (See Instructions) ATX Brands LLC.	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gupta, Mike Contributor address; City; State; Zip Code 404 Rio Grande St Apt 321 Austin, TX 78701-2793	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/93 Report: 33/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gutierrez, Phillip 6 Contributor address; City; State; Zip Code 6414 Back Bay Ln Austin, TX 78739-1524	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guzman, Ana Contributor address; City; State; Zip Code 30 Sangre De Cristo Dr Santa Fe, NM 87506-1108	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Santa Fe Community College	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gyarmathy, Jayne Contributor address; City; State; Zip Code 4622 Depew Ave Austin, TX 78751-3321	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hagemann, Jody Contributor address; City; State; Zip Code 1808 Barton Pkwy Austin, TX 78704-3210	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Haggerty, Patrick Contributor address; City; State; Zip Code 3313 Poquita Ct El Paso, TX 79904-2501	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/93 Report: 34/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Handlin, Elizabeth 6 Contributor address; City; State; Zip Code 11113 Rio Vista Dr Austin, TX 78726-1376	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Anne Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	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) Marketing Director		Employer (See Instructions) Harutunian Engineering, Inc.	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Kegham Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	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) Engineer		Employer (See Instructions) Harutunian Engineering, Inc.	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Shant Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	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) Engineer		Employer (See Instructions) Harutunian Engineering, Inc.	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Takoohy Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Harutunian Engineering, Inc.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/93 Report: 35/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Vigan 6 Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Engineering / technical coordination		10 Employer (See Instructions) Harutunian Engineering, Inc.	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hausenfluck, Amber Contributor address; City; State; Zip Code 1501 Barton Springs Rd Apt 101 Austin, TX 78704-1060	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hawthorne, Melissa Contributor address; City; State; Zip Code 1403 Foxwood Cv Austin, TX 78704-2718	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) Consultant		Employer (See Instructions) Austin Permit Service, Inc.	
Date 07/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hayden, Leslie Contributor address; City; State; Zip Code 2820 Old Course Dr Austin, TX 78732-1710	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Creative Vision Interior	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hayman, Jane Contributor address; City; State; Zip Code 1410 Wooldridge Dr Austin, TX 78703-2530	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 34/93 Report: 36/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hehmsoth, Carl 6 Contributor address; City; State; Zip Code 1905 W 41st St Austin, TX 78731-6020	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hendricks, Jeremy Contributor address; City; State; Zip Code 1504 Rutland Dr Ste E121 Austin, TX 78758	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Henson, James Contributor address; City; State; Zip Code 915 West Johanna Austin, TX 78704	Amount of contribution (\$) \$336.00	In-kind contribution description (if applicable) food & beverages for event
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) The University of Texas at Austin	
Date 08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hernandez, Mack Contributor address; City; State; Zip Code 901 S Mo Pac Expy Barton Oaks Plaza 1, Ste 300 Austin, TX 78746-5785	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) Attorney		Employer (See Instructions) Self Employed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herring, William Contributor address; City; State; Zip Code 1000 E 38th St Austin, TX 78705-1813	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 35/93 Report: 37/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hillen, Scott 6 Contributor address; City; State; Zip Code 1029 E 44th St Austin, TX 78751	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Hospitality		10 Employer (See Instructions) Sterling Group	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hitchcock, Joanna Contributor address; City; State; Zip Code 1507 Preston Ave Austin, TX 78703-1903	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoen, Marcy Contributor address; City; State; Zip Code 5503 Gloucester Ln Austin, TX 78723-4816	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)		Employer (See Instructions)	
Date 07/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hogue, Jonathan Contributor address; City; State; Zip Code 11113 Rio Vista Dr Austin, TX 78726-1376	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoke, Laura & Michael Contributor address; City; State; Zip Code 5206 Knight Cir Austin, TX 78723-3131	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 36/93 Report: 38/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoover, Stephanie 6 Contributor address; City; State; Zip Code 901 W 9th St Apt 402 Austin, TX 78703-4634	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoover, Stephanie Contributor address; City; State; Zip Code 901 W 9th St Apt 402 Austin, TX 78703-4634	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) real estate broker		Employer (See Instructions) Horne Holdings, LLC	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne, Chris Contributor address; City; State; Zip Code 807 Loma Linda Dr Austin, TX 78746	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) food for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Horne Holdings, LLC Contributor address; City; State; Zip Code 807 Loma Linda Dr West Lake Hills, TX 78746-2831	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hotz, Todd Contributor address; City; State; Zip Code 6111 Highland Hills Dr Austin, TX 78731-4101	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/93 Report: 39/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Howell, Pix 6 Contributor address; City; State; Zip Code PO Box 663 Wimberley, TX 78676-0663	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudson, Nick Contributor address; City; State; Zip Code 10926 Jollyville Rd Apt 2124 Austin, TX 78759	Amount of contribution (\$) \$3.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudson, Nick Contributor address; City; State; Zip Code 10926 Jollyville Rd. #711 Austin, TX 78759	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hughes, Christopher Contributor address; City; State; Zip Code 7504 Long Point Dr Austin, TX 78731-1216	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) Attorney		Employer (See Instructions) Husch Blackwell, L.L.P.	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hughes Gonzalez, Lisa Contributor address; City; State; Zip Code 1111 Red River St Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) room fee for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) real estate broker		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: 38/93 Report: 40/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/28/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ilund, Wendilyn 6 Contributor address; City; State; Zip Code 3300 16th St NW Apt 812 Washington, DC 20010-2259	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) investor		10 Employer (See Instructions) self	
Date 08/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Inman, Bob Contributor address; City; State; Zip Code 3200 Riva Ridge Rd Austin, TX 78746-1423	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) investor		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Islam, Rashed Contributor address; City; State; Zip Code 11901 Palisades Pkwy Austin, TX 78732-1242	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) HDR Engineering, Inc.	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaunsem, Denise Contributor address; City; State; Zip Code 602 Mulberry Dr Austin, TX 78745-6424	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Andy Contributor address; City; State; Zip Code 9305 Lightwood Loop Austin, TX 78748-5016	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) General Manager		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) General Manager		10 Employer (See Instructions) Gardner Metal Recycling	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/93 Report: 41/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/19/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Donald 6 Contributor address; City; State; Zip Code 1135 Burdette St New Orleans, LA 70118-3972	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Research and Development		10 Employer (See Instructions) FxS Inc	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Mrs. Andy Contributor address; City; State; Zip Code 9305 Lightwood Loop Austin, TX 78748-5016	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) homemaker		Employer (See Instructions) none	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Junot, Billy Contributor address; City; State; Zip Code 1901 E 16th St Unit B Austin, TX 78702-1217	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Junot, William Contributor address; City; State; Zip Code 1901 E 16th St Unit B Austin, TX 78702-1217	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kahn, David Contributor address; City; State; Zip Code 804 Congress Ave Ste 300 Austin, TX 78701-2630	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate Managing Partner		Employer (See Instructions) Colina West	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/93 Report: 42/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kaufman, Lisa 6 Contributor address; City; State; Zip Code 6508 Mesa Dr Austin, TX 78731-2704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) attorney		10 Employer (See Instructions) Davis Kaufman PLLC	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Keefer, Andrew Contributor address; City; State; Zip Code 823 Congress Ave Ste 1200 Austin, TX 78701-2402	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Keefer Strategies	
Date 09/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kennedy, Mike Contributor address; City; State; Zip Code 515 Congress Ave 1500 Austin, TX 78701-3504	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Force Multiplier Solutions, Inc,	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 41/93 Report: 43/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Khataw, Ali 6 Contributor address; City; State; Zip Code 7914 Bee Cave Rd Austin, TX 78746-4903	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) CEO		10 Employer (See Instructions) Encotech Engineering	
Date 07/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kiestler, Mark Contributor address; City; State; Zip Code 1193 Meadowild Dr Round Rock, TX 78664-9330	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) Youth Development		Employer (See Instructions) Boys & Girls Clubs of Austin	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kim, Lois Contributor address; City; State; Zip Code 1313 Bonham Ter Austin, TX 78704-2606	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Ian Contributor address; City; State; Zip Code 8411 Longview Rd Austin, TX 78745-7559	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) Paralegal		Employer (See Instructions) Runkle Law Firm	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Mary Contributor address; City; State; Zip Code 8411 Longview Rd Austin, TX 78745-7559	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) Homemaker		Employer (See Instructions) The Brown School	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 43/93 Report: 45/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Langenberg, Ray 6 Contributor address; City; State; Zip Code 1802 Vance Cir Austin, TX 78701-1035	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lavigne, Mike Contributor address; City; State; Zip Code 1514 Richcreek Rd Austin, TX 78757-1844	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leal, Gloria Contributor address; City; State; Zip Code 3600 Las Colinas Dr Apt C Austin, TX 78731-4830	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/12/2014	Full name of contributor <input type="checkbox"/> 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) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Service Coordinator		Employer (See Instructions) Force Multiplier Solutions	
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ledesma, Eddie Contributor address; City; State; Zip Code 9508 Altona Way Austin, TX 78717-4593	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 44/93 Report: 46/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leger, Lolly 6 Contributor address; City; State; Zip Code 2820 Old Course Dr Austin, TX 78732-1710	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) CEO		10 Employer (See Instructions) Trinity Insurance	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leonard, Robert 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)
Principal occupation / Job title (See Instructions) Force Multiplier Solutions		Employer (See Instructions) CEO	
Date 08/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lessard, Rhona Contributor address; City; State; Zip Code 901 Ridgmar Rd Leander, TX 78641-2212	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Limon, John Contributor address; City; State; Zip Code 908 Calle Limon Austin, TX 78702-4122	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
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: 45/93 Report: 47/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Limon, Johnny 6 Contributor address; City; State; Zip Code 908 Calle Limon Austin, TX 78702-4122	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lindelow, Britt Contributor address; City; State; Zip Code 2502 Bridle Path Austin, TX 78703-3212	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) homemaker		Employer (See Instructions) none	
Date 08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lindelow, Jan Contributor address; City; State; Zip Code 2502 Bridle Path Austin, TX 78703-3212	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) Director & Philantropist		Employer (See Instructions) Self-employed	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lindholm, Ann Contributor address; City; State; Zip Code 1310 Briarcliff Blvd Austin, TX 78723-1807	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Locke, Jere Contributor address; City; State; Zip Code PO Box 40637 Austin, TX 78704-0011	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 47/93 Report: 49/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loo, Emmanuel 6 Contributor address; City; State; Zip Code 3304 Etheredge Dr Austin, TX 78725-4769	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) AEM	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Louis, Russel Contributor address; City; State; Zip Code 202 Bulian Ln # 3 Austin, TX 78746-5417	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Love, Emilie Contributor address; City; State; Zip Code 4136 Idlewild Dr Fort Worth, TX 76107-1100	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director of Operations		Employer (See Instructions) Lonesome Dove Western Bistro	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Love, Tim Contributor address; City; State; Zip Code 4136 Idlewild Dr Fort Worth, TX 76107-1100	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Chef		Employer (See Instructions) Lonesome Dove Western Bistro	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Luciano, Richard Contributor address; City; State; Zip Code 2500 Greenlee Dr Austin, TX 78703-1715	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Cattle Rancher		Employer (See Instructions) R2 Ranch, LLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 48/93 Report: 50/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Madere, Charlie 6 Contributor address; City; State; Zip Code 4207 Benedict Ln Austin, TX 78746-1919	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Madere, Pamela Contributor address; City; State; Zip Code 4207 Benedict Ln Austin, TX 78746-1919	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mains, Chuck Contributor address; City; State; Zip Code 3006 Birdwood Cir Austin, TX 78704-6119	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Legislative Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Alfred Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758-3818	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Alfred Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758-3818	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
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: 49/93 Report: 51/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Alfred C. 6 Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758-3818	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Professor		10 Employer (See Instructions) Austin Community College	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, John Contributor address; City; State; Zip Code 603 W Garfield Ave Temple, TX 76501-3028	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malm, Sarah Contributor address; City; State; Zip Code 4314 Marathon Blvd Austin, TX 78756-3427	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malone, David Contributor address; City; State; Zip Code 11806 Mustang Chase Austin, TX 78727-6626	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) 1st Choice Technology	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malone, David Contributor address; City; State; Zip Code 11806 Mustang Chase Austin, TX 78727-6626	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) 1st Choice Energy	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 50/93 Report: 52/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Malone, Mark 6 Contributor address; City; State; Zip Code PO Box 684614 Austin, TX 78768-4614	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Government Affairs Consultant		10 Employer (See Instructions) Self	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marin, Michael Contributor address; City; State; Zip Code 303 Nixon Dr Austin, TX 78746-5548	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Boulette & Golden L.L.P.	
Date 08/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Markman, Arthur Contributor address; City; State; Zip Code 2005 Exposition Blvd Austin, TX 78703-2836	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martin, Patsy Contributor address; City; State; Zip Code PO Box 5543 Austin, TX 78763-5543	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Annie's List	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Nonito & Elma Contributor address; City; State; Zip Code 703 E 21st St Cameron, TX 76520-1937	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
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: 53/93 Report: 55/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McKenzie, Maryanne 6 Contributor address; City; State; Zip Code 2601 Dominion HI Austin, TX 78733-5923	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Sales Rep		10 Employer (See Instructions) Architectural Granite and marble	
Date 07/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mckenzie, Stephanie Contributor address; City; State; Zip Code 4525 Court Of St James Austin, TX 78730-3427	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) Homemaker		Employer (See Instructions) none	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> 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) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Philips & Meachum Public Affairs	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendez, David Contributor address; City; State; Zip Code 4401 Sacred Arrow Dr Austin, TX 78735-6363	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) Attorney		Employer (See Instructions) Bickerstaff Heath Delgado Acosta LLP	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mendez, Linda Contributor address; City; State; Zip Code 4401 Sacred Arrow Dr Austin, TX 78735-6363	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) Attorney		Employer (See Instructions) State Bar of Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 55/93 Report: 57/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meyer, Gretchen 6 Contributor address; City; State; Zip Code 1406 Kinney Ave Austin, TX 78704-2252	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Software & Hardware Admin		10 Employer (See Instructions) FXS	
Date 09/15/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions) Executive Assistant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Force Multiplier Solutions, Inc.	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions) Manager		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Hertz	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Cate Contributor address; City; State; Zip Code 3407 Toro Canyon Rd Austin, TX 78746-1503	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) physician		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) physician		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: 56/93 Report: 58/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Don 6 Contributor address; City; State; Zip Code 2012 Ford St Austin, TX 78704-2838	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Physician		10 Employer (See Instructions) Self Employed	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Mrs. Don Contributor address; City; State; Zip Code 2012 Ford St Austin, TX 78704-2838	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miner, Mark Contributor address; City; State; Zip Code 1709 Paseo Corto Dr Cedar Park, TX 78613-1547	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mizcles, Amy Contributor address; City; State; Zip Code 18012 Newgrange Dr Pflugerville, TX 78660-5192	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moeller, Becky Contributor address; City; State; Zip Code 625 E Stassney Ln Apt 8101 Austin, TX 78745-4288	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 57/93 Report: 59/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montero, Charles 6 Contributor address; City; State; Zip Code 8105A Baywood Dr Austin, TX 78759-8909	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montero, Charles Contributor address; City; State; Zip Code 8105A Baywood Dr Austin, TX 78759-8909	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moody, James Contributor address; City; State; Zip Code 806 Christopher St Austin, TX 78704-1618	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Guerilla Suit	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Adrian Contributor address; City; State; Zip Code 2204 Toro Canyon Rd Austin, TX 78746-2415	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Laura Contributor address; City; State; Zip Code 105 W Elizabeth St Austin, TX 78704-3001	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) IBM	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 58/93 Report: 60/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Laura 6 Contributor address; City; State; Zip Code 105 W Elizabeth St Austin, TX 78704-3001	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Human Resources		10 Employer (See Instructions) IBM	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Laura Contributor address; City; State; Zip Code 105 W Elizabeth St Austin, TX 78704-3001	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) IBM	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moreno, Randy Contributor address; City; State; Zip Code 2210 S 3rd St Austin, TX 78704-5024	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morgan, Joshua Contributor address; City; State; Zip Code 2223 Waterloo City Ln Apt 146 Austin, TX 78741-0003	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) Engineer		Employer (See Instructions) Terracon	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morris, Chris Contributor address; City; State; Zip Code PO Box 26794 Austin, TX 78755-0794	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 59/93 Report: 61/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morris, Kay 6 Contributor address; City; State; Zip Code 1307 Kenwood Ave Austin, TX 78704-2622	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morris, Susan Contributor address; City; State; Zip Code 4107 Lullwood Rd Austin, TX 78722-1115	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrissey, Jack Contributor address; City; State; Zip Code 10422 Quail Ridge Dr Austin, TX 78758-5008	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moya, Michael Contributor address; City; State; Zip Code 10509 Pariva Trl Austin, TX 78726-1346	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) Civil Engineer		Employer (See Instructions) Half Associates	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murray, Cheryl Contributor address; City; State; Zip Code 3114 Linnet Dr Austin, TX 78745-7529	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 60/93 Report: 62/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nassour, Jimmy 6 Contributor address; City; State; Zip Code 3839 Bee Caves Rd Ste 200 West Lake Hills, TX 78746-6400	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions) attorney		10 Employer (See Instructions) self	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nemer, Nancy Contributor address; City; State; Zip Code 6001 Perlita Dr Austin, TX 78724-6133	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neuhaus, Palmer Contributor address; City; State; Zip Code 1805 Collier St Austin, TX 78704-2821	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nichols, Lee Contributor address; City; State; Zip Code 1712 Cullen Ave Austin, TX 78757-2531	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)		Employer (See Instructions)	
Date 09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nichols, Michael Contributor address; City; State; Zip Code 513 Kodiak Trl Cedar Park, TX 78613-4109	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 61/93 Report: 63/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Niemeyer, Stephen 6 Contributor address; City; State; Zip Code 1100 Crystal Creek Dr Austin, TX 78746-4712	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Corporate Communication		10 Employer (See Instructions) Ocanas Group	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ocanas, Gilberto Contributor address; City; State; Zip Code 30 Sangre De Cristo Dr Santa Fe, NM 87506-1108	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Corporate Communication		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Ocanas Group	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Connor, Kevin Contributor address; City; State; Zip Code 607 Cloud Ct Round Rock, TX 78681-4059	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Bridge Bancorp	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Odam, Matthew Contributor address; City; State; Zip Code 2021 Bluebonnet Ln Unit 201 Austin, TX 78704-4046	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Gar, Damon Contributor address; City; State; Zip Code 1400 Eva St Austin, TX 78704-3009	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Veterinarian		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Veterinarian		Employer (See Instructions) Austin Equine Hospital	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 62/93 Report: 64/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oksuz, Muammer 6 Contributor address; City; State; Zip Code 1008 Oatmeal Dr Pflugerville, TX 78660-7848	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Teacher		10 Employer (See Instructions) Cosmos Foundation	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oney, Thomas Contributor address; City; State; Zip Code 2401 Lawnmont Ave Austin, TX 78756-1808	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Luminant	
Date 08/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orent, Leora Contributor address; City; State; Zip Code 2005 Exposition Blvd Austin, TX 78703-2836	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) non-profit staff		Employer (See Instructions) Austin Pets Alive	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Shea, Dan Contributor address; City; State; Zip Code 2014 De Verne St Austin, TX 78704-3926	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Shea, Dan Contributor address; City; State; Zip Code 2014 De Verne St Austin, TX 78704-3926	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
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: 63/93 Report: 65/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/28/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Owen, Martha 6 Contributor address; City; State; Zip Code 3600 Hillbrook Dr Austin, TX 78731-4040	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) President		10 Employer (See Instructions) West Park Trading	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ozgen, Ramazan Contributor address; City; State; Zip Code 2000 Short Summer Dr Austin, TX 78754-5857	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) West Park Trading	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Palomo, Jaime Contributor address; City; State; Zip Code 6129 Jumano Ln Austin, TX 78749-1944	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Receptionist		Employer (See Instructions) Force Multiplier Solutions	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> 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)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Receptionist		Employer (See Instructions) Force Multiplier Solutions	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parkerson, Matthew Contributor address; City; State; Zip Code 1407 Burford Pl None Austin, TX 78704-2007	Amount of contribution (\$) \$347.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Consultant		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: 64/93 Report: 66/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perkel, Andrew 6 Contributor address; City; State; Zip Code PO Box 28861 Austin, TX 78755-8861	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Commercial Real Estate		10 Employer (See Instructions) Marketplace Austin	
Date 07/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peters, Amos III Contributor address; City; State; Zip Code PO Box 5788 Round Rock, TX 78683-5788	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pettis, John Contributor address; City; State; Zip Code 1915 NE 44th St Oklahoma City, OK 73111-6223	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) City Councilman		Employer (See Instructions) City of Oklahoma City	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pewitt, Bill Contributor address; City; State; Zip Code 1015 Gaston Ave Austin, TX 78703-2505	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pewitt, Bill Contributor address; City; State; Zip Code 1015 Gaston Ave Austin, TX 78703-2505	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) consultant		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: 65/93 Report: 67/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pieczonka, Joseph 6 Contributor address; City; State; Zip Code 7413 Black Mountain Dr Austin, TX 78736-3360	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pilo, Amy Contributor address; City; State; Zip Code 12401 Los Indios Trl Unit 50 Austin, TX 78729-7663	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Polan, Deborah Contributor address; City; State; Zip Code 2105 Schulle Ave Austin, TX 78703-2141	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) Government Affairs Consultant		Employer (See Instructions) self	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> 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) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) Force Multiplier Solutions	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ponder, Mrs. 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) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 66/93 Report: 68/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prager, Herman 6 Contributor address; City; State; Zip Code 8600 N FM 620 # 210 Austin, TX 78726	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pruett, Dan Contributor address; City; State; Zip Code 6306 Clairmont Dr Austin, TX 78749-3424	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Purcell, Keith Contributor address; City; State; Zip Code 4610 Grand Cypress Dr Austin, TX 78747-1330	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Sales and Marketing		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez, Rene Contributor address; City; State; Zip Code 612 W Nolana Ave Ste 415 McAllen, TX 78504-3089	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Government Affairs Consultant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez Jr, Leo Contributor address; City; State; Zip Code 12322 Double Tree Ln Austin, TX 78750-1769	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 67/93 Report: 69/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez Jr, Leo 6 Contributor address; City; State; Zip Code 12322 Double Tree Ln Austin, TX 78750-1769	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Director		10 Employer (See Instructions) Southwest Key	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramos, Juan Manuel Contributor address; City; State; Zip Code 4424 Gaines Ranch Loop Apt 2020 Austin, TX 78735-6504	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)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randolph, Ian & Jane Contributor address; City; State; Zip Code 1309 Concho St Austin, TX 78702-1111	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ratliff, Thomas Contributor address; City; State; Zip Code 500 West 13th Street Austin, TX 78701	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Governmental affairs consultant		Employer (See Instructions) Ratliff Co.	
Date 07/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Jerry Contributor address; City; State; Zip Code 510 W 15th St Austin, TX 78701-1512	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Development 2000 Inc	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 68/93 Report: 70/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Renteria, Solana 6 Contributor address; City; State; Zip Code 1601 E 5th St Ste 111 Austin, TX 78702-4494	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) VP		10 Employer (See Instructions) Binkley and Barfeld, INC	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rice, Brian Contributor address; City; State; Zip Code 2905 Brian Wood Ct Cedar Park, TX 78613-5143	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Binkley and Barfeld, INC	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Raymond Campaign Contributor address; City; State; Zip Code 11024 Winburn Dr Laredo, TX 78045	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rivas, John Contributor address; City; State; Zip Code 5204 Scenic View Dr Austin, TX 78746-2241	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Rivas, Goldstein LLP	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Deanna Contributor address; City; State; Zip Code PO Box 12492 Austin, TX 78711-2492	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President of Regulatory and Governmental Affairs		Employer (See Instructions) Entergy Texas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 69/93 Report: 71/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Elma 6 Contributor address; City; State; Zip Code 1611 Ridgehaven Austin, TX 78723	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) beverages for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions) none	
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Jennifer Contributor address; City; State; Zip Code 485 Nicholas Ln Driftwood, TX 78619-4307	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) Director		Employer (See Instructions) Texas AFT	
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Marc Contributor address; City; State; Zip Code 1122 Colorado St Ste 2399 Austin, TX 78701-2132	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Government Affairs Consultant		Employer (See Instructions) Self-employed	
Date 09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Marc Contributor address; City; State; Zip Code 1122 Colorado St Austin, TX 78701	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) beverages for event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Government Affairs Consultant		Employer (See Instructions) self	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, William Contributor address; City; State; Zip Code 7602 Bender Dr Austin, TX 78749-3106	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 70/93 Report: 72/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rondero de Mosier, Roberto 6 Contributor address; City; State; Zip Code 3809 S Congress Ave Apt 221 Austin, TX 78704-8021	7 Amount of contribution (\$) 8 In-kind contribution description (if applicable) \$20.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roth, Steve Contributor address; City; State; Zip Code 4111 Tablerock Dr Austin, TX 78731-1339	Amount of contribution (\$) In-kind contribution description (if applicable) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Lockwood, Andrews & Newnam, Inc.	
Date 08/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rotkoff, Jeff Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238	Amount of contribution (\$) In-kind contribution description (if applicable) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rotkoff, Jeff Contributor address; City; State; Zip Code 3609 Vineland Dr Austin, TX 78722-1238	Amount of contribution (\$) In-kind contribution description (if applicable) \$75.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Runkle, Ryan Contributor address; City; State; Zip Code 816 Congress Ave Ste 1410 Austin, TX 78701-2639	Amount of contribution (\$) In-kind contribution description (if applicable) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hotze Runkle PLLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 71/93 Report: 73/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Russell, James 6 Contributor address; City; State; Zip Code 1210 EM Franklin Austin, TX 78721	7 Amount of contribution (\$) \$20.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) Self	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saenz, Cynthia Contributor address; City; State; Zip Code 7205 Doswell Ln Austin, TX 78739-2043	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Owner/Operator		10 Employer (See Instructions) Crystal-Carrizo Auto Supply, Inc	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saenz, Jaime Contributor address; City; State; Zip Code PO Box 756 Carrizo Springs, TX 78834-6756	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner/Operator		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Government Affairs Consultant		10 Employer (See Instructions) self	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Saenz, Marcello Jr. Contributor address; City; State; Zip Code 6406 Back Bay Ln Austin, TX 78739-1523	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Firefighter		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Firefighter		10 Employer (See Instructions) City of Austin	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 72/93 Report: 74/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sahyoun, Anthony 6 Contributor address; City; State; Zip Code 1312 Glenda Dr Round Rock, TX 78681-4921	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) Executive Vice-President of Hotel Operations		10 Employer (See Instructions) Aramcor Inc.	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Salch, Susan Contributor address; City; State; Zip Code 8924 W Hove Loop Austin, TX 78749	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sanchez-Ruiz, Velia Contributor address; City; State; Zip Code 1213 Southwood Rd Austin, TX 78704-5354	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Santos, Frank Contributor address; City; State; Zip Code 1111 Westlake Dr West Lake Hills, TX 78746-4513	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) Government Affairs Consultant		Employer (See Instructions) Santos Alliances	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sarkar, Nicole Contributor address; City; State; Zip Code 6809 Daugherty St Austin, TX 78757-2323	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 73/93 Report: 75/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schultz, William 6 Contributor address; City; State; Zip Code 13216 Mansfield Dr Austin, TX 78732-1725	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) real estate		10 Employer (See Instructions) Schultz Real Estate	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scotti, Barbara Contributor address; City; State; Zip Code 149 Tender Valley Cv Driftwood, TX 78619-4341	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seeber, Brittany Contributor address; City; State; Zip Code 4350 Trinity Mills Rd Apt 9103 Dallas, TX 75287-7038	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Force Multiplier Solutions	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seidlits, Curtis Contributor address; City; State; Zip Code 823 Congress Ave Ste 1200 Austin, TX 78701-2402	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Focused Advocacy PAC	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shanks, Donny Contributor address; City; State; Zip Code 601 Brushy St Ste 403 Austin, TX 78702-3279	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) real estate		Employer (See Instructions) Urban Space	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 74/93 Report: 76/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shanks, Karen 6 Contributor address; City; State; Zip Code 601 Brushy St Ste 403 Austin, TX 78702-3279	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Hotze Runkle, PLLC	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Jim Contributor address; City; State; Zip Code 108 Woodview Ct West Lake Hills, TX 78746-5495	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) Scrap Metal Recycling		Employer (See Instructions) Austin Metal & IronAustin Pipe & Supply	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sheftall, Bill Contributor address; City; State; Zip Code 2300 Innisbrook Dr Austin, TX 78747-1208	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Account manager		Employer (See Instructions) AT&T	
Date 08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepard, Don & Lisa Contributor address; City; State; Zip Code 501 Oertli Ln Austin, TX 78753-6012	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipley, Christina Contributor address; City; State; Zip Code 6507 Jester Blvd Ste 510Q Austin, TX 78750-8354	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 75/93 Report: 77/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shirazi, Reza 6 Contributor address; City; State; Zip Code 4910 Rollingwood Dr West Lake Hills, TX 78746-5527	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shivers, Shari Contributor address; City; State; Zip Code 4704 Eby Ln Austin, TX 78731-4534	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)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simpson, Dee Jr. Contributor address; City; State; Zip Code 1105 Upland Dr Austin, TX 78741-1165	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) none	
Date 07/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Paul Contributor address; City; State; Zip Code 7801 Shoal Creek Blvd Apt 228 Austin, TX 78757-1029	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Paul Contributor address; City; State; Zip Code 7801 Shoal Creek Blvd Apt 228 Austin, TX 78757-1029	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 76/93 Report: 78/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smolen, Paul 6 Contributor address; City; State; Zip Code 1701 Nueces St Austin, TX 78701-1107	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) consultant		10 Employer (See Instructions) Fox, Smolen & Associates	
Date 09/10/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smolen, Paul Contributor address; City; State; Zip Code 1701 Nueces St Austin, TX 78701-1107	
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Fox, Smolen & Associates	
Date 09/25/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smolen, Paul Contributor address; City; State; Zip Code 1701 Nueces St Austin, TX 78701-1107	
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Fox, Smolen & Associates	
Date 07/31/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smothers, Roderick Contributor address; City; State; Zip Code 2009 Short Summer Dr Austin, TX 78754-5857	
Principal occupation / Job title (See Instructions) Vice President for Institutional Advancement		Employer (See Instructions) Huston-Tillotson University	
Date 09/02/2014		Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Solis, Ernesto Contributor address; City; State; Zip Code 6505 Cheno Cortina Cv Austin, TX 78749-2726	
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) CC Creations	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 77/93 Report: 79/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spain, Diana 6 Contributor address; City; State; Zip Code 5410 Avenue F Austin, TX 78751-1311	7 Amount of contribution (\$) \$5.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speight, Emily Contributor address; City; State; Zip Code 6705 Back Bay Ln Austin, TX 78739-1540	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Speights, Sara Contributor address; City; State; Zip Code 2701 W 49th 1/2 St Austin, TX 78731-5001	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stafford, Joe Contributor address; City; State; Zip Code 4309 Rio Robles Dr Austin, TX 78746-1994	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real estate development		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self employed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stanley, Alfred Contributor address; City; State; Zip Code PO Box 5674 Austin, TX 78763-5674	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Political Consultant		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) FireWatch	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 80/93 Report: 82/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swartwood, Slater Sr. 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)
9 Principal occupation / Job title (See Instructions) EVP		10 Employer (See Instructions) Force Multiplier Solutions, Inc.	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swartwood Jr, Slater 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)
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Force Multiplier Solutions/Busuard	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Swider, Erin Contributor address; City; State; Zip Code 1106 Brentwood St Austin, TX 78757-3037	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Talley, Gayla Contributor address; City; State; Zip Code 1193 Meadowild Dr Round Rock, TX 78664-9330	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) interior designer		Employer (See Instructions) Gayla L. Talley Interiors LLC	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Talley, Gayla Contributor address; City; State; Zip Code 1193 Meadowild Dr Round Rock, TX 78664-9330	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) interior designer		Employer (See Instructions) Gayla L. Talley Interiors LLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 82/93 Report: 84/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomason, Becky 6 Contributor address; City; State; Zip Code 7525 Harlow Dr Austin, TX 78739-1979	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Cheif Financial Officer		10 Employer (See Instructions) Prophet Capital Asset Management	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Toran, Catherine Contributor address; City; State; Zip Code 6600 Via Correto Dr Austin, TX 78749-2755	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director, Government Affairs		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Director, Government Affairs		Employer (See Instructions) TXU Energy	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Torres, Gerard Contributor address; City; State; Zip Code 201 Lavaca St Apt 221 Austin, TX 78701-3964	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trentham, Mary Contributor address; City; State; Zip Code 3303 Laguna Dr Austin, TX 78741-7054	Amount of contribution (\$) \$35.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trevino, Nelda Contributor address; City; State; Zip Code 5013 McDade Dr Austin, TX 78735-6395	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hole and Alvarez LLP	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 84/93 Report: 86/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tyree, Preston 6 Contributor address; City; State; Zip Code 10648 Floral Park Dr Austin, TX 78759-5104	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Umstead, Diane Contributor address; City; State; Zip Code 1201 Claire Ave Austin, TX 78703-2503	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) none	
Date 08/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valdes, Alex Contributor address; City; State; Zip Code 11800 Via Grande Dr Austin, TX 78739-1925	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valenzuela, Angela Contributor address; City; State; Zip Code 2653 Barton Hills Dr Austin, TX 78704-4540	Amount of contribution (\$) \$80.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Valenzuela, Gabriel Contributor address; City; State; Zip Code 3006 Birdwood Cir Austin, TX 78704-6119	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
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: 85/93 Report: 87/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Velasquez, Jose 6 Contributor address; City; State; Zip Code 4900 E Oltorf St Apt 216 Austin, TX 78741-7614	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Baker Botts LLP	
Date 09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Villareal, Gavin Contributor address; City; State; Zip Code 3310 Thousand Oaks Cv Austin, TX 78746-7473	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Volkening, Ronnie Contributor address; City; State; Zip Code 8546 Adirondack Trl Apt 7 Austin, TX 78759-7906	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vornberg, Mark Contributor address; City; State; Zip Code 1123 E 11th St Austin, TX 78702-1908	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vorpahl, George Contributor address; City; State; Zip Code 3601 Wellspring Dr Bee Cave, TX 78738-5032	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Group General Counsel		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) TIFPC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 86/93 Report: 88/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/09/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wainwright, Jon 6 Contributor address; City; State; Zip Code 4109 Avenue F Austin, TX 78751-4623	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Economist		10 Employer (See Instructions) MMC	
Date 08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Kwame Contributor address; City; State; Zip Code 718 Sparks Ave Austin, TX 78705-3103	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) governmental affairs consultant		Employer (See Instructions) McGuireWoods Consulting	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walker, Kwame Contributor address; City; State; Zip Code 718 Sparks Ave Austin, TX 78705-3103	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) government affairs consultant		Employer (See Instructions) McGuireWoods Consulting	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walsh, Margaret Contributor address; City; State; Zip Code 2101 Kenwood Ave Austin, TX 78704-4439	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walters, William III Contributor address; City; State; Zip Code 1010 W Martin Luther King Jr Blvd Austin, TX 78701-1070	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 87/93 Report: 89/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 07/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waltz, Elisabeth 6 Contributor address; City; State; Zip Code 4603 Laurel Canyon Dr Austin, TX 78731-5205	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) realtor		10 Employer (See Instructions) Montford Consulting Group	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ward, Donald Contributor address; City; State; Zip Code 1201 Quaker Ridge Dr Austin, TX 78746-6336	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ward, Leslie Contributor address; City; State; Zip Code 1201 Quaker Ridge Dr Austin, TX 78746-6336	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warner, M. Richard Contributor address; City; State; Zip Code 14525 Hamilton Pool Rd Austin, TX 78738-7708	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Temple Inland	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendler, Margaret Contributor address; City; State; Zip Code 4508 Duval Rd Apt 104 Austin, TX 78727-6806	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 88/93 Report: 90/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wertheimer, Gabrielle 6 Contributor address; City; State; Zip Code 3202 Gentry Dr Austin, TX 78746-5505	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) none	
Date 08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wertheimer, Stephen Contributor address; City; State; Zip Code 3202 Gentry Dr Austin, TX 78746-5505	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) Owner		Employer (See Instructions) The Continental Club	
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) White, Philip Contributor address; City; State; Zip Code 49 Beverly Rd Summit, NJ 07901-1620	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Sills Cummis	
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wicce, Kunda Contributor address; City; State; Zip Code 6607 Willamette Dr Austin, TX 78723-2110	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wicce, Kunda Contributor address; City; State; Zip Code 6607 Willamette Dr Austin, TX 78723-2110	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 89/93 Report: 91/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 08/06/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wiggins, Kerry 6 Contributor address; City; State; Zip Code 1209 Wilderness Cv Austin, TX 78746-6729	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Banker		10 Employer (See Instructions) Horizon Bank	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Talley Contributor address; City; State; Zip Code 8209 Dark Ridge Cv Austin, TX 78737-3511	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wofford, Bill Contributor address; City; State; Zip Code 4808 Marshall Ford Rd Austin, TX 78732-1700	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD	
Date 07/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wood, Mary Contributor address; City; State; Zip Code 4008 Sequoia Trl W Georgetown, TX 78628-1414	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wright, Faith Contributor address; City; State; Zip Code 12722 Blaine Rd Austin, TX 78753-7316	Amount of contribution (\$) \$60.00	In-kind contribution description (if applicable)
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: 90/93 Report: 92/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yancy, Howard 6 Contributor address; City; State; Zip Code 100 Skyline Dr West Lake Hills, TX 78746-3609	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) real estate		10 Employer (See Instructions) Zydeco Development	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yancy, Mary Contributor address; City; State; Zip Code 100 Skyline Dr West Lake Hills, TX 78746-3609	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	
Date 07/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yarbrough, Sharon Contributor address; City; State; Zip Code 10203 Ray Ave Austin, TX 78758-5119	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamarripa, Hermalinda Contributor address; City; State; Zip Code 4811 Caswell Ave. Austin, TX 78751	Amount of contribution (\$) \$80.37	In-kind contribution description (if applicable) food & beverages for event
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamarripa, Ricardo Contributor address; City; State; Zip Code 8208 Alophia Dr Austin, TX 78739-1998	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Klotz Associates	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 91/93 Report: 93/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamarripa, Sylvia 6 Contributor address; City; State; Zip Code 8208 Alohia Dr Austin, TX 78739-1998	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Insurance Agent		10 Employer (See Instructions) Health Markets	
Date 07/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamora, Emilio Contributor address; City; State; Zip Code 2653 Barton Hills Dr Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamora, Gilbert III Contributor address; City; State; Zip Code 11317 Cherisse Dr Austin, TX 78739-1995	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self Employed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zamora, Mikel Contributor address; City; State; Zip Code 11317 Cherisse Dr Austin, TX 78739-1995	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Physician's Assistant		Employer (See Instructions) Austin Gastroenterology	
Date 08/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zapata, Luis Contributor address; City; State; Zip Code 630 Kingfisher Creek Dr Austin, TX 78748-2427	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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: 92/93 Report: 94/138	
2 FILER NAME Martinez, Mike		3 ACCOUNT # (Ethics Commission filers) 00000078	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zapata, Luis 6 Contributor address; City; State; Zip Code 630 Kingfisher Creek Dr Austin, TX 78748-2427	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ziskovsky, Judith Contributor address; City; State; Zip Code 11117 Appletree Ln Austin, TX 78726-1381	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Interior Decorator		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Deua Interior			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ziskovsky, Scott Contributor address; City; State; Zip Code 11117 Appletree Ln Austin, TX 78726-1381	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Director of Marketing		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) County Line Inc			
Date 07/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zitz-Evancih, Michael Contributor address; City; State; Zip Code 11954 Dorsett Rd Austin, TX 78727-6000	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 07/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zitz-Evancih, Michael Contributor address; City; State; Zip Code 11954 Dorsett Rd Austin, TX 78727-6000	Amount of contribution (\$) \$5.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 93/93 Report: 95/138

2 FILER NAME Martinez, Mike

3 ACCOUNT # (Ethics Commission filers)
00000078

4 Date 09/19/2014
5 Full name of contributor out-of-state PAC (ID# _____)
Zoranic, Aleksandar

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
1135 Burdette St
New Orleans, LA 70118-3972

\$350.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Research and Development

10 Employer (See Instructions)
FxS Inc

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: 1/41 Report: 97/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/24/2014		5 Payee name A&A Appliance			
6 Amount (\$) \$107.16		7 Payee address City; State; Zip Code 720 Bastrop Hwy #105 Austin, TX 78741			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office equipment rental <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 07/29/2014		Payee name A&A Appliance			
Amount (\$) \$24.89		Payee address City; State; Zip Code 720 Bastrop Hwy #105 Austin, TX 78741			
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 equipment rental <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 Aguirre, Leo			
Amount (\$) \$1,000.00		Payee address City; State; Zip Code 1320 Tillerfield Trail Austin, TX 78748			
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"/> Salary <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 07/31/2014		Payee name Aguirre, Leo			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1320 Tillerfield Trail Austin, TX 78748			
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"/> Salary <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: 2/41 Report: 98/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/15/2014		5 Payee name Aguirre, Leo			
6 Amount (\$) \$500.00		7 Payee address City; State; Zip Code 1320 Tillerfield Trail Austin, TX 78748			
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"/> Salary <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 08/29/2014		Payee name Aguirre, Leo			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1320 Tillerfield Trail Austin, TX 78748			
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"/> Salary <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 09/15/2014		Payee name Aguirre, Leo			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1320 Tillerfield Trail Austin, TX 78748			
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"/> Salary <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 08/09/2014		Payee name American Printing and Mailing			
Amount (\$) \$2,409.17		Payee address City; State; Zip Code 1606 Headway Circle Austin, TX 78754			
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

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: 3/41 Report: 99/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/15/2014		5 Payee name Atkins, Julia			
6 Amount (\$) \$278.00		7 Payee address City; State; Zip Code 3204 Beanna Street Austin, TX 78705			
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 08/29/2014		Payee name Austin AFL-CIO Council			
Amount (\$) \$215.00		Payee address City; State; Zip Code PO Box 87 Austin, TX 78767			
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"/> Political print advertising <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 BerlinRosen Ltd.			
Amount (\$) \$6,000.00		Payee address City; State; Zip Code 15 Maiden Lane New York, NY 10038			
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"/> Mail design and consulting 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 Brady & Peavey			
Amount (\$) \$500.00		Payee address City; State; Zip Code Box 13132 Austin, TX 78711			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal compliance consulting 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: 4/41 Report: 100/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/21/2014		5 Payee name Brady & Peavey			
6 Amount (\$) \$500.00		7 Payee address City; State; Zip Code Box 13132 Austin, TX 78711			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Legal Services		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal compliance consulting fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/16/2014		Payee name Buckingham, Robert Tyler			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 1806 Singleton Ave. Austin, TX 78702			
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"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/01/2014		Payee name Buckingham, Robert Tyler			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 1806 Singleton Ave. Austin, TX 78702			
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"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Buckingham, Robert Tyler			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 1806 Singleton Ave. Austin, TX 78702			
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"/> Salary	
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: 5/41 Report: 101/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/29/2014		5 Payee name Buckingham, Robert Tyler			
6 Amount (\$) \$1,250.00		7 Payee address City; State; Zip Code 1806 Singleton Ave. Austin, TX 78702			
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"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Buckingham, Robert Tyler			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 1806 Singleton Ave. Austin, TX 78702			
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"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/11/2014		Payee name Bueno Wireless			
Amount (\$) \$22.00		Payee address City; State; Zip Code 3112 Manor Rd Austin, TX 78723			
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"/> telephones	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/23/2014		Payee name Bueno Wireless			
Amount (\$) \$129.90		Payee address City; State; Zip Code 3112 Manor Rd Austin, TX 78723			
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"/> telephones	
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: 6/41 Report: 102/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/15/2014		5 Payee name Bueno Wireless			
6 Amount (\$) \$22.00		7 Payee address City; State; Zip Code 3112 Manor Rd Austin, TX 78723			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> telephones <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 07/24/2014		Payee name Campaigner			
Amount (\$) \$200.00		Payee address City; State; Zip Code 6922 Hollywood Blvd. Hollywood, CA 90028			
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"/> Email list management <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 08/25/2014		Payee name Campaigner			
Amount (\$) \$200.00		Payee address City; State; Zip Code 6922 Hollywood Blvd. Hollywood, CA 90028			
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"/> Email list management <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 09/24/2014		Payee name Campaigner			
Amount (\$) \$200.00		Payee address City; State; Zip Code 6922 Hollywood Blvd. Hollywood, CA 90028			
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"/> Email list management <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: 7/41 Report: 103/138	2 FILER NAME Martinez, Mike	3 ACCOUNT # (TEC filers) 00000078
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4 Date 07/24/2014	5 Payee name Capital of Texas Media Foundation
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6 Amount (\$) \$399.00	7 Payee address City; State; Zip Code P.O. Box 867 Austin, TX 78767
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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"/> Subscription <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/29/2014	Payee name Carlos, Camille
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Amount (\$) \$150.00	Payee address City; State; Zip Code 1900 W. 33rd St. Austin, TX 78703
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/15/2014	Payee name Carlos, Camille
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Amount (\$) \$195.00	Payee address City; State; Zip Code 1900 W. 33rd St. Austin, TX 78703
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/05/2014	Payee name Chambless, Paul
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Amount (\$) \$5,130.00	Payee address City; State; Zip Code 16900 Fagerquist Dr. Del Valle, TX 78617
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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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: 8/41 Report: 104/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/12/2014		5 Payee name Chambless, Paul			
6 Amount (\$) \$1,215.00		7 Payee address City; State; Zip Code 16900 Fagerquist Dr. Del Valle, TX 78617			
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/09/2014		Payee name Checkmark Typesetting			
Amount (\$) \$541.25		Payee address City; State; Zip Code 3217 N. 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/13/2014		Payee name Checkmark Typesetting			
Amount (\$) \$2,501.22		Payee address City; State; Zip Code 3217 N. 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"/> Yard signs	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/04/2014		Payee name Checkmark Typesetting			
Amount (\$) \$424.88		Payee address City; State; Zip Code 3217 N. 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	
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: 9/41 Report: 105/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/03/2014		5 Payee name City of Austin Utilities			
6 Amount (\$) \$223.38		7 Payee address City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Utilities <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 08/05/2014		Payee name City of Austin Utilities			
Amount (\$) \$208.45		Payee address City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267			
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"/> Utilities <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 08/12/2014		Payee name City of Austin Utilities			
Amount (\$) \$380.63		Payee address City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267			
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"/> Utilities <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 09/15/2014		Payee name City of Austin Utilities			
Amount (\$) \$317.91		Payee address City; State; Zip Code P.O. Box 2267 Austin, TX 78783-2267			
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"/> Utilities <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: 10/41 Report: 106/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/02/2014		5 Payee name Colonna Family Limited Partnership			
6 Amount (\$) \$2,000.00		7 Payee address City; State; Zip Code PO Box 214 Buda, TX 78610			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Rent <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 Colonna Family Limited Partnership			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code PO Box 214 Buda, TX 78610			
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"/> Rent <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 Colonna Family Limited Partnership			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code PO Box 214 Buda, TX 78610			
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"/> Rent <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 Dellert, Steve			
Amount (\$) \$330.00		Payee address City; State; Zip Code 7701 Chelmsford Dr. 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: 11/41 Report: 107/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/31/2014		5 Payee name Dellert, Steve			
6 Amount (\$) \$506.00		7 Payee address City; State; Zip Code 7701 Chelmsford Dr. 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Dellert, Steve			
Amount (\$) \$682.00		Payee address City; State; Zip Code 7701 Chelmsford Dr. 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/29/2014		Payee name Dellert, Steve			
Amount (\$) \$620.00		Payee address City; State; Zip Code 7701 Chelmsford Dr. 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Dellert, Steve			
Amount (\$) \$325.00		Payee address City; State; Zip Code 7701 Chelmsford Dr. 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	
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: 12/41 Report: 108/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/01/2014		5 Payee name Delp, Bo			
6 Amount (\$) \$1,750.00		7 Payee address City; State; Zip Code 30101 Tom Green Austin, TX 78705			
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"/> Salary <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 07/15/2014		Payee name Delp, Bo			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 30101 Tom Green Austin, TX 78705			
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"/> Salary <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 07/31/2014		Payee name Delp, Bo			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 30101 Tom Green Austin, TX 78705			
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"/> Salary <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 Delp, Bo			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 30101 Tom Green Austin, TX 78705			
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"/> Salary <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: 13/41 Report: 109/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/29/2014		5 Payee name Delp, Bo			
6 Amount (\$) \$1,875.00		7 Payee address City: State; Zip Code 30101 Tom Green Austin, TX 78705			
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"/> Salary <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 09/15/2014		Payee name Delp, Bo			
Amount (\$) \$1,875.00		Payee address City: State; Zip Code 30101 Tom Green Austin, TX 78705			
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"/> Salary <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 07/31/2014		Payee name Dobbs, Austin			
Amount (\$) \$300.00		Payee address City: State; Zip Code 701 Lance Rd. Quitman, TX 75783			
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 08/01/2014		Payee name Dobbs, Austin			
Amount (\$) \$120.00		Payee address City: State; Zip Code 701 Lance Rd. Quitman, TX 75783			
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: 14/41 Report: 110/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/06/2014		5 Payee name Dobbs, Austin			
6 Amount (\$) \$55.00		7 Payee address City; State; Zip Code 701 Lance Rd. Quitman, TX 75783			
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/15/2014		Payee name Dobbs, Austin			
Amount (\$) \$400.00		Payee address City; State; Zip Code 701 Lance Rd. Quitman, TX 75783			
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 07/23/2014		Payee name East Side Pies			
Amount (\$) \$84.69		Payee address City; State; Zip Code 1401 Rosewood Ave. Autsin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers <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 07/26/2014		Payee name East Side Pies			
Amount (\$) \$44.23		Payee address City; State; Zip Code 1401 Rosewood Ave. Autsin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers <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: 15/41 Report: 111/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/01/2014		5 Payee name Edwards, Layla			
6 Amount (\$) \$1,000.00		7 Payee address City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741			
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"/> Salary <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 07/15/2014		Payee name Edwards, Layla			
Amount (\$) \$1,000.00		Payee address City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741			
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"/> Salary <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 07/31/2014		Payee name Edwards, Layla			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741			
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"/> Salary <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 Edwards, Layla			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741			
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"/> Salary <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: 16/41 Report: 112/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/29/2014		5 Payee name Edwards, Layla			
6 Amount (\$) \$1,250.00		7 Payee address City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741			
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"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Edwards, Layla			
Amount (\$) \$1,250.00		Payee address City; State; Zip Code 2223 Waterloo City Ln. #146 Austin, TX 78741			
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"/> Salary	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Eggar, Chase			
Amount (\$) \$335.00		Payee address City; State; Zip Code 3806 Haleys Way Round Rock, TX 78665			
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 07/03/2014		Payee name First Data			
Amount (\$) \$449.10		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	
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: 17/41 Report: 113/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/03/2014		5 Payee name First Data			
6 Amount (\$) \$49.80		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 07/03/2014		Payee name First Data			
Amount (\$) \$730.71		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 (\$) \$60.30		Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <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 (\$) \$337.69		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: 18/41 Report: 114/138	2 FILER NAME Martinez, Mike	3 ACCOUNT # (TEC filers) 00000078
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4 Date 08/04/2014	5 Payee name First Data
6 Amount (\$) \$798.22	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 08/11/2014	Payee name First Data
Amount (\$) \$0.07	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 (\$) \$395.04	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 (\$) \$85.81	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: 19/41 Report: 115/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/03/2014		5 Payee name First Data			
6 Amount (\$) \$45.25		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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Godfrey, Steven			
Amount (\$) \$260.00		Payee address City; State; Zip Code 403 Cherry Hill Drive 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name Google			
Amount (\$) \$27.49		Payee address City; State; Zip Code 1600 Amphitheatre Parkwa Mountain View, CA 94043			
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"/> Online political advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/05/2014		Payee name Google			
Amount (\$) \$44.33		Payee address City; State; Zip Code 1600 Amphitheatre Parkwa Mountain View, CA 94043			
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"/> Online political advertising	
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: 20/41 Report: 116/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/04/2014		5 Payee name Google			
6 Amount (\$) \$52.89		7 Payee address City; State; Zip Code 1600 Amphitheatre Parkwa Mountain View, CA 94043			
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"/> Online political advertising <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 09/22/2014		Payee name Goss, Delwin			
Amount (\$) \$1,530.00		Payee address City; State; Zip Code 6410 Ponca Street Austin, TX 78741			
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 07/24/2014		Payee name Gragert Research			
Amount (\$) \$4,250.00		Payee address City; State; Zip Code 222 W. Ontario St., Ste. 500 Chicago, IL 60654			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Polling Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Research <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 Grande Communications			
Amount (\$) \$112.66		Payee address City; State; Zip Code 1923 E 7th St #100 Austin, TX 78702			
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"/> utilities <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: 21/41 Report: 117/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/18/2014		5 Payee name Grande Communications			
6 Amount (\$) \$230.32		7 Payee address City; State; Zip Code 1923 E 7th St #100 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> utilities <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 Grande Communications			
Amount (\$) \$117.66		Payee address City; State; Zip Code 1923 E 7th St #100 Austin, TX 78702			
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"/> utilities <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 Hadley, Lauren			
Amount (\$) \$763.00		Payee address City; State; Zip Code 5929 Republic of Texas Blvd. Austin, TX 78735			
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 08/29/2014		Payee name Hadley, Lauren			
Amount (\$) \$320.00		Payee address City; State; Zip Code 5929 Republic of Texas Blvd. Austin, TX 78735			
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: 22/41 Report: 118/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/15/2014		5 Payee name Hadley, Lauren			
6 Amount (\$) \$278.00		7 Payee address City; State; Zip Code 5929 Republic of Texas Blvd. Austin, TX 78735			
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 07/31/2014		Payee name Harvison, Jacob			
Amount (\$) \$825.00		Payee address City; State; Zip Code 2900 Manor Rd. #2135 Austin, TX 78722			
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 Harvison, Jacob			
Amount (\$) \$825.00		Payee address City; State; Zip Code 2900 Manor Rd. #2135 Austin, TX 78722			
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 08/29/2014		Payee name Harvison, Jacob			
Amount (\$) \$350.00		Payee address City; State; Zip Code 2900 Manor Rd. #2135 Austin, TX 78722			
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: 23/41 Report: 119/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/09/2014		5 Payee name HEB			
6 Amount (\$) \$31.86		7 Payee address City; State; Zip Code 1000 East 41st St. Austin, TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for office <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 08/22/2014		Payee name HEB			
Amount (\$) \$26.89		Payee address City; State; Zip Code 1000 East 41st St. Austin, TX			
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"/> supplies for office <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 08/25/2014		Payee name HEB			
Amount (\$) \$11.94		Payee address City; State; Zip Code 1000 East 41st St. Austin, TX			
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"/> supplies for office <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 09/22/2014		Payee name HEB			
Amount (\$) \$59.50		Payee address City; State; Zip Code 1000 East 41st St. Austin, TX			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> supplies for office <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: 24/41 Report: 120/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/24/2014		5 Payee name Heideman, Brian			
6 Amount (\$) \$25.00		7 Payee address City; State; Zip Code 700 Nacona Trail Harker Heights, TX 76548			
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"/> website hosting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/13/2014		Payee name Heideman, Brian			
Amount (\$) \$678.50		Payee address City; State; Zip Code 700 Nacona Trail Harker Heights, TX 76548			
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"/> Website design	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/04/2014		Payee name Heideman, Brian			
Amount (\$) \$25.00		Payee address City; State; Zip Code 700 Nacona Trail Harker Heights, TX 76548			
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"/> website services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/24/2014		Payee name Hill Country Springs			
Amount (\$) \$18.00		Payee address City; State; Zip Code P.O. Box 2220 Manchaca, TX 78652-2220			
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"/> water delivery for campaign office	
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: 25/41 Report: 121/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/09/2014		5 Payee name Hill Country Springs			
6 Amount (\$) \$140.04		7 Payee address City; State; Zip Code P.O. Box 2220 Manchaca, TX 78652-2220			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> water delivery for campaign office <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 08/29/2014		Payee name Hill Country Springs			
Amount (\$) \$26.99		Payee address City; State; Zip Code P.O. Box 2220 Manchaca, TX 78652-2220			
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"/> water delivery for campaign office <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 Hudson, Nick			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 10926 Jollyville Rd. #711 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"/> Salary <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 Hudson, Nick			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 10926 Jollyville Rd. #711 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"/> Salary <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: 26/41 Report: 122/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/31/2014		5 Payee name Hudson, Nick			
6 Amount (\$) \$1,750.00		7 Payee address City; State; Zip Code 10926 Jollyville Rd. #711 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"/> Salary <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 Hudson, Nick			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 10926 Jollyville Rd. #711 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"/> Salary <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 08/29/2014		Payee name Hudson, Nick			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 10926 Jollyville Rd. #711 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"/> Salary <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 09/15/2014		Payee name Hudson, Nick			
Amount (\$) \$1,750.00		Payee address City; State; Zip Code 10926 Jollyville Rd. #711 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"/> Salary <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: 27/41 Report: 123/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/13/2014		5 Payee name In Focus Campaigns, LLC			
6 Amount (\$) \$750.75		7 Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Telephone calls <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 08/25/2014		Payee name In Focus Campaigns, LLC			
Amount (\$) \$1,206.59		Payee address City; State; Zip Code PO Box 10726 Fort Worth, TX 76114			
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"/> Telephone calls <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 09/15/2014		Payee name Leonares, Gwen			
Amount (\$) \$325.00		Payee address City; State; Zip Code 18211 Crossland Ct. Cypress, TX 77433			
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 07/31/2014		Payee name McKinney, Andre			
Amount (\$) \$440.00		Payee address City; State; Zip Code 4707 Broadhill Dr. Austin, TX 78723			
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: 28/41 Report: 124/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/15/2014		5 Payee name McKinney, Andre			
6 Amount (\$) \$55.00		7 Payee address City; State; Zip Code 4707 Broadhill Dr. Austin, TX 78723			
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/02/2014		Payee name NGP VAN, Inc.			
Amount (\$) \$550.00		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 07/22/2014		Payee name NGP VAN, Inc.			
Amount (\$) \$900.00		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 08/04/2014		Payee name NGP VAN, Inc.			
Amount (\$) \$550.00		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:	

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: 29/41 Report: 125/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/02/2014		5 Payee name NGP VAN, Inc.			
6 Amount (\$) \$550.00		7 Payee address City; State; Zip Code 1101 15th Street, NW, Suite 500 Washington, DC 20005			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Database software <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 Office Depot			
Amount (\$) \$32.46		Payee address City; State; Zip Code 2101 South Lamar 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/22/2014		Payee name Office Depot			
Amount (\$) \$32.46		Payee address City; State; Zip Code 2101 South Lamar 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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/01/2014		Payee name Parkerson, Matt			
Amount (\$) \$6,000.00		Payee address City; State; Zip Code 1407 Burford Place 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"/> Salary <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: 30/41 Report: 126/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/15/2014		5 Payee name Parkerson, Matt			
6 Amount (\$) \$2,000.00		7 Payee address City; State; Zip Code 1407 Burford Place 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"/> Salary <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 07/31/2014		Payee name Parkerson, Matt			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code 1407 Burford Place 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"/> Salary <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 Parkerson, Matt			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code 1407 Burford Place 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"/> Salary <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 08/29/2014		Payee name Parkerson, Matt			
Amount (\$) \$2,000.00		Payee address City; State; Zip Code 1407 Burford Place 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"/> Salary <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: 31/41 Report: 127/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/29/2014		5 Payee name Phelps, Chelsea			
6 Amount (\$) \$215.00		7 Payee address City; State; Zip Code 7117 Wood Hollow Dr. Austin, TX 78731			
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Phelps, Chelsea			
Amount (\$) \$520.00		Payee address City; State; Zip Code 7117 Wood Hollow Dr. Austin, TX 78731			
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 09/15/2014		Payee name Powell, Daniel			
Amount (\$) \$335.00		Payee address City; State; Zip Code 3805 Haleys Way Round Rock, TX 78665			
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 07/31/2014		Payee name Reilman, Alex			
Amount (\$) \$385.00		Payee address City; State; Zip Code 2414 Longview St. #310 Austin, TX 78705			
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: 32/41 Report: 128/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/15/2014		5 Payee name Reilman, Alex			
6 Amount (\$) \$440.00		7 Payee address City; State; Zip Code 2414 Longview St. #310 Austin, TX 78705			
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 08/29/2014		Payee name Reilman, Alex			
Amount (\$) \$380.00		Payee address City; State; Zip Code 2414 Longview St. #310 Austin, TX 78705			
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 09/15/2014		Payee name Reilman, Alex			
Amount (\$) \$390.00		Payee address City; State; Zip Code 2414 Longview St. #310 Austin, TX 78705			
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 08/09/2014		Payee name Smith, Sarah			
Amount (\$) \$200.00		Payee address City; State; Zip Code 1401 St. Edwards #260 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> music for event <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: 33/41 Report: 129/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/15/2014		5 Payee name Sonier, Gyles			
6 Amount (\$) \$286.00		7 Payee address City; State; Zip Code 8100 N. Mopac Expwy., #251 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 07/31/2014		Payee name Sonier, Gyles			
Amount (\$) \$715.00		Payee address City; State; Zip Code 8100 N. Mopac Expwy., #251 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 07/15/2014		Payee name Soto, Arthur			
Amount (\$) \$350.00		Payee address City; State; Zip Code 2717 Hector El Paso, TX 79935			
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 08/11/2014		Payee name Spec's Wine Spirits & Finer Foods			
Amount (\$) \$157.93		Payee address City; State; Zip Code 5775 Airport Blvd. Austin, TX 78752			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> beverages for event <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: 34/41 Report: 130/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/09/2014		5 Payee name Staples			
6 Amount (\$) \$108.24		7 Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 7872			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <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 08/22/2014		Payee name Staples			
Amount (\$) \$48.50		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 7872			
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 08/28/2014		Payee name Staples			
Amount (\$) \$21.63		Payee address City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 7872			
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 08/29/2014		Payee name Status Labs			
Amount (\$) \$500.00		Payee address City; State; Zip Code 701 Tillery Suite A-3 Austin, TX 78702			
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"/> 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: 35/41 Report: 131/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/23/2014		5 Payee name Status Labs			
6 Amount (\$) \$75.00		7 Payee address City; State; Zip Code 701 Tillery Suite A-3 Austin, TX 78702			
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"/> 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 09/15/2014		Payee name Stephen Ault			
Amount (\$) \$325.00		Payee address City; State; Zip Code 16222 Peach Bough Lane Houston, TX 77095			
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 07/01/2014		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$3,500.00		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 08/01/2014		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$3,500.00		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:	

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: 36/41 Report: 132/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/15/2014		5 Payee name Susan Harry Consulting, LLC			
6 Amount (\$) \$500.00		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) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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 09/01/2014		Payee name Susan Harry Consulting, LLC			
Amount (\$) \$3,500.00		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 07/07/2014		Payee name Tops			
Amount (\$) \$264.67		Payee address City; State; Zip Code 1300 E 5th St Austin, TX 78702			
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 furniture <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 07/21/2014		Payee name Tops			
Amount (\$) \$48.71		Payee address City; State; Zip Code 1300 E 5th St Austin, TX 78702			
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 furniture <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: 37/41 Report: 133/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/22/2014		5 Payee name Travis County Democratic Party			
6 Amount (\$) \$200.00		7 Payee address City: State; Zip Code 1311 E 6th St Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for TCDP staff <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 Uriste, Clarissa			
Amount (\$) \$300.00		Payee address City: State; Zip Code 505 W. 22nd St. #1311 Austin, TX 78705			
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 08/29/2014		Payee name Uriste, Clarissa			
Amount (\$) \$320.00		Payee address City: State; Zip Code 505 W. 22nd St. #1311 Austin, TX 78705			
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 09/15/2014		Payee name Uriste, Clarissa			
Amount (\$) \$278.00		Payee address City: State; Zip Code 505 W. 22nd St. #1311 Austin, TX 78705			
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: 38/41 Report: 134/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/13/2014		5 Payee name Velásquez, José			
6 Amount (\$) \$1,500.00		7 Payee address City; State; Zip Code 4900 E Oltorf #216 Austin, TX 78741			
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	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name Velásquez, José			
Amount (\$) \$1,500.00		Payee address City; State; Zip Code 4900 E Oltorf #216 Austin, TX 78741			
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 08/25/2014		Payee name Virgin Mobile			
Amount (\$) \$22.05		Payee address City; State; Zip Code 179 Harrow Road London England, AA 11111			
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"/> telephone service <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 08/26/2014		Payee name Virgin Mobile			
Amount (\$) \$44.10		Payee address City; State; Zip Code 179 Harrow Road London England, AA 11111			
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"/> telephone service <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: 39/41 Report: 135/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 08/26/2014		5 Payee name Virgin Mobile			
6 Amount (\$) \$33.08		7 Payee address City; State; Zip Code 179 Harrow Road London England, AA 11111			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> telephone service	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/26/2014		Payee name Virgin Mobile			
Amount (\$) \$22.05		Payee address City; State; Zip Code 179 Harrow Road London England, AA 11111			
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"/> telephone service	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name White, John			
Amount (\$) \$325.00		Payee address City; State; Zip Code 2818 A San Pedro Austin, TX 78705			
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 07/24/2014		Payee name Worley Printing			
Amount (\$) \$1,266.53		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	
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: 40/41 Report: 136/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 07/15/2014		5 Payee name Zamarripa, John			
6 Amount (\$) \$1,000.00		7 Payee address City; State; Zip Code 11728 Railton Rd Del Valle, TX 78617			
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 07/31/2014		Payee name Zamarripa, John			
Amount (\$) \$500.00		Payee address City; State; Zip Code 11728 Railton Rd Del Valle, TX 78617			
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 Zamarripa, John			
Amount (\$) \$500.00		Payee address City; State; Zip Code 11728 Railton Rd Del Valle, TX 78617			
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 08/29/2014		Payee name Zamarripa, John			
Amount (\$) \$500.00		Payee address City; State; Zip Code 11728 Railton Rd Del Valle, TX 78617			
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: 41/41 Report: 137/138		2 FILER NAME Martinez, Mike		3 ACCOUNT # (TEC filers) 00000078	
4 Date 09/15/2014		5 Payee name Zamarripa, John			
6 Amount (\$) \$750.00		7 Payee address City: State; Zip Code 11728 Railton Rd Del Valle, TX 78617			
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:	

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: 138/138	2 FILER NAME Martinez, Mike	3 ACCOUNT # (TEC filers) 00000078
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4 Date 08/09/2014	5 Payee name Hoover's Restaurant
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6 Amount (\$) \$725.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 2002 Manor Road Austin, TX 78722
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for event
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

BUNDLING REPORT

Name of candidate/officeholder: **Mike Martinez**

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Ryan Runkle	816 Congress Ave., Ste. 1410, Austin, TX 78701	Attorney	Hotze Runkle PLLC	\$3,150
Amanda DeAngelis	1851 S. Lakeline Boulevard, Suite 104, #162, Cedar Park, TX 78613	Executive Director	American Council of Engineering Companies of Central Texas	\$2,300

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Contributor Information									
Name	Address	City	State	Zip	Occupation	Employer	Amount	Bundled by	
Karen Shanks	601 Brushy St. Ste. 403	Austin	TX	78702-3279	Attorney	Hotze Runkle, PLLC	\$350	Ryan Runkle	
Donny Shanks	601 Brushy St. Ste. 403	Austin	TX	78702-3279	real estate	Urban Space	\$350	Ryan Runkle	
Ian King	8411 Longview Rd	Austin	TX	78745-7559	Paralegal	Runkle Law Firm	\$350	Ryan Runkle	
Mrs. Ian King	8411 Longview Rd	Austin	TX	78745-7559	requested	requested	\$350	Ryan Runkle	
Tara Combs	5701 S Mo Pac Expy. #1116	Austin	TX	78749-1443	Paralegal	Hotze Runkle, PLLC	\$350	Ryan Runkle	
Roderick Cobb	4424 Gaines Ranch Loop #1832	Austin	TX	78735-6542	Director of Communication Services	City of San Marcos	\$350	Ryan Runkle	
Ryan Runkle	816 Congress Ave #1410	Austin	TX	78701-2639	Attorney	Hotze Runkle PLLC	\$350	Ryan Runkle	
Gilbert Zamora	11317 Cherisse Dr	Austin	TX	78739-1995	CPA	Self Employed	\$350	Ryan Runkle	
Mikel Zamora	11317 Cherisse Dr	Austin	TX	78739-1995	Physician's Assistant	Austin Gastroenterology	\$350	Ryan Runkle	
Karen Friese	6603 Cat Creek Trl	Austin	TX	78731-2600	Senior Project Manager	K. Friese & Associates	\$350	Amanda DeAngelis	
Johnny Flores	16204 Double Eagle Dr	Austin	TX	78717-3816	Engineer	Fugro	\$150	Amanda DeAngelis	
Federico Mendoza	5721 Sunset Rdg	Austin	TX	78735-7919	Engineer	Brown & Gay Engineers, Inc	\$250	Amanda DeAngelis	
Michael Moya	10509 Pariva Trl	Austin	TX	78726-1346	Civil Engineer	Halff Associates	\$350	Amanda DeAngelis	
Brian Rice	2905 Brian Wood Ct	Cedar Park	TX	78613-5143	VP	Binkley and Barfeild, INC	\$350	Amanda DeAngelis	
Susan Turrieta	PO Box 5902	Austin	TX	78763-5902	Engineer	Smith Turrieta Engineering	\$350	Amanda DeAngelis	
Ricardo Zamarripa	8208 Alophia	Austin	TX	78739-	VP	Klotz Associates	\$250	Amanda	

		Dr			1998				DeAngelis
Sylvia	Zamarripa	8208 Alopia Dr	Austin	TX	78739- 1998	Insurance Agent	Health Markets	\$250	Amanda DeAngelis

Office of the City Clerk, 20.36

Revised by the Ethics Review Commission 03/26/2014
Page 1 of 2

3. Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2) a business association through which the Bundler does business, or (3) the Bundler's employer.

*Note: It is important to remember that contributions to you are from the **actual donor**, **not** from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.*

**STATE OF TEXAS
VERIFICATION**

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.



Signature of Affiant