

# 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)  
00001709

**2 PAGE #**  
1 of 9

**3 CANDIDATE /  
OFFICEHOLDER  
NAME**

 MS / MRS / MR FIRST MI  
 Mr. Eric  
 NICKNAME LAST SUFFIX  
 Rangel
**OFFICE USE ONLY**

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

**4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS**

 ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE  
 125 Woodward St.,  
 B-207  
 Austin, TX 78704

☐ Change of Address

**5 CAMPAIGN  
TREASURER  
NAME**

 MS / MRS / MR FIRST MI  
 Mrs. Jennifer  
 NICKNAME LAST SUFFIX  
 Cruise

**6 CAMPAIGN  
TREASURER  
ADDRESS**  
(Residence or business)

 STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE  
 2212 Thrasher Lane  
 Austin, TX 78741

**7 CAMPAIGN  
TREASURER  
PHONE**

 AREA CODE PHONE NUMBER EXTENSION  
 (512) 720-8348
**8 REPORT TYPE**
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)  
☐ July 15 ☒ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

**9 PERIOD  
COVERED**

 Month Day Year  
 09/26/2014 THROUGH  
 Month Day Year  
 10/26/2014
**10 ELECTION**
 ELECTION DATE ELECTION TYPE  
 Month Day Year  
 11/04/2014  
☐ Primary ☐ Runoff ☒ General ☐ Special
**11 OFFICE**

OFFICE HELD (if any)

**12 OFFICE SOUGHT (if known)**

AUSTIN CITY COUNCIL DISTRICT 3

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****13 C/OH NAME** Rangel, Eric (Mr.)**14 ACCOUNT #** (Ethics Commission filers)  
00001709**15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

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

**COMMITTEE TYPE**☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages**16 CONTRIBUTION  
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

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

\$ 2,150.00

**EXPENDITURE  
TOTALS**

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

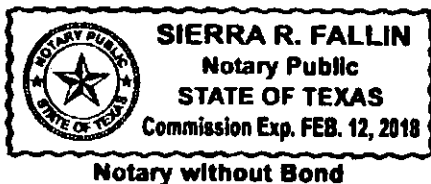
\$ 1,988.60

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

\$ 0.00

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

\$ 0.00

**17 AFFIDAVIT**

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Eric J. Rangel, this the 27 day of October, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Sierra R. Fallin  
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: 1/5 Report: 3/9

2 FILER NAME Rangel, Eric (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00001709

4 Date

09/26/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ahrendt, Blythe (Ms.)

6 Contributor address; City; State; Zip Code  
130 Clover Cv  
Clover Cove, TX 78640

7 Amount of  
contribution (\$)

\$30.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Office Administration

10 Employer (See Instructions)  
A-1 Partsmart

Date

09/26/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Alvarez, Alfredo (Mr.)

Contributor address; City; State; Zip Code  
5301 S/ 74th Avenue  
Summit, IL 60501

Amount of  
contribution (\$)

\$20.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Operations Manager

Employer (See Instructions)  
Mars

Date

09/26/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Arias, Reymon (Mr.)

Contributor address; City; State; Zip Code  
2200 Palomar Drive  
Roswell, NM 88203

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Teacher

Employer (See Instructions)  
Roswell ISD

Date

10/21/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Auth, Phillip (Mr.)

Contributor address; City; State; Zip Code  
5306 Summer Circle  
Austin, TX 78741

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Investment Manager

Employer (See Instructions)  
Teacher Retirement System of Texas

Date

10/15/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Berger, Ryan (Mr.)

Contributor address; City; State; Zip Code  
1613 W. 12th Street  
Austin, TX 78703

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Real Estate Investor

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: 2/5 Report: 4/9

2 FILER NAME Rangel, Eric (Mr.)

3 ACCOUNT # (Ethics Commission filers)

00001709

4 Date

10/16/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Burns, Lara (Mr.)

6 Contributor address; City; State; Zip Code  
801 W. 5th Street, Suite 100  
Austin, TX 78703

7 Amount of  
contribution (\$)

\$100.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Urbanspace

Date

10/21/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Carrico, Brian (Mr.)

Contributor address; City; State; Zip Code  
3704 Bonnie Road  
Austin, TX 78703

Amount of  
contribution (\$)

\$350.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
President

Employer (See Instructions)

Alexa Management LLC

Date

09/30/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cofer, George (Mr.)

Contributor address; City; State; Zip Code  
3306 Gentry Drive  
Rollingwood, TX 78746

Amount of  
contribution (\$)

\$20.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Executive Director

Employer (See Instructions)

Hill Country Conservancy

Date

09/26/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Craig, Kenneth (Mr.)

Contributor address; City; State; Zip Code  
913B Sirocco Drive  
Austin, TX 78745

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)

Tammagde Market Research Inc.

Date

10/26/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Craig, Kenneth (Mr.)

Contributor address; City; State; Zip Code  
913B Sirocco Drive  
Austin, TX 78745

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Manager

Employer (See Instructions)

Tammagde Market Research Inc.

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 3/5 Report: 5/9

2 FILER NAME Rangel, Eric (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00001709

4 Date  
  
09/26/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Estrada, Eric (Mr.)

6 Contributor address; City; State; Zip Code  
407 W. China Street  
Lockhart, TX 78644

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)  
  
\$20.00 |

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

9 Principal occupation / Job title (See Instructions)  
Underwriting Technician

10 Employer (See Instructions)  
TMLT

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Goldman, Greg (Mr.)

10/04/2014

Contributor address; City; State; Zip Code  
1904 Canterbury Street  
Austin, TX 78702

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$30.00 |

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

Principal occupation / Job title (See Instructions)  
Senior Planner

Employer (See Instructions)  
CAMPO

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gonzales, Eva (Ms.)

10/23/2014

Contributor address; City; State; Zip Code  
913 Sirocco Drive Unit B  
Austin, TX 78745

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$100.00 |

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

Principal occupation / Job title (See Instructions)  
Legal Assistant

Employer (See Instructions)  
Texas Department of Aging & Disability Services

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Griego, Meriah Heredia (Ms.)

09/26/2014

Contributor address; City; State; Zip Code  
1613 Galbaldon Dr., NW  
Albuquerque, NM 87104

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$100.00 |

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

Principal occupation / Job title (See Instructions)  
Firefighter

Employer (See Instructions)  
City of Albuquerque

Date

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hall, Shawndra (Ms.)

09/26/2014

Contributor address; City; State; Zip Code  
8309 Emerald Hills Way  
North Richland Hills, TX 76180

Amount of contribution (\$) | In-kind contribution description (if applicable)  
  
\$20.00 |

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

Principal occupation / Job title (See Instructions)  
Associate Director of Youth Ministry

Employer (See Instructions)  
St. John the Apostle Catholic Church

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 4/5 Report: 6/9

2 FILER NAME Rangel, Eric (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00001709

4 Date 09/26/2014  
5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Harvill, Lindsey (Ms.)

7 Amount of contribution (\$) \$50.00  
8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code  
4342 Proctor Place  
San Diego, CA 92116

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

9 Principal occupation / Job title (See Instructions)  
Medical Social Worker

10 Employer (See Instructions)  
Scripps Hospice

Date 10/17/2014  
Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hay, John (Mr.)

Amount of contribution (\$) \$100.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
2103 Sharon Lane  
Austin, TX 78703

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

Principal occupation / Job title (See Instructions)  
Managing Partner

Employer (See Instructions)  
The Hay Legal Group PLLC

Date 10/16/2014  
Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Henderson, Kenneth (Mr.)

Amount of contribution (\$) \$150.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
P.O. Box 1413  
Lockhart, TX 78644

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

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
True Blue Pool Service

Date 09/26/2014  
Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Jones, Allan (Mr.)

Amount of contribution (\$) \$20.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
5420 NE 19th Avenue, Unit 8  
Portland, OR 97211

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

Principal occupation / Job title (See Instructions)  
Student

Employer (See Instructions)  
The University of Texas

Date 10/16/2014  
Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Maldonado, Melissa (Ms.)

Amount of contribution (\$) \$50.00  
In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code  
1205 Space Lane  
Austin, TX 78758

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

Principal occupation / Job title (See Instructions)  
Accountant

Employer (See Instructions)  
Ernst and Young

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/5 Report: 7/9	
2 FILER NAME Rangel, Eric (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00001709	
4 Date  09/26/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Maldonado, Michael (Mr.)  6 Contributor address; City; State; Zip Code 12654 Carriage Blvd. San Antonio, TX 78249	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) Accountant		10 Employer (See Instructions) University of Texas, Health Science Center at San Antonio	
Date  09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Metz, Ryan (Mr.)  Contributor address; City; State; Zip Code 281 High Low Drive New Braunfels, TX 78132	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) Self Employed		Employer (See Instructions) Self Employed	
Date  10/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez, Robert (Mr.)  Contributor address; City; State; Zip Code 5218 Pine Place Austin, TX 78744	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) Tech		Employer (See Instructions) Texas Workforce Commission	
Date  09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schatte, Thomas (Mr.)  Contributor address; City; State; Zip Code 156 Spillway Drive Kyle, TX 78640	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) Architectural Intern		Employer (See Instructions) Polinghorn Group Architects	
Date  10/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Timothy (Mr.)  Contributor address; City; State; Zip Code 3403 Santa Monica Austin, TX 78741	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) Senior Software Developer		Employer (See Instructions) Upologix 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.

<b>1 PAGE #</b> Schedule: 1/2 Report: 8/9		<b>2 FILER NAME</b> Rangel, Eric (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00001709	
<b>4 Date</b> 10/02/2014		<b>5 Payee name</b> Kelly Graphics			
<b>6 Amount (\$)</b> \$1,770.62		<b>7 Payee address</b> City; State; Zip Code 1409 Quaker Ridge Drive Austin, TX 78746			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing Literature  <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/01/2014		<b>Payee name</b> Office Depot			
<b>Amount (\$)</b> \$17.31		<b>Payee address</b> City; State; Zip Code 2101 S. Lamar Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper  <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/10/2014		<b>Payee name</b> Office Depot			
<b>Amount (\$)</b> \$16.23		<b>Payee address</b> City; State; Zip Code 2101 S. Lamar Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper  <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/14/2014		<b>Payee name</b> Office Depot			
<b>Amount (\$)</b> \$17.31		<b>Payee address</b> City; State; Zip Code 2101 S. Lamar Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper  <input type="checkbox"/> Check If Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	



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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/2 Report: 9/9		<b>2 FILER NAME</b> Rangel, Eric (Mr.)		<b>3 ACCOUNT # (TEC filers)</b> 00001709	
<b>4 Date</b> 10/16/2014		<b>5 Payee name</b> Office Depot			
<b>6 Amount (\$)</b> \$17.31		<b>7 Payee address</b> City: State: Zip Code 2101 S. Lamar Austin, TX 78704			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/21/2014		<b>Payee name</b> Office Depot			
<b>Amount (\$)</b> \$34.62		<b>Payee address</b> City: State: Zip Code 2101 S. Lamar Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Paper  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/26/2014		<b>Payee name</b> PayPal Fees			
<b>Amount (\$)</b> \$65.20		<b>Payee address</b> City: State: Zip Code Website Website, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - PayPal Fees		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Service Fees  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 10/06/2014		<b>Payee name</b> Thomas, David			
<b>Amount (\$)</b> \$50.00		<b>Payee address</b> City: State: Zip Code Website Austin, TX 78701			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Photography		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	