

# 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) 12121212	2 PAGE # 1 of 7
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Edwin	MI
	NICKNAME Ed	LAST English	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	12704 Europa Lane Austin, TX 78727-5131		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Edwin	MI
	NICKNAME Ed	LAST English	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	12704 Europa Lane Austin, TX 78727-5131		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	835-0000	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input 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 checked="" 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
	09	26	2014
THROUGH			
10/25/2014			
10 ELECTION	ELECTION DATE		
	Month	Day	Year
		ELECTION TYPE	
		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		
		12 OFFICE SOUGHT (if known)	
		Austin City Council District 7	
<b>GO TO PAGE 2</b>			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

13 C/OH NAME English, Edwin (Mr.)

14 ACCOUNT # (Ethics Commission filers)  
12121212

### 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

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

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 \$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 2,862.00

### EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$ 0.00

4. TOTAL POLITICAL EXPENDITURES \$ 1,095.01

### CONTRIBUTION BALANCE

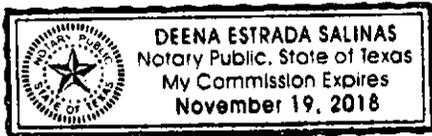
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 8,097.02

### OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 10,000.00

### 17 AFFIDAVIT

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



*[Handwritten Signature]*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ed English, this the 27th day of October, 2014, to certify which, witness my hand and seal of office.

*[Handwritten Signature]*  
Signature of officer administering oath

Deena Estrada Salinas  
Print name of officer administering oath

Notary Public  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/4 Report: 3/7	
<b>2</b> FILER NAME English, Edwin (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 12121212	
<b>4</b> Date  10/13/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caruth, Jim  <b>6</b> Contributor address; City; State; Zip Code 1811 Santa Clara St. Austin, TX 78757	<b>7</b> Amount of contribution (\$)  \$100.00	<b>8</b> In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>9</b> Principal occupation / Job title (See Instructions)		<b>10</b> Employer (See Instructions)	
<b>Date</b>  10/21/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Celko, Joe  <b>Contributor address; City; State; Zip Code</b> 4301 Kilgore Lane Austin, TX 78727	<b>Amount of contribution (\$)</b>  \$25.00	<b>In-kind contribution description (if applicable)</b>
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/17/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Cherry, Faith  <b>Contributor address; City; State; Zip Code</b> 11817 Carshalton Dr. Austin, TX 78758	<b>Amount of contribution (\$)</b>  \$17.00	<b>In-kind contribution description (if applicable)</b>
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/25/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Foster, Lynn  <b>Contributor address; City; State; Zip Code</b> 12008 Saxony Lane Austin, TX 78727	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/10/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Giraldo, Ivan and Mary  <b>Contributor address; City; State; Zip Code</b> 70 Twin Ridge Parkway Round Rock, TX 78664	<b>Amount of contribution (\$)</b>  \$700.00	<b>In-kind contribution description (if applicable)</b>
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
<b>Principal occupation / Job title (See Instructions)</b> Landscaping		<b>Employer (See Instructions)</b> Clean Scapes	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/4 Report: 4/7	
2 FILER NAME English, Edwin (Mr.)		3 ACCOUNT # (Ethics Commission filers) 12121212	
4 Date 10/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gordon, J. Spencer ..... 6 Contributor address; City; State; Zip Code 3301 Spaniel Dr. Austin, TX 78759	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Home Builder		10 Employer (See Instructions) Self Employed	
4 Date 10/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gore, Debra ..... 6 Contributor address; City; State; Zip Code 4825 Eagle Feather Dr. Austin, TX 78735	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Teacher		10 Employer (See Instructions) Regents School	
4 Date 10/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, James ..... 6 Contributor address; City; State; Zip Code 3700 Thompson St. Austin, TX 78702	7 Amount of contribution (\$) \$155.00	8 In-kind contribution description (if applicable) Venue and beverages
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
4 Date 10/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, William ..... 6 Contributor address; City; State; Zip Code 1804 Cedar Ridge Dr. Austin, TX 78741	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Oil and Gas Business		10 Employer (See Instructions) Self employed	
4 Date 10/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matheme, Damien ..... 6 Contributor address; City; State; Zip Code 11727 Sterling Panorama Austin, TX 78738	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Finance Manager		10 Employer (See Instructions) Clean Scapes	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1 PAGE #</b> Schedule: 3/4 Report: 5/7	
<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 12121212	
<b>4 Date</b>  10/17/2014	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Messier, Linda  <b>6 Contributor address; City; State; Zip Code</b> 11610 Bittern Hollow Austin, TX 78758	<b>7 Amount of contribution (\$)</b>  \$30.00	<b>8 In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  10/01/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Statz, Joyce  <b>Contributor address; City; State; Zip Code</b> 5305 Valburn Circle Austin, TX 78731	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/17/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Strawmyer, Jeff  <b>Contributor address; City; State; Zip Code</b> 11818 Carshalton Dr. Austin, TX 78758	<b>Amount of contribution (\$)</b>  \$25.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/05/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas, Lisa  <b>Contributor address; City; State; Zip Code</b> 1211 Richcreek Rd. Austin, TX 78757	<b>Amount of contribution (\$)</b>  \$60.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/21/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Wampler, Susan  <b>Contributor address; City; State; Zip Code</b> 11715 Barchetta Dr. Austin, TX 78758	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>          (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1 PAGE #</b> Schedule: 4/4 Report: 6/7	
<b>2 FILER NAME</b> English, Edwin (Mr.)		<b>3 ACCOUNT #</b> (Ethics Commission filers) 12121212	
<b>4 Date</b>  10/20/2014	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Westbrook, Bob  ..... <b>6 Contributor address; City; State; Zip Code</b> 7106 Sungate Austin, TX 78731	<b>7 Amount of contribution (\$)</b>  \$100.00	<b>8 In-kind contribution description (if applicable)</b>     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>9 Principal occupation / Job title (See Instructions)</b>		<b>10 Employer (See Instructions)</b>	
<b>Date</b>  09/26/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Wheelus, Daniel  ..... <b>Contributor address; City; State; Zip Code</b> 3103 Bee Caves Rd. Austin, TX 78746	<b>Amount of contribution (\$)</b>  \$100.00	<b>In-kind contribution description (if applicable)</b>     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  09/28/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Wilkes, John  ..... <b>Contributor address; City; State; Zip Code</b> 11505 Wiginton Austin, TX 78758	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	
<b>Date</b>  10/06/2014	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Sherran  ..... <b>Contributor address; City; State; Zip Code</b> 8601 Donna Gail Dr. Austin, TX 78757	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>     (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>	

# 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: 1/1 Report: 777	<b>2 FILER NAME</b> English, Edwin (Mr.)	<b>3 ACCOUNT # (TEC filers)</b> 12121212
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<b>4 Date</b> 10/21/2014	<b>5 Payee name</b> Ace Printing
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<b>6 Amount (\$)</b> \$335.13	<b>7 Payee address</b> City: State: Zip Code 7807 Doncaster Austin, TX 78745
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<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"/> Yard Signs  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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<b>Date</b> 10/23/2014	<b>Payee name</b> Azul Strategies
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<b>Amount (\$)</b> \$682.88	<b>Payee address</b> City: State: Zip Code 1802 Ann Arbor Austin, TX 78704
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising assistance and advice  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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<b>Date</b> 10/03/2014	<b>Payee name</b> U.S. Postal Service
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<b>Amount (\$)</b> \$77.00	<b>Payee address</b> City: State: Zip Code 1822 W. Braker Austin, TX 78758
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<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Fees	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> P.O. Box Fee  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	<b>Candidate / Officeholder name</b>	<b>Office sought:</b>	<b>Office held:</b>
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