

# 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)	2 Total pages filed: 18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr	FIRST Edward	MI A.
	NICKNAME Wally	LAST Reyes	SUFFIX JR.
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; 5609 Honeybee Bend	APT / SUITE #; Austin	CITY; TX
	STATE; TX	ZIP CODE 78744	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (512)	PHONE NUMBER 779-5575	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Ms.	FIRST Delores	MI E.
	NICKNAME Moreno	LAST	SUFFIX
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 6812 Sunderland	APT / SUITE #; Austin	CITY; TX
	STATE; TX	ZIP CODE 78747	
8 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 351-0723	EXTENSION
9 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)		
10 PERIOD COVERED	Month 9	Day 26	Year 14
	THROUGH		Month 10
11 ELECTION	ELECTION DATE Month 11		Day 04
	Year 2014		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) District 2

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# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

**14 C/OH NAME** Edward Reyes
**15 ACCOUNT #** (Ethics Commission Filers)

**16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)**

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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

**17 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)**
**\$** 990.00
**EXPENDITURE  
TOTALS**
**3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED**
**\$** 0.00
**4. TOTAL POLITICAL EXPENDITURES**
**\$** 1688.24
**CONTRIBUTION  
BALANCE**
**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD**
**\$** 4.69
**OUTSTANDING  
LOAN TOTALS**
**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD**
**\$** 0.00
**18 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.



AFFIX NOTARY STAMP/ SEAL ABOVE

Edward Reyes  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Edward Reyes, this the 28<sup>th</sup> day of October, 20 14, to certify which, witness my hand and seal of office.

Ann Franklin  
Signature of officer administering oath

Ann Franklin  
Printed 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 Total pages Schedule A: <u>1</u>	
2 FILER NAME <u>Edward Reyes</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>9/30/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Ernesto Calderon</u> 6 Contributor address; City; State; Zip Code <u>7309 Shadywood Dr.</u> <u>Austin TX 78745</u>	7 Amount of contribution (\$) <u>200.00</u>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) <u>Retired Airforce</u>		10 Employer (See Instructions) <u>Retired</u>	
Date <u>10/03/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Rhett Dawson</u> Contributor address; City; State; Zip Code <u>5083 E 16th St Austin TX 78703</u>	Amount of contribution (\$) <u>250.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Retired</u>		Employer (See Instructions) <u>NFL</u>	
Date <u>10/06/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Normy Lopez</u> Contributor address; City; State; Zip Code <u>4905 Brassfield Austin TX 78744</u>	Amount of contribution (\$) <u>350.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Resturant</u>		Employer (See Instructions) <u>Self</u>	
Date <u>10/06/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Angelica Noyola</u> Contributor address; City; State; Zip Code <u>620 Montopolis Austin TX 78741</u>	Amount of contribution (\$) <u>70.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>10/16/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Joette Calderon</u> Contributor address; City; State; Zip Code <u>705 Castle Ridge Austin TX 78746</u>	Amount of contribution (\$) <u>120.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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</b> Total pages Schedule F: 1 of 15		<b>2</b> FILER NAME Edward Reyes		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 9/26/14		<b>5</b> Payee name TXACO			
<b>6</b> Amount (\$) 20.69		<b>7</b> Payee address; City; State; Zip Code Austin TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Travel In District		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Gas <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/29/14		Payee name Walmart			
Amount (\$) 40.80		Payee address; City; State; Zip Code S. Burnhite Austin TX 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel in District		Description (If travel outside of Texas, complete Schedule T) Gas <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/29/14		Payee name Mr. Gattis			
Amount (\$) 33.92		Payee address; City; State; Zip Code SouthPark Meadows Austin TX 78748			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Campaign event <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/29/14		Payee name EXxon mobile			
Amount (\$) 24.74		Payee address; City; State; Zip Code Austin TX 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) Gas <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 2 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/29/14		5 Payee name Ampco Product			
6 Amount (\$) 498.00		7 Payee address; City; State; Zip Code Burleson Austin TX 78744			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Exp		(b) Description (If travel outside of Texas, complete Schedule T) Sims <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 9/29/14		Payee name Sonic Dr.			
Amount (\$) 12.93		Payee address; City; State; Zip Code Stessny Austin TX 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Campaign Street Meeting <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 9/30/14		Payee name Monthly Wells Fargo			
Amount (\$) 14.00		Payee address; City; State; Zip Code Wells Fargo Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) Monthly 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 10/01/14		Payee name Casa Moreno's			
Amount (\$) 6.11		Payee address; City; State; Zip Code Burleson Austin TX 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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</b> Total pages Schedule F: 3 of 15		<b>2</b> FILER NAME Edward Reyes		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 10/02/14		<b>5</b> Payee name FDX Finance'd			
<b>6</b> Amount (\$) 10.00		<b>7</b> Payee address; City; State; Zip Code Online			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Advertisment		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Webpayment <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/03/14		<b>Payee name</b> Starbucks			
<b>Amount (\$)</b> 10.00		<b>Payee address; City; State; Zip Code</b> Barwhite Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Food		<b>Description</b> (If travel outside of Texas, complete Schedule T) Meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/03/14		<b>Payee name</b> Casa Morenos			
<b>Amount (\$)</b> 9.04		<b>Payee address; City; State; Zip Code</b> Buckleson Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Food		<b>Description</b> (If travel outside of Texas, complete Schedule T) Meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/03/14		<b>Payee name</b> Fed ex			
<b>Amount (\$)</b> 77.66		<b>Payee address; City; State; Zip Code</b> Barwhite Austin TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Advertise		<b>Description</b> (If travel outside of Texas, complete Schedule T) Flyers <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
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Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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</b> Total pages Schedule F: 4 of 15		<b>2</b> FILER NAME: Edward Byers		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date: 10/06/14		<b>5</b> Payee name: Walmart			
<b>6</b> Amount (\$): 30.11		<b>7</b> Payee address; City; State; Zip Code: Beck White Austin TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) travel		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Car <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date: 10/06/14		Payee name: Jalisco's			
Amount (\$): 52.65		Payee address; City; State; Zip Code: Congress Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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: 10/06/14		Payee name: Rock A Dine			
Amount (\$): 34.00		Payee address; City; State; Zip Code: Manchaca Austin TX 78748			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) 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	
Date: 10/06/14		Payee name: Princess and Moo			
Amount (\$): 16.00		Payee address; City; State; Zip Code: Manchaca Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) 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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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</b> Total pages Schedule F: 5 of 15		<b>2</b> FILER NAME Edward Byes		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 10/04/14		<b>5</b> Payee name Walmart			
<b>6</b> Amount (\$) 39.56		<b>7</b> Payee address; City; State; Zip Code Berwick Austin TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Travel		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Bus <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/06/14		Payee name Walmart			
Amount (\$) 21.61		Payee address; City; State; Zip Code Berwick Austin TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Exp		Description (If travel outside of Texas, complete Schedule T) Bus <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/06/14		Payee name Burger King			
Amount (\$) 22.93		Payee address; City; State; Zip Code Manchaca Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Snack <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/06/14		Payee name Texaco			
Amount (\$) 23.78		Payee address; City; State; Zip Code Manchaca Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) Bus <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
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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 Total pages Schedule F: 6 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/06/14		5 Payee name First Work			
6 Amount (\$) 14.10		7 Payee address; City; State; Zip Code S. 1st Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food		(b) Description (If travel outside of Texas, complete Schedule T) Meeting <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 10/06/14		Payee name 7 Eleven			
Amount (\$) 25.11		Payee address; City; State; Zip Code Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event		Description (If travel outside of Texas, complete Schedule T) Shopping Bus <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 10/06/14		Payee name Market Austin			
Amount (\$) 3.99		Payee address; City; State; Zip Code William Cannon Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event		Description (If travel outside of Texas, complete Schedule T) Supply <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 10/06/14		Payee name Mrs. P's			
Amount (\$) 16.07		Payee address; City; State; Zip Code Congress Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
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Food/Beverage Expense  
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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</b> Total pages Schedule F: 7 of 15		<b>2</b> FILER NAME Edward Reyes		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 10/06/14		<b>5</b> Payee name IBC			
<b>6</b> Amount (\$) 44.00		<b>7</b> Payee address; City; State; Zip Code Mobile Austin TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Event Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Campaign Food <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/06/14		<b>Payee name</b> wells fargo			
<b>Amount (\$)</b> 2.50		<b>Payee address; City; State; Zip Code</b> online Austin TX			
<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) money <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> 10/07/14		<b>Payee name</b> Strong Brew			
<b>Amount (\$)</b> 12.00		<b>Payee address; City; State; Zip Code</b> Burlison Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Event		<b>Description</b> (If travel outside of Texas, complete Schedule T) Beverage <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> 10/07/14		<b>Payee name</b> Taqueria Arrandas			
<b>Amount (\$)</b> 20.62		<b>Payee address; City; State; Zip Code</b> William Cannon Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Food		<b>Description</b> (If travel outside of Texas, complete Schedule T) Meeting <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 8 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/7/14		5 Payee name Starbucks			
6 Amount (\$) 10.00		7 Payee address; City; State; Zip Code Bauwhite Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food		(b) Description (If travel outside of Texas, complete Schedule T) Meeting <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 10/7/14		Payee name Texaco			
Amount (\$) 20.01		Payee address; City; State; Zip Code Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel in District		Description (If travel outside of Texas, complete Schedule T) Gross <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 10/8/14		Payee name Mr. Gattis			
Amount (\$) 30.32		Payee address; City; State; Zip Code Slaughter Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Campaign Meeting <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 10/9/14		Payee name Sandy's Burgers			
Amount (\$) 18.37		Payee address; City; State; Zip Code S. 1st Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 9 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/10/14		5 Payee name BFC			
6 Amount (\$) 27.03		7 Payee address; City; State; Zip Code William Cannon Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food		(b) Description (If travel outside of Texas, complete Schedule T) Meeting <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 10/10/14		Payee name Texaco			
Amount (\$) 8.64		Payee address; City; State; Zip Code Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel		Description (If travel outside of Texas, complete Schedule T) Gas <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 10/14/14		Payee name 7 Eleven			
Amount (\$) 20.00		Payee address; City; State; Zip Code Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel		Description (If travel outside of Texas, complete Schedule T) Gas <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 10/14/14		Payee name Casa Maria			
Amount (\$) 12.26		Payee address; City; State; Zip Code 5.1st Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 10 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/14/14		5 Payee name Walmart			
6 Amount (\$) 5.65		7 Payee address; City; State; Zip Code Bn White Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event		(b) Description (If travel outside of Texas, complete Schedule T) 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 10/14/14		Payee name Loves			
Amount (\$) 16.71		Payee address; City; State; Zip Code Stessney Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event		Description (If travel outside of Texas, complete Schedule T) 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 10/14/14		Payee name Jack in the Box			
Amount (\$) 12.36		Payee address; City; State; Zip Code Slaughter Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting / Block <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 10/14/14		Payee name Sonic Drive In			
Amount (\$) 16.22		Payee address; City; State; Zip Code <del>Stessney</del> Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meet / Block <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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</b> Total pages Schedule F: 11 of 15		<b>2</b> FILER NAME Edward Rye		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 10/14/14		<b>5</b> Payee name Luckies			
<b>6</b> Amount (\$) 42.80		<b>7</b> Payee address; City; State; Zip Code North 35 Austin TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) Event		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Expense / Drink <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/14/14		Payee name wellsfargo			
Amount (\$) 2.50		Payee address; City; State; Zip Code online Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fee		Description (If travel outside of Texas, complete Schedule T) Re <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/14/14		Payee name Whataburger			
Amount (\$) 23.80		Payee address; City; State; Zip Code Oltorf Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meet / Block <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10/14/14		Payee name Starbucks			
Amount (\$) 20.00		Payee address; City; State; Zip Code Burnhake Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 12 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/15/14		5 Payee name Shell			
6 Amount (\$) 12.95		7 Payee address; City; State; Zip Code Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event		(b) Description (If travel outside of Texas, complete Schedule T) 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 10/16/14		Payee name Walmart			
Amount (\$) 30.34		Payee address; City; State; Zip Code Berwick Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel		Description (If travel outside of Texas, complete Schedule T) Gas <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 10/17/14		Payee name CVS			
Amount (\$) 7.57		Payee address; City; State; Zip Code Congress Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event		Description (If travel outside of Texas, complete Schedule T) 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 10/17/14		Payee name Starbucks			
Amount (\$) 6.39		Payee address; City; State; Zip Code Berwick Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 13 of 15		2 FILER NAME Edward Reyes		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/17/14		5 Payee name Austin Parking			
6 Amount (\$) 5.00		7 Payee address; City; State; Zip Code Remy Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event		(b) Description (If travel outside of Texas, complete Schedule T) Discrimination Meeting <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 10/20/14		Payee name Walmart			
Amount (\$) 30.01		Payee address; City; State; Zip Code Bulverde Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Travel		Description (If travel outside of Texas, complete Schedule T) Guns <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 10/20/14		Payee name Joer Bakery			
Amount (\$) 50.88		Payee address; City; State; Zip Code E. 7th St. Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meeting <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 10/20/14		Payee name Burger King			
Amount (\$) 13.46		Payee address; City; State; Zip Code Bulverde Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Campaign/Block <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	

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Consulting Expense  
Event Expense  
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Gift/Awards/Memorials Expense  
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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</b> Total pages Schedule F: 14 of 15		<b>2</b> FILER NAME Edward Reyes		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date 10/20/14		<b>5</b> Payee name T E Leven			
<b>6</b> Amount (\$) 9.92		<b>7</b> Payee address; City; State; Zip Code Manchaca Austin TX			
<b>8</b> PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event		(b) Description (If travel outside of Texas, complete Schedule T) Supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/20/2014		<b>Payee name</b> MWS CAT			
<b>Amount (\$)</b> 10.11		<b>Payee address; City; State; Zip Code</b> Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Event		<b>Description</b> (If travel outside of Texas, complete Schedule T) Supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/20/14		<b>Payee name</b> Whataburger			
<b>Amount (\$)</b> 25.56		<b>Payee address; City; State; Zip Code</b> William Cannon Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Food		<b>Description</b> (If travel outside of Texas, complete Schedule T) Meat/Block <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
<b>Date</b> 10/20/14		<b>Payee name</b> Walmart			
<b>Amount (\$)</b> 30.03		<b>Payee address; City; State; Zip Code</b> Berwick Austin TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See categories listed at the top of this schedule) Travel		<b>Description</b> (If travel outside of Texas, complete Schedule T) Gas <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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 Total pages Schedule F: 15 of 15		2 FILER NAME Edward Regis		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/20/14		5 Payee name Starbucks			
6 Amount (\$) 3.19		7 Payee address; City; State; Zip Code 121 White Austin TX			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Food		(b) Description (If travel outside of Texas, complete Schedule T) Meeting <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 10/20/14		Payee name Jack in the Box			
Amount (\$) 11.17		Payee address; City; State; Zip Code Scuyler Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Meet / Block <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 10/20/14		Payee name Texaco			
Amount (\$) 2.25		Payee address; City; State; Zip Code Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event		Description (If travel outside of Texas, complete Schedule T) 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 10/22/14		Payee name Cassie Morenos			
Amount (\$) 15.82		Payee address; City; State; Zip Code Burleson Austin TX			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food		Description (If travel outside of Texas, complete Schedule T) Melt / Campaign <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	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					