

FORM COR-C/OH

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT # 01111111	2 PAGE # 1 of 12
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3 CANDIDATE/OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Erin	MI	OFFICE USE ONLY			
	NICKNAME	LAST McGann	SUFFIX				
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)				
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit					
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)					
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report					
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year	Legal
	09/26/2014		THROUGH		10/25/2014		Date Processed
							Date Imaged
							Receipt #

FILED IN THE OFFICE OF CITY CLERK  
 ON 10/29/14 AT 11:29 AM  
 BY OF 014 20 14  
 JAMES JONES FOR JAMES JONES  
 CITY CLERK

6 EXPLANATION OF CORRECTION

Added in-kind contribution from James Jones. We did not know at the time of filing Jones made expenditures for a fundraising event.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

**Semiannual reports:** This report is an amendment/correction to a semi-annual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports (excluding semiannual reports):** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

JAIRA JAIMES  
MY COMMISSION EXPIRES  
April 25, 2015

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by Erin McGann this the 29<sup>th</sup> day of October, 2014.

[Signature] Signature of officer administering oath  
Jaira Jaimes Printed name of officer administering oath  
Sms. SA Ben White ASW Title of officer administering oath

Erin McGann [Signature]  
 Signature of Candidate or Officeholder

**Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

<b>The C/OH INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1 ACCOUNT #</b> (Ethics Commission filers) 01111111	<b>2 PAGE #</b> 2 of 12
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR                      FIRST                      MI Ms.    Erin <hr style="border-top: 1px dotted black;"/> NICKNAME                              LAST                              SUFFIX McGann	<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center; margin: 0;"><b>OFFICE USE ONLY</b></p> <p style="font-size: small; margin: 0;">FILED IN THE OFFICE OF THE CITY CLERK</p> <p style="font-size: x-small; margin: 0;">Date Received: 11/29/14 AT 1:29 PM DAY OF NOV 20 14</p> <p style="font-size: x-small; margin: 0;">Date Hand-delivered on:                      Date Postmarked</p> <p style="font-size: x-small; margin: 0;">Receipt #    amount</p> <p style="font-size: x-small; margin: 0;">Date Processed</p> <p style="font-size: x-small; margin: 0;">Date Imaged</p> </div>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:    APT / SUITE #:                      CITY:                      STATE:                      ZIP CODE 2304 S 3rd Street Austin, TX 78704		
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST                      MI Meredith <hr style="border-top: 1px dotted black;"/> NICKNAME                              LAST                              SUFFIX Bryant		
<b>6 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):    APT / SUITE #:                      CITY:                      STATE:                      ZIP CODE 13012 Stillforest St Austin, TX 78729		
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE                      PHONE NUMBER    EXTENSION (512) 577-1528		
<b>8 REPORT TYPE</b>	<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)		
<b>9 PERIOD COVERED</b>	Month                      Day                      Year    Month                      Day                      Year 09/26/2014    THROUGH    10/25/2014		
<b>10 ELECTION</b>	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	
<b>11 OFFICE</b>	OFFICE HELD (if any)	<b>12 OFFICE SOUGHT (if known)</b> Austin City Council District 9	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

13 C/OH NAME McGann, Erin (Ms.)

14 ACCOUNT # (Ethics Commission filers)  
01111111

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	COMMITTEE TYPE	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
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,230.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 775.00
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4. TOTAL POLITICAL EXPENDITURES	\$ 12,316.46
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,190.64
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 15,000.00
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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.

Erin McGann

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 4/12	
2 FILER NAME McGann, Erin (Ms.)		3 ACCOUNT # (Ethics Commission filers) 01111111	
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 of Austin	
Date  09/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hickman, Roger (Mr.)  Contributor address; City; State; Zip Code 4004A Shoal Creek Blvd Austin, TX 78756	Amount of contribution (\$)  \$25.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, James  Contributor address; City; State; Zip Code 3700 Thompson St. Austin, TX 78702	Amount of contribution (\$)  \$155.00	In-kind contribution description (if applicable) Fundraising services (venue & beverages)
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) LVS	
Date  09/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kozinsky, Stanley  Contributor address; City; State; Zip Code 4604 Ave G Austin, TX 78751	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matherne, Damien  Contributor address; City; State; Zip Code 11727 Sterling Panorama Austin, TX 78738	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Cleanscapes	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #

Schedule: 2/2 Report: 5/12

**2** FILER NAME McGann, Erin (Ms.)

**3** ACCOUNT # (Ethics Commission filers)

01111111

**4** Date

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Jare

09/29/2014

**6** Contributor address; City; State; Zip Code  
4316 Scales St  
Austin, TX 78723

**7** Amount of contribution (\$)

\$100.00

**8** In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

**9** Principal occupation / Job title (See Instructions)

**10** Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Smith, Jim

10/18/2014

Contributor address; City; State; Zip Code  
4316 Scales St  
Austin, TX 78723

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Smith-Gray, Sandra

10/12/2014

Contributor address; City; State; Zip Code  
911 E 43rd St  
Austin, TX 78751

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/5 Report: 7/12		<b>2 FILER NAME</b> McGann, Erin (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 01111111	
<b>4 Date</b> 10/07/2014		<b>5 Payee name</b> Anton, Austin			
<b>6 Amount (\$)</b> \$100.00		<b>7 Payee address</b> City; State; Zip Code 4600 Elmont Dr Apt 833 Austin, TX 78741			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:                      Office held:	
<b>Date</b> 10/11/2014		<b>Payee name</b> Bryant, Dylan			
<b>Amount (\$)</b> \$50.00		<b>Payee address</b> City; State; Zip Code 1401 St. Edwards Dr Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:                      Office held:	
<b>Date</b> 10/18/2014		<b>Payee name</b> Bryant, Dylan			
<b>Amount (\$)</b> \$50.00		<b>Payee address</b> City; State; Zip Code 1401 St. Edwards Dr. Austin, TX 78704			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:                      Office held:	
<b>Date</b> 10/10/2014		<b>Payee name</b> Conviction Digital			
<b>Amount (\$)</b> \$125.00		<b>Payee address</b> City; State; Zip Code 919 Congress Ave Austin, TX 78701			
<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"/> Campaign postcard graphics design  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <b>ONLY</b> 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.

<b>1</b> PAGE # Schedule: 2/5 Report: 8/12		<b>2</b> FILER NAME McGann, Erin (Ms.)		<b>3</b> ACCOUNT # (TEC filers) 01111111	
<b>4</b> Date 10/11/2014	<b>5</b> Payee name Jacobs, James				
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services <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 10/18/2014	Payee name Jacobs, James				
Amount (\$) \$50.00	Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741				
<b>8</b> 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"/> Block walking 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 10/22/2014	Payee name KUT				
Amount (\$) \$500.00	Payee address City; State; Zip Code 300 W. Dean Keeton Austin, TX 78712				
<b>8</b> 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"/> Radio 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 10/14/2014	Payee name Long, Zach				
Amount (\$) \$60.00	Payee address City; State; Zip Code 305 E 21st St Austin, TX 78705				
<b>8</b> 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"/> Block walking 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:

# 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</b> PAGE # Schedule: 3/5 Report: 9/12	<b>2</b> FILER NAME McGann, Erin (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 01111111
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<b>4</b> Date 09/30/2014	<b>5</b> Payee name LVS - Local Voice Solutions
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<b>6</b> Amount (\$) \$650.00	<b>7</b> Payee address City; State; Zip Code 3700 Thompson Street Austin, TX 78702
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<b>8</b> 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"/> Campaign coordination and research  <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 10/08/2014	Payee name Mallette, Cindy
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Amount (\$) \$75.00	Payee address City; State; Zip Code 8403-A Fathom Circle Austin, TX 78750
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<b>9</b> 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"/> PR services and media relations  <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 10/17/2014	Payee name Mallette, Cindy
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Amount (\$) \$150.00	Payee address City; State; Zip Code 8403-A Fathom Circle Austin, TX 78750
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<b>10</b> 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"/> PR services and media relations  <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 10/07/2014	Payee name Office Depot
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Amount (\$) \$333.19	Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704
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<b>11</b> 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 campaign flyers and glossy cards  <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	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/5 Report: 10/12	<b>2</b> FILER NAME McGann, Erin (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 01111111
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<b>4</b> Date 10/25/2014	<b>5</b> Payee name Paypal
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<b>6</b> Amount (\$) \$31.53	<b>7</b> Payee address City; State; Zip Code 2211 North First St. San Jose, CA 95131
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<b>8</b> 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"/> Paypal user fees  <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 10/21/2014	Payee name QuikPrint
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Amount (\$) \$7,717.08	Payee address City; State; Zip Code 410 Congress Ave Austin, TX 78701
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<b>9</b> 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"/> Print and mail campaign letters  <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 10/11/2014	Payee name Samilpa, Marcus
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Amount (\$) \$50.00	Payee address City; State; Zip Code 243 Artesian Dr Cedar Creek, TX 78612
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<b>10</b> 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"/> Block walking services  <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 10/18/2014	Payee name Samilpa, Marcus
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Amount (\$) \$50.00	Payee address City; State; Zip Code 243 Artesian Dr Cedar Creek, TX 78612
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<b>11</b> 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"/> Block walking services  <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	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/5 Report: 11/12	<b>2</b> FILER NAME McGann, Erin (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 01111111
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<b>4</b> Date 10/11/2014	<b>5</b> Payee name Tasker, Martin
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<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Block walking services
	<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:
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Date 10/18/2014	Payee name Tasker, Martin
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Amount (\$) \$50.00	Payee address City; State; Zip Code 1901 E. Ben White Blvd Austin, TX 78741
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<b>8</b> 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"/> Block walking 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:
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Date 10/07/2014	Payee name Vistaprint
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Amount (\$) \$461.90	Payee address City; State; Zip Code 95 Hayden Avenue Lexington, MA 02421
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<b>8</b> 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 postcard mailers
	<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 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.

<b>1</b> PAGE # Schedule: 1/1 Report: 12/12		<b>2</b> FILER NAME McGann, Erin (Ms.)		<b>3</b> ACCOUNT # (TEC filers) 01111111	
<b>4</b> Date 10/01/2014	<b>5</b> Payee name HubRunner				
<b>6</b> Amount (\$) \$110.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address City; State; Zip Code 4031 Guadalupe St Austin, TX 78751				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web hosting for campaign website  <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Date 10/06/2014	Payee name LVS - Local Voice Solutions				
Amount (\$) \$710.31 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 3700 Thompson Street Austin, TX 78702				
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"/> Postcard Printing  <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Date 10/01/2014	Payee name Office Depot				
Amount (\$) \$75.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704				
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 flyers for campaign events  <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Date 10/12/2014	Payee name Office Depot				
Amount (\$) \$41.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2101 S Lamar Austin, TX 78704				
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"/> Flyers for campaign events  <input type="checkbox"/> Check if Austin, TX, officeholder living expense		