

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:

4

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Andrew

J

Bucknall

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

5313 Manor Rd. Austin Tx. 78723

☐ change of address

**5 CANDIDATE/
OFFICEHOLDER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 299-0187

**6 CAMPAIGN
TREASURER
NAME**

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Mrs. Leanner

Oakle tree Burnell

**7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)**

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

1207 Greenwood Ave Austin Tx. 78721

**8 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

(512) 299-0187

9 REPORT TYPE
☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(officeholder only)

☐ July 15

☐ 8th day before election

☐ Exceeded \$500
limit

☒ Final report (Attach C/OH - FR)

**10 PERIOD
COVERED**

Month

Day

Year

THROUGH

Month

Day

Year

10 / 26 / 14

11 / 12 / 14

11 ELECTION

Month

ELECTION DATE

Day

Year

ELECTION TYPE

☐ Primary

☐ Runoff

☒ General

☐ Special

11 / 04 / 14

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

City Council District I

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Andrew Bucknall

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

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0

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

\$ 0

EXPENDITURE
TOTALS

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

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 761

CONTRIBUTION
BALANCE

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

\$ 0

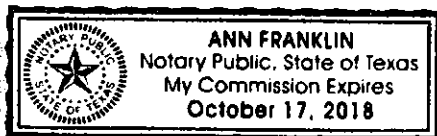
OUTSTANDING
LOAN TOTALS

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

\$ 482

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.



Andrew Bucknall

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Andrew Bucknall, this the 12 day of November, 2014, 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 EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1		2 FILER NAME Andrew Bucknall		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/03/14		5 Payee name Office Depot			
6 Amount (\$) 5.73		7 Payee address; City: State: Zip Code 816 Tirado St. Austin Tx. 78752			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Over head		(b) Description (If travel outside of Texas, complete Schedule T) office Supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 11/03/14		Payee name Go Daddy, com			
Amount (\$) 39.90		Payee address; City: State: Zip Code 5945 Cabot Pkwy. Alpharetta Ga 30005			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T) Web Hosting <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 11/06/14		Payee name City of Austin Electric			
Amount (\$) 47.05		Payee address; City: State: Zip Code P.O. Box 2267, Austin Tx. 78783-2267			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office Over head		Description (If travel outside of Texas, complete Schedule T) electric bill <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 11/12/14		Payee name Andrew Bucknall			
Amount (\$) 688.00		Payee address; City: State: Zip Code 1207 Greenwood Ave Austin Tx. 78721			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Loan Repayment		Description (If travel outside of Texas, complete Schedule T) Loan Repayment. Reimbursement <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	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

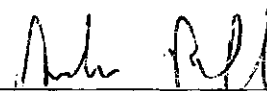
The Instruction Guide explains how to complete this form.
-- Complete only if "Report Type" on page 1 is marked "Final Report" --

1 C/OH NAME

Andrew Bucknall

2 ACCOUNT # (Ethics Commission Filers)**3 SIGNATURE**

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.



Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER-- Complete A & B below *only* if you are not an officeholder. --**A. CAMPAIGN FUNDS**

Check only one:



I do not have unexpended contributions or unexpended interest or income earned from political contributions.



I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

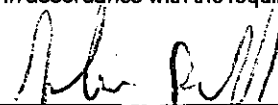
Check only one:



I do not retain assets purchased with political contributions or interest or other income from political contributions.



I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.



Signature of Candidate

5 OFFICEHOLDER-- Complete this section *only* if you are an officeholder --

I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder