Austin, Texas 78711-2070 P.O. Box 12070 Texas Ethics Commission FORM C/OH **CANDIDATE / OFFICEHOLDER** COVER SHEET PG 1 **CAMPAIGN FINANCE REPORT**

The C/OH INSTRUCTION GUIDE explains how to complete this form. 1 ACCOUNT # (Ethics Commission f			2 PAGE#
		09090909	1 of 61
3 CANDIDATE /	MS/MRS/MR FIRST	MI	OFFICE USE ONE
OFFICEHOLDER NAME	Mr. Edward		Date Received
	NICKNAME LAST	SUFFIX	DEC DEC
	Ed Scruggs		
4 CANDIDATE /	ADDRESS / PO BOX; APT / SUITE #;	CITY: STATE: ZIP CODE	8 GETAL
OFFICEHOLDER MAILING			
ADDRESS	PO Box 91763 Austin, TX 78709		Date Hand-delivered or Date Postmarked
Change of Address			上
			Receipt # Amount
5 CAMBAICN	MS/MRS/MR FIRST	MI	Date Processed
5 CAMPAIGN TREASURER	Mr. Carrol	1411	Date Imaged
NAME	NICKNAME LAST	SUFFIX	Bate images
	Nowlin		İ
G CAMPAICN		OUTTE II. OTATE	ZIP CODE
6 CAMPAIGN TREASURER		SUITE #; CITY; STATE;	ZIPCODE
ADDRESS (Residence or business)	6707 Oasis Dr Austin, TX 78749		
7 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
TREASURER PHONE	(512) 288-0781		ĺ
FIONE	(512, 255 572)		
8 REPORT TYPE	January 15 30th day before e	election 🔀 Runoff	15th day after campaign treasurer
			appointment (officeholder only)
	July 15 Sth day before ek	ection Exceeded \$500 limit	Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year	Month Day	Year
OOVENED	тн	HROUGH	
	10/26/2014	12/06/20	014
10 ELECTION	ELECTION DATE ELECTION	N TYPE	
	Month Day Year Pril	mary X Runoff	General Special
	12/16/2014		_
11 OFFICE	OFFICE HEI Different	12 OFFICE SOUGHT (If known	
I OFFICE	OFFICE HELD (if any)	Austin City Council	i
		, tasiii sity sourioii	
		L	
	GO TO	O PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

SUPPORT &	IUIALS		COVER	R SHEET PG 2
13 C/OH NAME Scrug	gs, Edward (Mr.)		14 ACCOUNT # 09090909	(Ethics Commission filers)
15 NOTICE FROM This box is for notice of political expenditures by political committees to support the candidate / of have been made without the candidate's or officeholder's knowledge or consent. Candidates and office				
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Austinites for Equity		
	X GENERAL	COMMITTEE ADDRESS 1812 Centre Creek Dr, Ste 310 Austin, TX 78754		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Kirfman, Jack (Mr.)		· · · · · · · · · · · · · · · · · · ·
		COMMITTEE CAMPAIGN TREASURER ADDRESS 1812 Centre Creek Dr. Ste 310 Austin, TX 78754		
6 CONTRIBUTION TOTALS		I POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN SS, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	207.00
	1	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	37,151.28
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZ	ED \$	0.00
	4. TOTAL	POLITICAL EXPENDITURES	\$	42,302.09
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	13,134.45
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	26,263.55
7 AFFIDAVIT		I swear, or affirm, under penalistrue and correct and include me under Title 15, Election Co	s all information requ	
AFFIX NOTARY S Sworn to and subscrib	STAMP / SEAL ABOV	/E	Candidate or Officeh	nolder day
of <u>December</u> , 2	20 14 , to ce	rtify which, witness my hand and seal of office. Cado Canhell Print name of officer administering oath		CARLO CAMPBEL Notary Public STATE OF TEXAS

CANDIDATE / OFFICEHOLDER REPORT:

P.O.Box 12070

FORM C/OH

NOTICE FROM	POLITCAL COI	MMITTEE(S)		ADDENDUM
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Page 3 of 61
C/OH NAME Scruggs	s, Edward (Mr.)		-	ACCOUNT # (Ethics Commission filers) 09090909
17 NOTICE FROM POLITICAL	have been made with	tice of political expenditur out the candidate's or offi- y receive notice of such e	ceholder's knowledge or consent. Candidates	didate / officeholder. These expenditures may s and officeholders are required to report this
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Sierra Club Political Committee of	Texas
	X GENERAL	COMMITTEE ADDRESS	615 Willow San Antonio, TX 78202	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Gonzalez, Hector J (Mr.)	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	615 Willow San Antonio, TX 78202	
NOTICE FROM POLITICAL	have been made with	I dice of political expenditur nout the candidate's or offi by receive notice of such e	ceholder's knowledge or consent. Candidate:	didate / officeholder. These expenditures may s and officeholders are required to report this
COMMITTEE(S)	СОММЛТЕЕ ТУРЕ	COMMITTEE NAME	Travis County Democratic Party	
	X GENERAL	COMMITTEE ADDRESS	PO Box 684263 512-477-7500 Austin, TX 78768	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	PO Box 684263 Austin, TX 78768	··········
		l		
		<i>)</i>		
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	The Instruction	อง Guide explains how to con	nplete this form.		1 PAGE# Schedule: 1/	45 Report: 4/61		
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor AFSCME People	☑ out-of-state PAC (ID#	<u>(C00011114</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/17/2014	6 Contributor address; 1625 L Street, NW Washington, DC 20036	City; State; Zip Code		\$350.00	1 		
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	nation / Job title (See Instruction	ns)	10 Employer (See In	structions)			
	Date	Full name of contributor Albert, David (Mr.)	☐ out-of-state PAC (ID#	<i>y</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/13/2014	Contributor address; 1700 Burton Dr # 158 Austin, TX 78741	City; State; Zip Code		\$350.00	! [
ĺ					(If travel outside of	Texas, complete Schedule T)		
	Principal occup	oation / Job title (See Instruction	ns)	Employer (See In	structions)			
	Date	Full name of contributor Albin, Andy (Mr.)	out-of-state PAC (ID#	")	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/03/2014	Contributor address; 8200 Ganttcrest Dr Austin, TX 78749	City; State; Zip Code		\$50.00	1 1		
					(if travel outside of	Texas, complete Schedule T)		
	Principal occup Marketing	pation / Job title (See Instruction	ns)	Employer (See In BGK Architects				
	Date	Full name of contributor Anderson, Greg (Mr.)	ut-of-state PAC (ID	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/09/2014	Contributor address; 2235 East 6th St # 320 Austin, TX 78702	City; State; Zip Code		\$50.00	 		
			<u> </u>		J .	Texas, complete Schedule T)		
	Principal occup	oation / Job title (See Instructio	ns)	Employer (See In	nstructions)			
	Date	Full name of contributor Andries, Eva (Ms.)	out-of-state PAC (ID/	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/24/2014	Contributor address; 5209 Cloudcroft Dr Austin, TX 78749	City; State; Zip Code		\$200.00	! 		
					(If travel outside of	l Texas, complete Schedule T)		
	Principal occup Retired	L pation / Job title (See Instructio	ns)	Employer (See In Retired	<u>. L</u>			

POLITICAL CONTRIBUTIONS

P.O.Box 12070

	OTHER	THAN PLEDGES OR LOAD	NS .		
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 2/	45 Report: 5/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Arnold, Robin (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/11/2014	6 Contributor address; City; State; Zip Code 5328 Austral Loop Austin, TX 78739		\$100.00	! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Educator	nation / Job title (See Instructions)	10 Employer (See In Austin ISD	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Ashley, Vicki (Ms.)	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 5427 Austral Loop Austin, TX 78739-1716		\$200.00	
					Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Travis County	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/26/2014	Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln Austin, TX 78731-4049		\$5.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/26/2014	Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln Austin, TX 78731-4049		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur Attorney	pation / Job title (See Instructions)	Employer (See in	structions)	_
	Date	Full name of contributor out-of-state PAC (ID# Austin Travis Co EMS Employee Assoc PAC)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 5817 Wilcab Rd Ste 3 Austin, TX 78721		\$350.00	i
				(If traval autaids at	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See In		i icado, complete schedule ()
	, intopul occup	second and too monadiate)	cinprojor (ood iii	on deciding	

	The Instruction	אס Guide explains how to comp	plete this form.		1 PAGE# Schedule: 3/	45 Report: 6/61		
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor Ayres, Bob (Mr.)	☐ out-of-state PAC (ID#	"	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/29/2014	6 Contributor address; 2408 Keating Ln Austin, TX 78703	City; State; Zip Code		\$350.00	 		
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instruction	s)	10 Employer (See In	structions)			
	Date	Full name of contributor Ayres, Margy (Ms.)	☐ out-of-state PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/29/2014	Contributor address; 2408 Keating Ln Austin, TX 78703	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	 		
		·			,	Texas, complete Schedule T}		
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	structions)			
	Date	Full name of contributor Baird, Charlie (Mr.)	out-of-state PAC (ID/	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/03/2014	Contributor address; 6116 Pebble Garden Ct Austin, TX 78739	City; State; Zip Code		\$350.00	1 1 1		
					(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instruction	s)	Employer (See In Baird and Farre	structions)			
	Date	Full name of contributor Baker, Roger (Mr.)	ut-of-state PAC (ID	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/24/2014	Contributor address; 1303 Bentwood Rd Austin, TX 78722	City; State; Zip Code		\$200.00	 		
					(If travel outside of	f Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	structions)			
	Date	Full name of contributor Basciano, Joyce (Ms.)	☐ out-of-state PAC (IDa)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/12/2014	Contributor address; 1907 W 34th St Austin, TX 78703	City; State; Zip Code		\$100.00	! !		
1					(If traval autoids =	f Texas, complete Schedule T)		
-	Principal occur	pation / Job title (See Instruction	s)	Employer (See In	1	i rexes, complete Schedule 1)		
	Homemaker	And the state of t	~,	Empoyor (coo iii	20.00.07			

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 4/4	45 Report: 7/61			
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Basciano, Joyce (Ms.)	')	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	12/02/2014	6 Contributor address; City; State; Zip Code 1907 W 34th St Austin, TX 78703		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/25/2014	Contributor address; City; State; Zip Code 2503 Flora Cove Austin, TX 78746		\$100.00	 			
		Austin, 17.70740		Ut trough autaida af	Texas, complete Schedule T)			
<u> </u>	Drivers of accus	otion Lightille (Con Instructions)	Employer (See In		Texas, complete schedule 1)			
	Telecom	ation / Job title (See Instructions)	TDI					
	Date	Full name of contributor	; }	Amount of contribution (\$)	In-kind contribution description (if applicable)			
ĺ	11/05/2014	Contributor address; City; State; Zip Code 5803 Wagon Train Rd Austin, TX 78749		\$20.00	[[-			
		Adolis, TX 70170		(If trave) outside of	Texas, complete Schedule T)			
	Principal occup Computer Illu	ation / Job title (See Instructions) strator	Employer (See In University of Te					
⊨	D-1-	Edit		Amount of	In-kind contribution			
	Date	Full name of contributor ut-of-state PAC (ID# Beaver, Becky (Ms.)	/)	contribution (\$)	description (if applicable)			
	11/05/2014	Contributor address; City; State; Zip Code 816 Congress Ave., Ste 1600 Austin, TX 78701		\$350.00	i 			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)				
-								
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/18/2014	Contributor address; City; State; Zip Code 7314 Carver Ave		\$300.00	! !			
		Austin, TX 78752-2722			· ·			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Auto Mechan	ation / Job title (See Instructions) ic	Employer (See In Princess Auto	structions)				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 5/4	45 Report: 8/61			
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Berkel, Suzanne L (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	12/01/2014	6 Contributor address; City; State; Zip Code 4405 Sinclair Ave Austin, TX 78756-3220		\$50.00	 			
				l.	Texas, complete Schedule T)			
9	Principal occup	etion / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/06/2014	Contributor address; City; State; Zip Code 10812 Redmond Rd Austin, TX 78739		\$100.00	; 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	eation / Job title (See Instructions)	Employer (See In					
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/24/2014	Contributor address; City; State; Zip Code 1801 Lavaca St Apt 8L Austin, TX 78701-1312		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable) Food & Beverages from			
	12/02/2014	Contributor address; City; State; Zip Code 5000 Woodcreek Rd Austin, TX 78749		\$219.28	HEB & Randall's for fund raising event 12-2-14.			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	estructions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	12/02/2014	Contributor address; City; State; Zip Code 10809 Capstone Dr Austin, TX 78739		\$100.00	i ! !			
					·			
L	Dringing Language	potion / Joh tillo (Soo Instructions)	Employer (Con In	<u> 1. i,</u>	Texas, complete Schedule T)			
	ennopal occup	ation / Job title (See Instructions)	Employer (See Ir	iau deliona)				

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	The Instruction	ON GUIDE explains how to comp	olete this form.		1 PAGE# Schedule: 6/4	45 Report: 9/61
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor Bower, Douglas (Mr.)	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/14/2014	6 Contributor address; (6916 Larue Belle Cv Austin, TX 78739-2067	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Engineer	pation / Job title (See Instructions	5)	10 Employer (See In Silicon Labs	structions)	
	Date	Full name of contributor Boyt, Betsy (Ms.)	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; (7606 Grove Crest Circle Austin, TX 78736	City; State; Zip Code		\$50.00	,
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	pation / Job title (See Instructions	s)	Employer (See In Retired	structions)	
	Date	Full name of contributor Boyt, Betsy (Ms.)	☐ out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
ļ	12/02/2014	Contributor address; 7606 Grove Crest Circle Austin, TX 78736	City; State; Zip Code		\$50.00	1 1 1
1					(If travel outside of	Texas, complete Schedule T)
-	Principal occup Retired	pation / Job title (See Instructions	s)	Employer (See In Retired	estructions)	
	Date	Full name of contributor Brashear, Don (Mr.)	☐ out-of-state PAC (ID#	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/07/2014	Contributor address; 222 Butterfield Rd San Anselmo, CA 94960	City; State; Zip Code		\$100.00	1 1 1
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired Opth	I pation / Job title (See Instructions almologist	s)	Employer (See In Retired	<u> </u>	
 	Date	Full name of contributor Brim, Jay (Mr.)	☐ out-of-state PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/23/2014	Contributor address; 1309 Lost Creek Blvd Austin, TX 78746	City; State; Zip Code		\$100.00	1 1 1
					(If travel outside of	Texas, complete Schedule T)
r	Principal occur	pation / Job title (See Instructions	s)	Employer (See In	estructions)	
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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 7/4	15 Report: 10/61				
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)				
4	Date	5 Full name of contributor ut-of-state PAC (IDA Broll, Lorraine (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
	11/09/2014	6 Contributor address; City; State; Zip Code 6104 Roxbury Ln Austin, TX 78739		\$200.00] 				
				(If travel outside of	Texas, complete Schedule T)				
9	Principal occup Retired Psych	ation / Job title (See Instructions) nologist	10 Employer (See In Retired	structions)					
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	10/31/2014	Contributor address; City; State; Zip Code 5103 Lea Cv Austin, TX 78731		\$50.00	1 				
				(15 h)	Texas, complete Schedule T)				
-	Principal occur	ation / Job title (See Instructions)	Employer (See In:	`	Texas, complete schedule 1)				
	-ппорагоссир	audit 7 Job tide (See Instituctions)	Employer (See in	saucions)					
	Date	Full name of contributor ut-of-state PAC (IDa Brooks, Jenna (Ms.)	;)	Amount of contribution (\$)	in-kind contribution description (if applicable)				
	11/19/2014	Contributor address; City; State; Zip Code 7167 Blackwood Dr Dallas, TX 75231		\$350.00	 				
		i			Texas, complete Schedule T)				
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)					
	Date	Full name of contributor	[†])	Amount of contribution (\$)	In-kind contribution description (if applicable)				
		Bulla, Dale (Mr.)	•	Contribution (#)	description (ii applicable)				
	11/09/2014	Contributor address; City; State; Zip Code 7202 Foxtree Cove Austin, TX 78750		\$20.00	 -				
		,		(If travel outside of	Texas, complete Schedule T)				
	Principal occur	nation / Job title (See Instructions)	Employer (See In	<u> </u>	rexas, complete senegale 1)				
	Retired		Retired	,					
	Date	Full name of contributor out-of-state PAC (ID# Bullington, Holly (Ms.)	})	Amount of contribution (\$)	In-kind contribution description (if applicable)				
	12/06/2014	Contributor address; City; State; Zip Code 10517 Walpole Ln Austin, TX 78739		\$50.00	 				
				(li temunt mutažde -=	Toyon complete Cabadula 7				
\vdash	Principal case:	ention / Joh title (See Instructions)	Employer (See In		Texas, complete Schedule T)				
	Accounting	ation / Job title (See Instructions)	Apple, Inc.	actuctions)					

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	The Instruction	on Guide explains how to com	plete this form.		1 PAGE#	45 Report: 11/61
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor Bunch, William (Mr.)	☐ out-of-state PAC (ID#	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; 1307 Oxford Ave Austin, TX 78704	City; State; Zip Code		\$350.00	
9	Principal occup Attorney	ation / Job title (See Instruction	s)	10 Employer (See In Save Our Sprin	structions)	Texas, complete Schedule T)
	Date	Full name of contributor Burke, Cecelia (Ms.)	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; 6500 Santolina Cv Austin, TX 78731	City; State; Zip Code		\$50.00	! []
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	nation / Job title (See Instruction	s)	Employer (See In N/A	structions)	
	Date	Full name of contributor Butts, David J (Mr.)	☐ out-of-state PAC (ID#	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; 1914 Patton Ln Austin, TX 78723	City; State; Zip Code		\$350.00	
_	Principal occur	pation / Job title (See Instruction	is)	Employer (See In	<u>L'</u>	Texas, complete Schedule T)
	Political Cons		,			
	Date	Full name of contributor Byrne, Daniel H (Mr.)	ut-of-state PAC (ID)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/16/2014	Contributor address; 804 Edgecliff Ter Austin, TX 78704	City; State; Zip Code		.\$100.00	
L	Principal occur	pation / Job title (See Instruction	(2)	Employer (See In	<u>F. '</u>	Texas, complete Schedule T)
	Attorney	Mation 7 and time (See Instruction			ead & Harrison, Pl	LLC
	Date	Full name of contributor Catania, Anthony (Mr.)	out-of-state PAC (ID	,)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; 7501 Dawn Hill Circle Austin, TX 78736	City; State; Zip Code		\$200.00	
L				, ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;; ;;	1 '	Texas, complete Schedule T)
	Principal occur	eation / Job title (See Instruction	IS)	Employer (See In	nstructions)	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 9/	45 Report: 12/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission tilers)
4	Date	5 Full name of contributor ut-of-state PAC (ID: Cespedes, Carol (Ms.))	7 Amount of contribution (\$)	l 8 In-kind contribution description (if applicable)
	11/13/2014	6 Contributor address; City; State; Zip Code 7300 Callbram Ln Austin, TX 78736		\$100.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Tour Operato	ation / Job title (See Instructions) r	10 Employer (See In Halintours, Inc.	structions)	
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; City; State; Zip Code 7300 Callbram Ln Austin, TX 78736		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
-	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete senedate ()
	Tour Operato	r	Halintours, Inc.	,	
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code 1905 Nueces St # 403 Austin, TX 78705		\$20.00	! ! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/06/2014	Contributor address; City; State; Zip Code 3117 Festus Dr Austin, TX 78748		\$50.00	! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	1 .	Texas, complete schedule 1)
	Engineer		State of Texas	, 	
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code PO Box 144542 Austin, TX 78714-4542		\$300.00	
				(If travel outside of	' Texas, complete Schedule T)
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	
	Driver		Lone Star Cab	,	

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	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 10	/45 Report: 13/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor out-of-state PAC (ID# Clark, Colin (Mr.)	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/02/2014	6 Contributor address; City; State; Zip Code 302 W Johanna St Austin, TX 78704		\$250.00	l ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In None	structions)	
	Date	Full name of contributor out-of-state PAC (ID# Clarke, Linda (Ms.)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 5307 Badger Bend Austin, TX 78749		\$50.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete constant of E.
	7 11101124 00001	and the coordinates and the coordinates are considered as the coordinates	277,210,701,1000 111		
	Date	Full name of contributor out-of-state PAC (ID# Clarke, Linda (Ms.)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 5307 Badger Bend Austin, TX 78749		\$50.00	! ! !
				<u> </u>	Texas, complete Schedule T)
	Principal occur	oation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/30/2014	Contributor address; City; State; Zip Code 4325 Triboro Trl Austin, TX 78749		\$350.00	
ľ		,		(If travel cuteide of	Texas, complete Schedule T)
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	•	Texas, complete schedule 1)
	Attorney			ct Attorney's Offic	e .
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; City; State; Zip Code 3306 Gentry Dr Austin, TX 78746-5507		\$50.00	; []
1				(If traval autoids =4	Texas, complete Schedule T)
<u> </u>	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete schedule 1)
	Insurance Ag		Mutual of Omat		

OTHER THAN I LEBALO ON LOANS							
The Instruction Guide explains how to complete this form.	1 PAGE # Schedule: 11/45 Report; 14/61						
2 FILER NAME Scruggs, Edward (Mr.)	3 ACCOUNT # (Ethics Commission filers) 09090909						
4 Date 5 Full name of contributor ☐ out-of-state PAC (ID Cofer, Rick (Mr.)	#) 7 Amount of 8 In-kind contribution contribution (\$) description (it applicable)						
11/13/2014 6 Contributor address; City; State; Zip Code 507 Pressler St. # 4132 Austin, TX 78703	\$100.00						
	(If travel outside of Texas, complete Schedule T)						
Principal occupation / Job title (See Instructions) Lawyer	10 Employer (See Instructions) Travis County						
Date Full name of contributor ut-of-state PAC (ID Collier, Bruce E (Mr.)	#) Amount of In-kind contribution contribution (\$) description (if applicable)						
12/02/2014 Contributor address; City; State; Zip Code 7116 Wandering Oak Rd Austin, TX 78749	\$200.00						
	(If travel outside of Texas, complete Schedule T)						
Principal occupation / Job title (See Instructions) Owner	Employer (See Instructions) Edmis Accounting						
Date Full name of contributor uut-of-state PAC (ID Collier-Brown, Carrie (Ms.)	#) Amount of in-kind contribution contribution (\$) description (if applicable)						
11/09/2014 Contributor address; City; State; Zip Code 9517 Bungalow Ln Austin, TX 78749	\$200.00						
	(If travel outside of Texas, complete Schedule T)						
Principal occupation / Job title (See Instructions) Attorney	Employer (See Instructions) Winstead PC						
Date Full name of contributor uut-of-state PAC (ID Collier-Brown, Carrie (Ms.)	#) Amount of In-kind contribution contribution (\$) description (if applicable)						
12/03/2014 Contributor address; City; State; Zip Code 9517 Bungalow Ln Austin, TX 78749	\$150.00						
	(If travel outside of Texas, complete Schedule T)						
Principal occupation / Job title (See Instructions)	Employer (See Instructions)						
Attorney	Winstead PC						
Date Full name of contributor ☐ out-of-state PAC (ID Colvin, Barbara J (Ms.)	#) Amount of In-kind contribution contribution (\$) description (if applicable)						
11/24/2014 Contributor address; City; State; Zip Code 5332 Moon Shadow Dr Austin, TX 78735	\$100.00						
	(If travel outside of Texas, complete Schedule T)						
Principal occupation / Job title (See Instructions) Retired - Attorney	Employer (See Instructions) Retired						

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	The Instruction	N Guide explains how to complete this form.		1 PAGE# Schedule: 12	2/45 Report: 15/61			
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT# 09090909	(Ethics Commission filers)			
4	Date	5 Full name of contributor	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	11/25/2014	6 Contributor address; City; State; Zip Code 7505 Covered Bridge Dr Austin, TX 78736		\$50.00	! ! !			
	•			(if travel outside of	Texas, complete Schedule T)			
9	Principal occup Attorney	nation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	<u>')</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/28/2014	Contributor address; / City; State; Zip Code 9101 Heiden Ln Austin, TX 78749		\$200.00	 			
				(If travel outside of	Texas, complete Schedule T)			
\vdash	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	 			
	Substitute Te	acher	Austin ISD					
	Date	Full name of contributor	! <u>`</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
•	11/20/2014	Contributor address; City; State; Zip Code 6206 Myra Ct Austin, TX 78749-1652		\$100.00	<u> </u>			
				-	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/26/2014	Contributor address; City; State; Zip Code 1110 W 7th St Austin, TX 78703		\$100.00	! ! !			
				`	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/17/2014	Contributor address; City; State; Zip Code 1419 Preston Ave Austin, TX 78703-1901		\$200.00				
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete solicitude 1)			
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	The Instruction	N Guide explains how to complete this form.			1 PAGE# Schedule: 13	/45 Report: 16/61		
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-slate in Crow, Dan (Mr.)	PAC (ID#	()	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/12/2014	6 Contributor address; City; State; Zi 2803 Down Cove Austin, TX 78704	p Code		\$100.00	[. [
					(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)		10 Employer (See In Self-Employed	<u> </u>			
	Dale	Full name of contributor ut-of-state f Crowley, Beryl (Ms.)	PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/30/2014	Contributor address; City; State; Zi 5000 Mission Oaks # 43 Austin, TX 78735	p Code		\$100.00	 		
		·			(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·		
	Date	Full name of contributor	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (If applicable)		
	11/25/2014	Contributor address; City; State; Zi 1735 Spyglass Dr # 114 Austin, TX 78746-7929	p Code		\$50.00	 -		
		Thousand, TX TOTAG TOES			(If travel outside of	Texas, complete Schedule T)		
	•	ation / Job title (See Instructions)		Employer (See In	1			
	Retired			Retired				
	Date	Full name of contributor	PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	10/29/2014	Contributor address; City; State; Zi 6640 Tasajillo Trl Austin, TX 78739	p Code		\$100.00	 		
		Adami, 17 76739				١		
	Defendant sidenia	office () ab 4th (Can Indexediana)	1	Cambanar (Can be	<u> </u>	Texas, complete Schedule T)		
		ation / Job title (See Instructions)		Employer (See in	structionsy			
!	Date	Full name of contributor	PAC (ID#	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/02/2014	Contributor address; City; State; Zi 8108 Red Willow Dr Austin, TX 78736	ip Code		\$200.00	1 		
					(If traval audaids of	Texas, complete Schedule T)		
\vdash	Principal occur	pation / Job title (See Instructions)		Employer (See In		Toxas, complete schedule ()		
		c Affairs Officer		Retired - LCRA				

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 14	./45 Report: 17/61		
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/02/2014	6 Contributor address; City; State; Zip Code 6112 Highlands Austin, TX 78731		\$350.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Executive As	alion / Job title (See Instructions) sistant	10 Employer (See In Travis Co	structions)			
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/02/2014	Contributor address; City; State; Zip Code 7821 Wisteria Valley Dr Austin, TX 78739		\$200.00	 		
				(if travel outside of	Texas, complete Schedule T)		
-	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	· · · · · · ·		
	Consultant		Strategic Partne	erships, Inc.			
	Date	Full name of contributor ut-of-state PAC (ID# Deshotel, Joe (Mr.)	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/06/2014	Contributor address; City; State; Zip Code 1206 A Ma Austin, TX 78702		\$50.00	 		
		The state of the s		/If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In		reads, complete confedure ()		
	Communicati	ons Director	Travis Co Demo	ocratic Party			
	Date	Full name of contributor ut-of-state PAC (IDad Dickerson, Mechele (Ms.)	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/30/2014	Contributor address; City; State; Zip Code 6609 Quincy Cove Austin, TX 78739		\$200.00	} } }		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Dean	ation / Job title (See Instructions)	Employer (See In University of Te	<u> </u>	, , , , , , , , , , , , , , , , , , , ,		
⊨	Date	Full name of contributor ut-of-state PAC (1D#	f	Amount of	In-kind contribution		
 	Date	Dileo, Michael (Mr.)	/ /	contribution (\$)	description (if applicable)		
	12/02/2014	Contributor address; City; State; Zip Code 9 Niles Rd Austin, TX 78703-3138		\$350.00	! 		
				, , , , , , , , , , , , , , , , , , ,	· •		
<u> </u>	Principal occur	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule T)		
	ттыра оссир	eres and the food managinal	Employer (See III)	ou acutot (5)			

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE# Schedule: 15	i/45 Report: 18/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID: Dunnam, Robert (Mr.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/21/2014	6 Contributor address; City; State; Zip Code 7208 Squirrel Oak Circle Austin, TX 78749		\$100.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup Manufacturing	ation / Job title (See Instructions) 3 Rep	10 Employer (See In Dunnam & Asso		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/09/2014	Contributor address; City; State; Zip Code 3207 China Grove Austin, TX 78745		\$50.00	t
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Visionary	ation / Job title (See Instructions)	Employer (See In ZVS Media	structions)	
	Date	Full name of contributor ut-of-state PAC (ID: Ehrlich, Laura (Ms.)	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 7713 Islander Dr Austin, TX 78749		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Executive Dir	ation / Job title (See Instructions) ector	Employer (See In Hightower and		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/06/2014	Contributor address; City; State; Zip Code 7713 Islander Dr Austin, TX 78749		\$250.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occur	ation / Job title (See Instructions)	Employer (See In	1	Texas, complete outleague 1)
	Executive Dir		Hightower and	Assoc.	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 1522 Thibodeaux Dr Round Rock, TX 78664-7209		\$350.00	! [
1				(if travel outside of	Texas, complete Schedule T)
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	l	
		ner - Manager	Self-Employed	on actionly	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	6/45 Report: 19/61			
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)			
4	Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	10/29/2014	6 Contributor address; City; State; Zip Code PO Box 300807 Austin, TX 78703		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9		oation / Job litte (See Instructions) velopment Officer	10 Employer (See In Austin Commur	structions) nity College				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/23/2014	Contributor address; City; State; Zip Code 7409 Covered Bridge Dr Austin, TX 78736	,	\$50.00	 			
		Adding 12 10100		(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	·			
			1					
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/06/2014	Contributor address; City; State; Zip Code 1005 Bluebonnet Lane Austin, TX 78704		\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)				
Г	Date	Full name of contributor	#)	Amount of	In-kind contribution			
ļ		Fetonte, Daniel (Mr.)	- · · -	contribution (\$)	description (if applicable)			
	12/02/2014	Contributor address; City; State; Zip Code 8301 Washita Dr Austin, TX 78749-3924		\$100.00	! 			
		Austri, 17 70745-0524			Į.			
			<u> </u>	<u> </u>	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor ut-ol-state PAC (ID: Finan, Sally (Ms.)	,	Amount of contribution (\$)	tn-kind contribution description (if applicable)			
	11/21/2014	Contributor address; City; State; Zip Code 8112 Landsman Dr Austin, TX 78736	• • • • • • • • • • • • • • • • • • • •	\$20.00	l , l l			
				(if travel outside of	Texas, complete Schedule T)			
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	L	,			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 17	//45 Report: 20/61			
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (Fitzharris, Matthew (Mr.)	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
i i	11/16/2014	6 Contributor address; City; State; Zip Coc 1600 Susan Dr Austin, TX 78734	е	\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	nstructions)				
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/19/2014	Contributor address; City; State; Zip Coo 909 McPhaul St Austin, TX 78758	е	\$200.00	! 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See Ir	nstructions)				
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	12/01/2014	Contributor address; City; State; Zip Coc 6400 Zadock Woods Dr Austin, TX 78749	e	\$350.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	l eation / Job title (See Instructions)	Employer (See In	1 '	Towns, complete contents of			
	Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	12/02/2014	Contributor address; City; State; Zip Coo 414 Ridgewood Rd West Lake Hills, TX 78746	e	\$100.00	l l f			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See Ir Frederick, Pera	nstructions) ales, Allmon, & Ro	ckwell, PC			
	Date ;	Full name of contributor	ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	12/02/2014	Contributor address; City; State; Zip Coo 6916 Larue Belle Cv Austin, TX 78739-2067	e	\$50.00	 			
1				(If travel outside of	· Texas, complete Schedule T)			
	Principal occup Psychologist	pation / Job title (See Instructions)	Employer (See II Self-Employed	nstructions)	Toward, complete denerule 1)			

	The INSTRUCTION	N GUIDE explains how to complete this form.		1 PAGE#				
				Schedule: 18	/45 Report: 21/61			
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)			
4	Date	5 Full name of contributor out-of-state PAC (ID) Gardner, Margaret (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	11/24/2014	6 Contributor address; City; State; Zip Code 3207 Kerbey Ln Austin, TX 78703		\$50.00] [
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	,				
Ĺ				·····				
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/20/2014	Contributor address; City; State; Zip Code 2722 High Point Dr Round Rock, TX 78664		\$350.00	! 			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup Accountant	pation / Job title (See Instructions)	Employer (See In Freedom Finan					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/16/2014	Contributor address; City; State; Zip Code 613 Heam St Austin, TX 78703		\$50.00	 			
		Adding the force		(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In					
	Development	Director	Cary					
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	12/02/2014	Contributor address; City; State; Zip Code 2917 E 14th St Austin, TX 78702-1628		\$25.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Dale	Full name of contributor	ł)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/19/2014	Contributor address; City; State; Zip Code 503 Nelray Blvd Austin, TX 78751		\$35.00	1 1 1			
				(if travel outside of	Texas, complete Schedule T)			
\vdash		lation / Job title (See Instructions)	Employer (See in	structions)	,			
	Systems Adn	ninistrator	University of Te	xas				

	The Instruction	אי Guide explains how to com	plete this form.			1 PAGE# Schedule: 19	/45 Report: 22/61
2	FILER NAME	Scruggs, Edward (Mr.)				3 ACCOUNT# 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor Goodfriend, Sarah (Ms.)	ut-of-state P	AC (ID#	.	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/20/2014	6 Contributor address; 1500 West 24Th St Austin, TX 78703-2404	City; State; Zip	Code		\$350.00)
						(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired - Eco	ation / Job title (See Instruction nomist	ns)		10 Employer (See In Retired	structions)	
	Date	Full name of contributor Grassbaugh, David (Mr.)	out-of-state P	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; PO Box 684948 Austin, TX 78768	City; State; Zip	Code		\$100.00	!
						(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ıs)	-	Employer (See in	· ·	, , , , , , , , , , , , , , , , , , , ,
	Attorney				Self-employed		
	Date	Full name of contributor Haag, Stefan (Mr.)	☐ out-of-state P	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; 6302 Mesa Grande Austin, TX 78749-4027	City; State; Zip	Code		\$50.00	
						<u> </u>	Texas, complete Schedule T)
	Principal occup Retired Profe	ation / Job title (See Instruction ssor	ns) 		Employer (See In Retired	structions)	
	Date	Full name of contributor Haller, Austin (Mr.)	out-of-state P.	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; 7500 Shadowridge Run # 52 Austin, TX 78749	City; State; Zip	Code		\$35.00	;
	;		 			(If travel outside of	Texas, complete Schedule T)
	Principal occup Musician	L valion / Job title (See Instruction	ns)		Employer (See In St David's Episi	structions)	, , , , , ,
	Date	Full name of contributor Haller, Julia (Ms.)	□ out-of-state P	AC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; 5020 Festival Blvd Apt 1B Bellingham, WA 98226-7690	City; State; Zip	Code		\$35.00	
			1			(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occur	Loation / Job title (See Instruction	ns)	I	Employer (See In	<u> </u>	10328, complete senedule 17
			,		F 3 (+a	,	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 20	0/45 Report: 23/61
2	FILER NAME	Scruggs, Edward (Mr.)	·	3 ACCOUNT# 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Halpin, Beki (Ms.)	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/06/2014	6 Contributor address; City; State; Zip Code 7107 Stone Ledge Circle Austin, TX 78736		\$35.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/26/2014	Contributor address; City; State; Zip Code 16400 Hamilton Pool Rd Austin, TX 78738		\$200.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	rexas, complete deficable 17
	Retired Artist		Linployer (oce in	ar deciona)	
	Date	Full name of contributor	†)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/26/2014	Contributor address; City; State; Zip Code 16400 Hamilton Pool Rd Austin, TX 78738		\$350.00	i
				1	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 7705 Whitsun Dr Austin, TX 78749		\$50.00	! ! !
				L	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/03/2014	Contributor address; City; State; Zip Code 1104 Enfield Rd Austin, TX 78703		\$100.00	
				(If travel outside of	Texas, complete Schedule 7)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
			l	·····	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/45 Report: 24/61				
2 FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)				
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hernandez, Sally I (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)				
12/02/2014	6 Contributor address; City; State; Zip Code 2712 Bobby Ln Austin, TX 78745		\$50.00	i I ∤				
				Texas, complete Schedule T)				
9 Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)					
Date	Full name of contributor ut-of-state PAC (ID# Herring, Charles Jr. (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)				
11/16/2014	Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703		\$350.00	 				
			(If travel outside of	Texas, complete Schedule T)				
Principal occur Attorney	oation / Job title (See Instructions)	Employer (See In Herring & Irwin,						
Date	Full name of contributor ut-of-state PAC (ID# Hess, Myron (Mr.)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
12/05/2014	Contributor address; City; State; Zip Code 1705 Margaret St Austin, TX 78704		\$50.00	; 				
			(If travel outside of	Texas, complete Schedule T)				
Principal occur Attorney	nation / Job title (See Instructions)	Employer (See In National Wildlife						
Date	Full name of contributor ut-of-state PAC (ID# Hoffman, Virginia (Ms.)	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)				
12/02/2014	Contributor address; City; State; Zip Code 3509 Greenway St Austin, TX 78705		\$20.00	 				
			(If travel outside of	Texas, complete Schedule T)				
Principal occup Retired - IT	pation / Job title (See Instructions)	Employer (See In Retired	structions)					
Date	Full name of contributor out-of-state PAC (ID# Hohengarten, Nancy (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)				
11/30/2014	Contributor address; City; State; Zip Code 4114 Ave H Austin, TX 78751		\$50.00	 				
			(If travel outside of	Texas, complete Schedule T)				
Principal occup Travis Co Dis	Dation / Job title (See Instructions) strict Judge	Employer (See In Travis County	`					

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 22/45 Report: 25/61 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Scruggs, Edward (Mr.) 09090909 5 Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date description (if applicable) contribution (\$) Holderness, Earl (Mr.) 12/02/2014 6 Contributor address; City; State; Zip Code \$150.00 2943 Thousand Oaks Dr Austin, TX 78746 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired City of Austin Retired Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Horan, Melinda S (Ms.) Contributor address; City; State; Zip Code \$50.00 11/16/2014 1208 W 39th 1/2 St Austin, TX 78756-3904 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Sales Date Amount of In-kind contribution contribution (\$) description (if applicable) Houghton, Adam (Mr.) Contributor address; City; State; Zip Code \$100.00 11/05/2014 1306 Foxcroft Pl Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Date Amount of description (if applicable) contribution (\$) Huber, Karen (Ms.) 11/28/2014 Contributor address; City; State; Zip Code \$350.00 23020 Pedernales Canyon Trl Spicewood, TX 78669-6431 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Water Policy Professional Not Listed Full name of contributor ut-of-state PAC (ID#) Date Amount of In-kind contribution contribution (\$) description (if applicable) Huber, Leonard (Mr.) 11/28/2014 Contributor address; City; State; Zip Code \$350.00 23020 Pedemales Canyon Trail Spicewood, TX 78669 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 23	3/45 Report: 26/61		
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT# 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Hudspeth, Ann (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/07/2014	6 Contributor address; City; State; Zip Code 8010 Stillwood Ln Austin, TX 78757		\$50.00	1 -		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/16/2014	Contributor address; City; State; Zip Code 3406 Duval St Austin, TX 78705		\$50.00	! 1 1		
ľ				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In				
	Tailor - Desig	ner					
	Date	Full name of contributor XI out-of-state PAC (ID# International Brotherhood of Electrical Workers P.		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/13/2014	Contributor address; City; State; Zip Code 900 Seventh St NW Washington, DC 20001		\$350.00	 		
L	Dringing again	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	Principal occup	ation / Jub fille (See instructions)	Employer (See in	sirucions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/28/2014	Contributor address; City; State; Zip Code 2900 Wade Ave Austin, TX 78703-1017		\$350.00	[
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Clinical Socia	oation / Job title (See Instructions) al Work	Employer (See In Self Employed	structions)			
	Date	Full name of contributor out-of-state PAC (ID# Jack, Jeff (Mr.)	')	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/06/2014	Contributor address; City; State; Zip Code 2008 B Rabb Glen Austin, TX 78704		\$50.00	1 }]		
1				(tf travel outside of	Texas, complete Schedule T)		
	Principal occup Architect	Dation / Job title (See Instructions)	Employer (See In Self Employed	<u> </u>	, , , , , , , , , , , , , , , , , , ,		

	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 24	/45 Report: 27/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Jenkins, Sarah (Ms.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/15/2014	6 Contributor address; City; State; Zip Code 3119 Eanes Circle Austin, TX 78746		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Not Employed	ation / Job title (See Instructions) d	10 Employer (See In Not Employed	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 1203 A Elm St Austin, TX 78703		\$350.00	}
		Austria, 17 10100		(If travel outside of	Texas, complete Schedule T)
-	Principal occur	ation / Job title (See Instructions)	Employer (See In	•	Texas, complete schedule 1)
	· · · · · · · · · · · · · · · · · · ·		1	,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	
		2958 Donnell Dr Round Rock, TX 78664			İ
				,	Texas, complete Schedule T)
	Principal occup Operator	ation / Job title (See Instructions)	Employer (See In Capital Metro	structions)	
	Date	Full name of contributor	")	Amount of contribution (\$)	In-kind contribution description (if applicable)
!	11/21/2014	Contributor address; City; State; Zip Code 3300 Dunliegh Dr Austin, TX 78745		\$50.00	
Ī				(# travel entries of	Texas, complete Schedule T)
_	Principal occup	pation / Job tille (See Instructions)	Employer (See In	<u> </u>	Texas, complete schedule 1/
	Retired		Retired		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 7208 Squirrel Oak Circle Austin, TX 78749		\$25.00	}
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Total Samples Same
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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 25	i/45 Report: 28/61		
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/02/2014	6 Contributor address; City; State; Zip Code 7914 Bee Cave Rd Austin, TX 78746		\$350.00	 		
L				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Engineer	eation / Job title (See Instructions)	10 Employer (See In Encotech Engir				
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/06/2014	Contributor address; City; State; Zip Code 5902 Taylorcrest Austin, TX 78749	· · · · · · · · · · · · · · · · · · ·	\$35.00	1 		
l				(if travel outside of	Texas, complete Schedule T)		
\vdash		pation / Job title (See Instructions)	Employer (See In	,			
	Software Dev	eloper	Dun & Bradstre	et			
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/14/2014	Contributor address; City; State; Zip Code 1808 Kerr St Austin, TX 78704		\$100.00	i I I		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u>/</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/12/2014	Contributor address; City; State; Zip Code 3007 West Ave Austin, TX 78705	· · · · · · · · · · · · · · · · · · ·	\$100.00	! ! !		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	vation / Job title (See Instructions)	Employer (See In None	structions)			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2014	Contributor address; City; State; Zip Code 3809 Gains Ct Austin, TX 78735		\$100.00	1 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Consultant	pation / Job title (See Instructions)	Employer (See In Kralj Consulting				

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 26	/45 Report: 29/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor	<u>; </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/09/2014	6 Contributor address; City; State; Zip Code 4407 Twisted Tree Dr Austin, TX 78735		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Environment	pation / Job title (See Instructions) al Consultant	10 Employer (See In Tetra Tech Inc	structions)	
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/09/2014	Contributor address; City; State; Zip Code 4407 Twisted Tree Dr Austin, TX 78735		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Recruiter	pation / Job title (See Instructions)	Employer (See In Dell Corp.	structions)	
	Date	Full name of contributor Out-of-state PAC (ID: LeBlanc, Guy A (Mr.)	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City; State; Zip Code PO Box 91924 512-301-8700 Austin, TX 78709-1924		\$100.00	
	Principal occur	pation / Job title (See Instructions)	Employer (See In	1.	Texas, complete Schedule T)
	T Till Cope, occup	Salish 1 666 tale (666 moderations)	Employer (Social		
	Date	Full name of contributor	(Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/24/2014	Contributor address; City; State; Zip Code 1914 A Larchmont Dr Austin, TX 78704		\$350.00	! [!
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	
	Date	Full name of contributor ut-of-state PAC (ID)	‡	Amount of	In-kind contribution
	-	Lippincott, Marc (Mr.)	,	contribution (\$)	description (if applicable)
	11/25/2014	Contributor address; City; State; Zip Code 4601 Walsall Loop Austin, TX 78749		\$350.00	1 I f
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See In	1	<u> </u>
	Attorney	, in the second	Lippincott Phela	an Veidt, PLLC	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 27	7/45 Report: 30/61	
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT# 09090909	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Lira, Deborah Carr (Ms.))	7 Amount of contribution (\$)	8	
	11/18/2014	6 Contributor address; City; State; Zip Code PO Box 151870 Austin, TX 78715		\$20.00] 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Hairdresser	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/15/2014	Contributor address; City; State; Zip Code PO Box 5843 Austin, TX 78763		\$350.00	I 	
ĺ				(If travel outside of	Texas, complete Schedule T)	
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	l .	Texas, complete concode ()	
		,				
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/19/2014	Contributor address; City; State; Zip Code 101 Colorado St Austin, TX 78701		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
1	Principal occup Attorney	l vation / Job title (See Instructions)	Employer (See In	<u> </u>		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/19/2014	Contributor address; City; State; Zip Code 101 Colorado St Austin, TX 78701		\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	nation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/28/2014	Contributor address; City; State; Zip Code 9600 Crumley Ranch Rd Austin, TX 78738		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
H	Principal occur	L pation / Job title (See Instructions)	Employer (See In	<u> </u>		
	·		-			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 28	/45 Report: 31/61	
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Mading, Betty J (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	12/02/2014	6 Contributor address; City; State; Zip Code 4604 Cap Rock Dr Austin, TX 78735-6351		\$250.00	 - 	
					Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Marsales, Karen (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/25/2014	Contributor address; City; State; Zip Code 4804 Calhoun Canyon Austin, TX 78735		\$100.00	1 	
				<u> </u>	Texas, complete Schedule T)	
	Principal occup Human Reso	vation / Job title (See Instructions) urces	Employer (See In Dell	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Marston, Jim (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/29/2014	Contributor address; City; State; Zip Code 2810 Townes Ln Austin, TX 78703		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/02/2014	Contributor address; City; State; Zip Code 512-589-2972 Austin, TX 78746		\$150.00	! ! !	
				(If travel outside of	Texas, complete Schedule T)	
-	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>		
	· moparoccup					
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/09/2014	Contributor address; City; State; Zip Code 1204 Arronimink Circle Austin, TX 78746		\$50.00	1 1 	
				(If travel outside of	Texas, complete Schedule T)	
 	Principal occup] pation / Job title (See Instructions)	Employer (See In	<u>, . </u>		
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	The Instruction Guide explains how to complete this form.			1 PAGE# Schedule: 29	9/45 Report: 32/61		
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor out-of-state PAC (ID) McCreary, Lou (Mr.)	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/03/2014	6 Contributor address; City; State; Zip Code 1108 Snowy Owl Ct Austin, TX 78746		\$200.00	! ! !		
					Texas, complete Schedule T)		
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Lou McCreary A	structions) Attorney Mediator			
	Date	Full name of contributor	y)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/02/2014	Contributor address; City; State; Zip Code 8600 Brodie Ln Apt 926		\$40.00	! 		
		Austin, TX 78745	•	(if travel outside of	Texas, complete Schedule T)		
Г	Principal occupation / Job title (See Instructions) Training & Instructional Design		Employer (See In Freescale Semi				
_	Training & His	illuctional Design	Freescale Seini				
	Date	Full name of contributor ut-of-state PAC (ID: McLarty, Davis (Mr.)	 	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/01/2014	Contributor address; City; State; Zip Code 4609 Eagle Feather Dr Austin, TX 78735		\$35.00	! ! !		
┝	Dringing occur	ation / Job title (See Instructions)	Employer (See In	1 '	Texas, complete Schedule T)		
L	типсіраї оссир	ation 7 300 title (See instructions)	Employer (See in	sirucionaj			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/20/2014	Contributor address; City; State; Zip Code 9001 Briardale Dr Austin, TX 78753		\$300.00	! !		
_				,	Texas, complete Schedule T)		
	Principal occup Driver	ation / Job title (See Instructions)	Employer (See In Lone Star Cab	structions)			
	Date	Full name of contributor	*	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/09/2014	Contributor address; City; State; Zip Code 4807 Crafty Cove Austin, TX 78749		\$350.00	1 } !		
				(If travel outside of	Texas, complete Schedule T}		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)			

Texas Ethics Commission

	The Instruction Guide explains how to complete this form.				1 PAGE# Schedule: 30	/45 Report: 33/61
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor Disna, Christopher (Mr.)	out-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/29/2014	6 Contributor address; C 8922 Bryn Mawr Austin, TX 78723	City; State; Zip Code		\$10.00	
ļ					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions))	10 Employer (See In:	structions)	
	Date	Full name of contributor Discourage Education Disco	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/04/2014	Contributor address; C 3301 Stratford Hills Ln Austin, TX 78746	City; State; Zip Code	, , , , , , , , , , , , , , , , , , , ,	\$350.00	
		Tracting TX FOT TO			(If travel outside of	Texas, complete Schedule T)
	Principal occupation / Job title (See Instructions)		Employer (See In	structions)		
	Retired			Retired		
	Date	Full name of contributor Moriarty, William (Mr.)	out-of-state PAC (ID#)	Amount of contribution (\$)	in-kind contribution description (if applicable)
	11/30/2014	Contributor address; C 1004 Jousting Place Austin, TX 78746	City; State; Zip Code		\$350.00	
					(II travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions))	Employer (See In	structions)	
	Date	Full name of contributor [Murphree, Patricia (Ms.)	☐ out-of-state PAC (ID#	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; C 9012 Lantana Way Auslin, TX 78749	City; State; Zip Code		\$200.00	1 1 1
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions))	Employer (See In Retired	structions)	
	Date	Full name of contributor [Murphree, Patricia (Ms.)	□ out-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; C 9012 Lantana Way Austin, TX 78749	Dity; State; Zip Code		\$100.00	
_					L .	Texas, complete Schedule T)
	Principal occup Retired	eation / Job title (See Instructions))	Employer (See In Retired	structions)	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 31	/45 Report: 34/61	
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Neavel, Nancy (Ms.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/26/2014	6 Contributor address; City; State; Zip Code 2905 Scenic Dr Austin, TX 78703		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Retired Advoc	ation / Job title (See Instructions) cate	10 Employer (See In Retired	structions)		
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/12/2014	Contributor address; City; State; Zip Code PO Box 29446 Austin, TX 78755-6446		\$200.00	 	
				(If travel outside of	Texas, complete Schedule T)	
 	Principal occup	ation / Job title (See Instructions)	Employer (See In	1 '		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/10/2014	Contributor address; City; State; Zip Code 5819 Back Bay Ln Austin, TX 78739		\$50.00	 	
					Texas, complete Schedule T)	
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired IBM	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/02/2014	Contributor address; City; State; Zip Code 902 E Live Oak St Austin, TX 78704-5236		\$25.00	! !	
		, , , , , , , , , , , , , , , , , , , ,			 T	
	Principal occur	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	T (morpor occor)	and the coordinate of the coor				
	Date	Full name of contributor	<u>†)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/02/2014	Contributor address; City; State; Zip Code 5325 Spirea Cove Austin, TX 78749		\$100.00	1 † 1	
L				I	Texas, complete Schedule T)	
	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)		

Principal occupation / Job title (See Instructions)

Panzer, Miriam (Ms.)

3923 Dry Creek Dr Austin, TX 78731

Principal occupation / Job title (See Instructions)

Contributor address; City; State; Zip Code

Attorney

Date

12/02/2014

TDD 1-800-735-2989 P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 Texas Ethics Commission **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The INSTRUCTION GUIDE explains how to complete this form. Schedule: 32/45 Report: 35/61 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Scruggs, Edward (Mr.) 09090909 In-kind contribution 5 Full name of contributor ut-of-state PAC (ID# Amount of Date contribution (\$) description (if applicable) Owens, Phyllis (Ms.) \$50.00 6 Contributor address; City; State; Zip Code 12/01/2014 1709 St Albans Blvd Austin, TX 78745 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Retired Retired In-kind contribution Date Full name of contributor ut-of-state PAC (ID#) Amount of contribution (\$) description (if applicable) Page, Daniel (Mr.) Contributor address; City; State; Zip Code \$350.00 11/11/2014 6202 Burk Burnett Ct Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Magician Self-Employed Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Page, Lee (Ms.) City; State; Zip Code Contributor address; \$350.00 11/11/2014 6202 Burk Burnett Ct Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Housewife None In-kind contribution Amount of Date description (if applicable) contribution (\$) Palmer, Jeffee (Mr.) Contributor address; City; State; Zip Code \$100.00 12/02/2014 7611 Kiva Dr Austin, TX 78749

Electronic Filing Version 3.4.6

In-kind contribution

description (it applicable)

(If travel outside of Texas, complete Schedule T)

(If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

Employer (See Instructions)

Amount of contribution (\$)

\$50.00

Self-employed

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 33	3/45 Report: 36/61		
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Pinnelli, Janis W (Ms.)	. <u>.</u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/20/2014	6 Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763		\$200.00	 		
	,				Texas, complete Schedule T)		
9	Principal occup Accountant	ation / Job title (See Instructions)	10 Employer (See In J Pinnelli Co, Ll				
	Date	Full name of contributor ut-of-state PAC (ID# Pipkin, Cindy (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/06/2014	Contributor address; City; State; Zip Code 3808 Stonecroft Dr Austin, TX 78749		\$20.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup Retired Teacl	aation / Job title (See Instructions) her	Employer (See In Retired	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Pogonat, Teodora (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/01/2014	Contributor address; City; State; Zip Code 7316 Red Pebble Rd Austin, TX 78739		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Photographer	ation / Job title (See Instructions)	Employer (See In Self-employed	istructions)			
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2014	Contributor address; City; State; Zip Code 2609 Pembrook Trall Austin, TX 78731		\$350.00	1		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	pation / Job title (See Instructions)	Employer (See In Retired	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/05/2014	Contributor address; City; State; Zip Code 8716 Towana Trail Austin, TX 78736		\$100.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
\vdash	Principal occur	pation / Job title (See Instructions)	Employer (See In	1			
		al Program Coord.	University of Te				

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	The Instruction	on Guide explains how to com	plete this form.		1 PAGE# Schedule: 34	1/45 Report: 37/61
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor Pumfrey, Ross (Mr.)	☐ out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/28/2014	6 Contributor address; 8716 Towana Trail Austin, TX 78736	City; State; Zip Code		\$100.00	
						Texas, complete Schedule T)
9		ation / Job title (See Instruction al Program Coord.	ns)	10 Employer (See In University of Te		
	Date	Full name of contributor Robbins, Paul (Mr.)	ut-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; PO Box 1374 512-447-8712	City; State; Zip Code		\$20.00	<i>i</i> ! !
1		Austin, TX 78767			di	!
	Principal occur	pation / Job title (See Instruction	ne)	Employer (See In	<u> </u>	Texas, complete Schedule T)
		and 17 300 the (366 mandenor	10)	Ciripidyer (dee iii	and delicitory	
	Date	Full name of contributor Rodgers, Brian (Mr.)	out-of-state PAC (ID#	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; 1112 West 9th St Austin, TX 78703	City; State; Zip Code		\$350.00	1 1 1
					(If travel outside of	Texas, complete Schedule T)
-		ation / Job title (See Instruction	ns)	Employer (See In	structions)	<u> </u>
	Real Estate Ir	nvestor		Rodger & Reich	nte Inc	
	Date	Full name of contributor Roeling, Barbara (Ms.)	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; 4601 Foster Ranch Rd Austin, TX 78735	City; State; Zip Code		\$50.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instruction al Risk Manager	ns)	Employer (See In Comerica	structions)	
	Date	Full name of contributor	ut-of-state PAC (ID#	/)	Amount of	In-kind contribution
		Rogers, Andrew D Jr. (Mr.)		contribution (\$)	description (if applicable)
	12/01/2014	Contributor address; 4110 Honeycomb Rock Circle Austin, TX 78731	City; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
<u> </u>	Principal occup Retired	ation / Job title (See Instruction	ns)	Employer (See In Retired		
						

<u> </u>					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 35	/45 Report: 38/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Rogoff, Regina (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/02/2014	6 Contributor address; City; State; Zip Code 1705 Schieffer Austin, TX 78722		\$30.00	
				(If travel outside of	Texas, complete Schedule T)
٩	Principal occur	ation / Job title (See Instructions)	10 Employer (See In	L.`	
	Date	Full name of contributor ut-of-state PAC (ID# Roper, Katy (Ms.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code 4802 Yellow Rose Trl Austin, TX 78749		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
⊢	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete schedule 1)
		and the Cook mondations,	Employer (ees in		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 5512 Oakwood Cv Austin, TX 78731		\$35.00	
			5	L	Texas, complete Schedule T)
	Consulting	ation / Job title (See Instructions)	Employer (See In The Ruffing Firr		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 810 N Ave H Elgin, TX 78621		\$20.00	
				1 '	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
,	12/03/2014	Contributor address; City; State; Zip Code 5112 Calhoun Canyon Loop Austin, TX 78735-6451		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Social Work	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 36	6/45 Report: 39/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Salch, Susan (Ms.)	/)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/25/2014	6 Contributor address; City; State; Zip Code 8924 West Hove Loop Austin, TX 78749	• • • • • • • • • • • • • • • • • • • •	\$50.00	1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	alion / Job title (See Instructions)	10 Employer (See In	structions)	
_	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/08/2014	Contributor address; City; State; Zip Code 704 Carolyn Ave Austin, TX 78705		\$350.00	
		Adding the force		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/09/2014	Contributor address; City; State; Zip Code 117 Laurel Ln Austin, TX 78705		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Writer	ation / Job title (See Instructions)	Employer (See In Self-Employed	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State; Zip Code 5025 Scottish Thistle Dr Austin, TX 78739-1434		\$20.00	
				(M traval putnide of	Texas, complete Schedule T)
	Principal occup	Loation / Job title (See Instructions)	Employer (See In	L	Texas, semplete semester 1,
	N/A		N/A		-
	Date	Full name of contributor	<i>;</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 1015 E Yager Ln Unit 92 Austin, TX 78753-7007		\$300.00	!
				(If traval autains at	Texas, complete Schedule T)
-	Principal occup Retired	Dation / Job title (See Instructions)	Employer (See In Retired		Texas, complete Schedule T)
			L		

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 37	//45 Report: 40/61	
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Sheet Metal Workers Local Union No 67 Local PA		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/18/2014	6 Contributor address; City; State; Zip Code 11 Burwood Ln San Antonio, TX 78216-7038		\$150.00	 	
				L	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/09/2014	Contributor address; City; State; Zip Code 5 Lost Meadow Cv Austin, TX 78738		\$50.00	1 	
ľ				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/01/2014	Contributor address; City; State; Zip Code 604 West 11th St Austin, TX 78701		\$100.00	 	
L					Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u>†)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	12/01/2014	Contributor address; City; State; Zip Code 2510 Camino Alto Austin, TX 78746		\$350.00	! !	
				(If travel outside of	Texas, complete Schedule T)	
-	Principal occup	Dation / Job tille (See Instructions)	Employer (See In	<u> </u>	<u> </u>	
H	Date	Full name of contributor ut-of-state PAC (ID#	,	Amount of	In-kind contribution	
	Date	Slack, Charlotte A (Ms.)	·/	contribution (\$)	description (if applicable)	
	12/02/2014	Contributor address; City; State; Zip Code 11001 La Roca Cv Austin, TX 78739-1991		\$350.00	! !	
1				(If travel outside of	Texas, complete Schedule T)	
T	Principal occur Retired	Loation / Job title (See Instructions)	Employer (See In Retired	<u> </u>		
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	The Instruction	N GUIDE explains how to complete this form.	•		1 PAGE# Schedule: 38	/45 Report: 41/61
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor	PAC (ID#	})	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/02/2014	6 Contributor address; City; State; 2 11001 La Roca Cove Austin, TX 78739	Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	ation / Job title (See Instructions)		10 Employer (See In: Retired	structions)	
	Date	Full name of contributor	PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/07/2014	Contributor address; City; State; 7 1908 Barton Pkwy Austin, TX 78704	Zip Code		\$100.00	{
		Masan, TX 76764				· · · · · · · · · · · · · · · · · · ·
	Drivers	chian / Jah Hilla (Con Instructions)		Employer (See In	<u> </u>	Texas, complete Schedule T)
	Attorney	ation / Job title (See Instructions)	!	Travis County	structions)	
	Date	Full name of contributor South Austin Democrats	PAC (ID#	/)	Amount of contribution (\$)	In-kind contribution description (If applicable)
	11/11/2014	Contributor address; City; State; 7 PO Box 152592 Austin, TX 78715	Zip Code		\$200.00	
		madin, 1270710			(If traval autoida of	Texas, complete Schedule T)
┡	Principal occur	ation / Job title (See Instructions)		Employer (See In	<u> </u>	Texas, complete schedule 1)
	T THOUSAN GOOD	aton 7 sob title (see included by		Employer (oco iii	ou dollorio,	
	Date	Full name of contributor Out-of-state Southwest Laborers District Council PAC		#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; 2 11720 East 21 St Suite D Tulsa, OK 74129	Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In Oklahoma PAC		
	Date	Full name of contributor	PAC (ID	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/16/2014	Contributor address; City; State; 2 5109 Turnabout Ln Austin, TX 78731	Zip Code		\$100.00	[
		7. Marin, 17. 70701				-
	Oula et a al com	ation / Joh title (O IAAir		Empleyer (O		Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE# Schedule: 39	0/45 Report: 42/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/02/2014	6 Contributor address; City; State; Zip Code PO Box 5674 512-474-4738 Austin, TX 78763		\$150.00	1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code 8230 Spicewood Springs Rd # 3 Austin, TX 78759		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
Н	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
		·		,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
:	11/18/2014	Contributor address; City; State; Zip Code PO Box 40898 Austin, TX 78704		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
-	Principal occur	Dation / Job title (See Instructions)	Employer (See In	<u> </u>	
		,			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/25/2014	Contributor address; City; State; Zip Code 6503 delmonico Dr Austin, TX 78759		\$350.00	! ! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 5555 N. Lamar Blvd Ste E121 Austin, TX 78751		\$350.00	! !
1				1	_
L		<u> </u>		<u>ļ </u>	Texas, complete Schedule T)
	Principal occur	oation / Job title (See Instructions)	Employer (See In	structions)	
1		+			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 40)/45 Report: 43/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT# 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID: Swartz, Monica (Ms.)	/)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/30/2014	6 Contributor address; City; State; Zip Code 5212 Concho Creek Bnd Austin, TX 78735-6491		\$35.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (If applicable)
	11/23/2014	Contributor address; City; State; Zip Code 3900 Sendero Dr Austin, TX 78735-6385		\$100.00	} } !
		,		(If travel outside of	Texas, complete Schedule T)
-	Principal occur	Loation / Job title (See Instructions)	Employer (See In	4	
				,	
	Date	Full name of contributor	")	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
-	Principal occur Manager	ation / Job title (See Instructions)	Employer (See In YAA Transporta		
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code 11313 Aden Court Austin, TX 78739	• • • • • • • • • • • • • • • • • • • •	\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occur	pation / Job title (See Instructions)	Employer (See In	I	Texas, complete seriedale 1)
<u>.</u>	Security Solu		IBM		
	Date	Full name of contributor	<u> </u>	Amount of cantribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 2303 East Side Dr Austin, TX 78704		\$350.00	
				(If travel autaida as	Texas, complete Schedule T)
┝	Principal occur	pation / Job title (See Instructions)	Employer (See In	<u> </u>	reves' combiere schedule 1)
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	The Instruction	on Guide explains how to complete this form.		1 PAGE#	
				Schedule: 41	/45 Report: 44/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Thomas, David (Mr.)	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/06/2014	6 Contributor address; City; State; Zip Code 2004 B E 9th St Austin, TX 76702-3438		\$20.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Photographer	ation / Job title (See Instructions)	10 Employer (See In Self Employed	structions)	
	Date	Full name of contributor	<u>')</u>	Amount of	In-kind contribution
		Travis Co Democratic Party		contribution (\$)	description (if applicable) Newspaper ad - Austin
	12/04/2014	Contributor address; City; State; Zip Code PO Box 684263 Austin, TX 78768		\$350.00	Chronicle 12-5-14 endorsing Ed Scruggs & other candidates
				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	oation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/28/2014	Contributor address; City; State; Zip Code 1704 Kerr Ave Austin, TX 78704		\$25.00	Texas, complete Schedule T)
┝	Principal occup	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, complete concease 17
		· ·			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (If applicable)
	11/07/2014	Contributor address; City; State; Zip Code 2604 Geraghty Ave Austin, TX 78757		\$350.00	!
				(If travel outside of	Texas, complete Schedule 1)
	Principal occur Consultant	pation / Job title (See Instructions)	Employer (See In Austin Energy	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/28/2014	Contributor address; City; State; Zip Code 11308 Bastogne Loop Austin, TX 78739		\$350.00	i i
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Accountant	Dation / Job title (See Instructions)	Employer (See In Texas Dept of E		

SCHEDULE A

POLITICAL CONTRIBUTIONS

The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 42/	45 Report: 45/61
FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
Date	5 Full name of contributor ☐ out-of-state PAC (ID# Urban, Steve (Mr.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/28/2014	6 Contributor address; City; State; Zip Code 11308 Bastogne Loop Austin, TX 78739		\$350.00 	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup Attorney	eation / Job title (See Instructions)	10 Employer (See In Self-Employed	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# Urrutia, Bradley G (Mr.))	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/16/2014	Contributor address; City; State; Zip Code 11609 Anatole Ct	,	\$100.00	
	Austin, TX 78748		1	Texas, complete Schedule T)
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In	estructions)	
Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/01/2014	Contributor address; City; State; Zip Code 1510 West 6th St Apt 205 Austin, TX 78703		\$350.00	
			(If trave) outside of 1	Texas, complete Schedule T)
Principal occup Executive Dir	ation / Job title (See Instructions) ector	Employer (See In Asian American	structions) n Resource Center	
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/10/2014	Contributor address; City; State; Zip Code 6211 Sun Vista Dr Austin, TX 78749		\$20.00	
			(If travel outside of 1	Texas, complete Schedule T)
Principal occup Management	ation / Job title (See Instructions) Analyst	Employer (See In Tx Parks & Wid		
Date	Full name of contributor out-of-state PAC (ID# Waley, Roy R (Mr.)	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/02/2014	Contributor address; City; State; Zip Code 1310 B Palo Duro Rd Austin, TX 78757-3430		\$50.00	
			(M tenual austaida ed 3	Texas, complete Schedule T)
		Employer (See In	<u> 1 </u>	exas, complete schedule 1)

	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 43	0/45 Report: 46/61
2	FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Walker, Nancy (Ms.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/02/2014	6 Contributor address; City; State; Zip Code 5710 Abilene Trl Austin, TX 78749-2113		\$300.00]
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Policy Adviso	ation / Job title (See Instructions)	10 Employer (See In State of Texas	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 12112 Eruzione Austin, TX 78748		\$20.00	
		AUSIII, 17 76746		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	•)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/03/2014	Contributor address; City; State; Zip Code 5406 Balcones Dr Austin, TX 78731		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Service	ation / Job title (See Instructions)	Employer (See In Zenith Cafe Co		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State; Zip Code 12314 Buvana Dr Austin, TX 78739		\$100.00	! ! !
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#	t)	Amount of	In-kind contribution
	Daio	Welch, Marion (Ms.)		contribution (\$)	description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 5729 Galsworthy Ct Austin, TX 78739		\$50.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occur Retired Teac	pation / Job title (See Instructions)	Employer (See In Retired	l	reads, complete Schedule 1)
1	riometa redu		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

	The INSTRUCTION	N GUIDE explains how to complete this fo	orm.		1 PAGE # Schedule: 44	/45 Report: 47/61
2	FILER NAME	Scruggs, Edward (Mr.)			3 ACCOUNT # 09090909	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-s Wick, Anne (Ms.)	state PAC (ID#_)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/28/2014	6 Contributor address; City; State 6 Mariele Dr Fairfax, CA 94930-1010	e; Zip Code		\$150.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup At Home Mor	ation / Job title (See Instructions) n		10 Employer (See In: N/A	structions)	
	Date	Full name of contributor U out-of-s Wiebrand, Jennifer (Ms.)	state PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State 6618 Hillside Terrace Austin, TX 78749	e; Zîp Code		\$100.00	1 1 1
					(if travel outside of	Texas, complete Schedule T)
	Principat occup	ation / Job title (See Instructions)		Employer (See in		Toxad, complete contocato 1,
		,	[
	Date	Full name of contributor	state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/16/2014	Contributor address; City; State 307 Bulian Ln Austin, TX 78746	e; Zip Code		\$100.00	1 1 1
					L	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor ut-of-s ut-of-s ut-of-s	itate PAC (ID#_)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; City; State 4701 Monterey Oaks Blvd # 639 Austin, TX 78749	e; Zip Code		\$50.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup UX Designer	ation / Job title (See Instructions)		Employer (See In Avention, Inc	structions)	
	Date	Full name of contributor	state PAC (ID#_		Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/31/2014	Contributor address; City; State 5711 State Hwy 45 Austin, TX 78739-3014	; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate In	ation / Job title (See Instructions) nvestor	T	Employer (See In Self-Employed		

POLITICAL CONTRIBUTIONS

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 45	/45 Report: 48/61
FILER NAME	Scruggs, Edward (Mr.)		3 ACCOUNT # 09090909	(Ethics Commission filers)
Date	5 Full name of contributor out-of-state PAC (ID# Zewde, Endale Asfaw (Ms.)	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/20/2014	6 Contributor address; City; State; Zip Code PO Box 80621 Austin, TX 78708		\$300.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Driver	pation / Job title (See Instructions)	10 Employer (See In Lone Star Cab	structions)	
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/20/2014	Contributor address; City; State; Zip Code PO Box 144542 Austin, TX 78714-4542		\$300.00	
			`	Texas, complete Schedule T)
Principal occu Quality Cont	pation / Job title (See Instructions) rol	Employer (See In Hospina Corp	structions)	
Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/04/2014	Contributor address; City; State; Zip Code 5817 Anselm Ct Austin, TX 78739	,	\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu Stay at Hom	pation / Job title (See Instructions) e Mom	Employer (See In None	structions)	

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SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Event Expense Polling Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) Printing Expense Fees The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME PAGE # Scruggs, Edward (Mr.) 09090909 Schedule: 1/13 Report: 49/61 4 Date 5 Payee name 11/07/2014 Cardenas, Alessandro (Mr.) 6 Amount (\$) Payee address City; State; Zip Code 7500 Shadow Ridge Run # 37 \$2,000.00 Austin, TX 78749 Description (If travel outside of Texas, complete Schedule T) Campaign Field Staff monthly expense (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Office held: 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 12/02/2014 Check Mark Typesetting City; State; Zip Code Amount (\$) Payee address 3217 N IH 35 Frontage Rd \$1,450.20 Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description 500 Yard Signs **PURPOSE** Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefil C/OH Date Pavee name **Cricket Wireless** 11/13/2014 City; State; Zip Code Amount (\$) Payee address 615 W Slaughter Ln Austin, TX 78748 \$338.11 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Cell Phones for campaign staff **PURPOSE** Office Overhead/Rental Expense OF **EXPENDITURE** _ Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Рауее пате Facebook Ads 11/03/2014 Amount (\$) Payee address City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025 \$99.32 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Facebook Advert Fee **PURPOSE** Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Potitical Committee Advertising Expense Accounting/Banking Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Food/Beverage Expense Polling Expense Travel In District Travel Out Of District Consulting Expense Event Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Scruggs, Edward (Mr.) Schedule: 2/13 Report: 50/61 09090909 4 Date 5 Payee name 12/01/2014 Facebook Ads 6 Amount (\$) Payee address City; State; Zip Code 1 Hacker Way \$39,17 Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Facebook Advertising Fee Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/21/2014 HEB #068 Food Store Amount (\$) Payee address City; State; Zip Code 5800 W. Slaughter Ln \$12.19 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Description (if travel outside of Texas, complete Schedule T) **PURPOSE** Staff food/beverages Food/Beverage Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 12/02/2014 HEB #068 Food Store Amount (\$) Payee address City; State; Zip Code 5800 W. Slaughter Ln Austin, TX 78749 \$18.91 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Fund raising event - in-kind donation expense Food/Beverage Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Oak Hill Gazette 10/27/2014 Amount (\$) Pavee address City: State: Zip Code 6705 Hwy 290 W Ste 502 # 265 Austin, TX 78735 \$350.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Local newspaper Advert Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Consulting Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Legal Services Travel in District Travel Out Of District Food/Beverage Expense Pollina Expense Event Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE # Scruggs, Edward (Mr.) 09090909 Schedule: 3/13 Report: 51/61 5 Payee name 4 Date Oak Hill Gazette 12/02/2014 Pavee address City: State: Zip Code 6 Amount (\$) 6705 Hwy 290 W Ste 502 # 265 Austin, TX 78735 \$354.00 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 Print ad in local newspaper PURPOSE Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: Candidate / Officeholder name 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Office Depot Store # 2784 12/02/2014 Payee address City: State: Zip Code Amount (\$) 2620 W Anderson Ln \$80.92 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description 7 Photo Envelopes & staff food items **PURPOSE** Office Overhead/Rental Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Pavee name Date OfficeMax 11/29/2014 Amount (\$) Payee address City; State; Zip Code 5400 Brodie Ln \$89.97 Austin, TX 78745 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Inkiet Cartridges **Printing Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name PavPa! 10/27/2014 Amount (\$) Payee address City; State; Zip Code 2145 Hamilton Ave \$3.20 San Jose, CA 95125 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Transaction fee for on-line donation **PURPOSE** Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

POLITICAL EXPENDITURES			SCHEDULE F	
Advertising Expense Gilts/Awards/Memorial Expense Salaries/Wages/Cor Accounting/Banking Legal Services Solicitation/Fundrais Consulting Expense Food/Beverage Expense Travel In District Event Expense Polling Expense Travel Out Of Distric		Solicitation/Fundraising Expo Travel In District Travel Out Of District Office Overhead/Rental Exp	ntract Labor sing Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee ental Expense OTHER (enter a category not listed above)	
1 PAGE# Schedule: 4/13 f	2 FILER NAME Scruggs, Edward	ard (Mr.)	3 ACCOUNT # (TEC filers 09090909	
4 Date 10/27/2014	5 Payee name PayPal			
6 Amount (\$) \$41.80	7 Payee address City; S 2145 Hamilton Ave San Jose, CA 95125	State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (if travel outside of Texas, complete Schedule T) Transaction fee for on-line donations	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Check if Austin, TX, officeholder living expense Office sought: Office held:	
Date	Payee name PayPal			
10/27/2014 Amount (\$)	Payee address City; S	State; Zip Code	 	
\$16.85	2145 Hamilton Ave San Jose, CA 95125			
PURPOSE OF EXPENDITURE	Calegory (See Categories listed at th Accounting/Banking	e top of this schedule) D	Description (If travel outside of Texas, complete Schedule 1) [Fransaction fee for on-line donations	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	<u></u> c	Check if Austin, TX, officeholder living expense Office sought: Office held:	
Date 10/28/2014	Payee name PayPal			
Amount (\$)		State; Zip Code		
\$1.32	2145 Hamilton Ave San Jose, CA 95125			
PURPOSE OF EXPENDITURE	Category (See Categories listed at th Accounting/Banking	e top of this schedule) D T	Description (If travel outside of Texas, complete Schedule T) [ransaction fee for on-line donations	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	(□ c	Check if Austin, TX, officeholder living expense Office sought: Office held:	
Date	Рауее пате РауРа!			
10/29/2014 Amount (\$)	,	State; Zip Code		
\$2.63	2145 Hamilton Ave San Jose, CA 95125	,		
PURPOSE OF EXPENDITURE	Category (See Categories listed at th Accounting/Banking	e top of this schedule) D	Description (If travel outside of Texas, complete Schedule T) [ransaction fee for on-line donations	
_	0		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought: Office held:	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Event Expense Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME PAGE # 3 ACCOUNT # (TEC filers) Scruggs, Edward (Mr.) Schedule: 5/13 Report: 53/61 09090909 Date 5 Payee name PayPai 11/03/2014 6 Amount (\$) Payee address City; State; Zip Code 2145 Hamilton Ave \$4.10 San Jose, CA 95125 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Transaction fee for on-line donations Accounting/Banking **OF EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name PayPal 11/09/2014 Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$74.26 San Jose, CA 95125 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Transaction fees for on-line donations. Description **PURPOSE** Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure Candidate / Officeholder name Office sought: Office held: to benefit C/OH Date Payee name 11/12/2014 PayPal Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$14.83 San Jose, CA 95125 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Transaction fee for on-line donations PURPOSE Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date PayPal 11/14/2014 Amount (\$) Pavee address City: State: Zip Code 2145 Hamilton Ave \$24.10 San Jose, CA 95125 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Transaction fees for on-line donations. Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Office held:

Office sought:

SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Gitts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Event Expense OTHER (enter a category not listed above) Office Overhead/Rental Expense Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME PAGE # Scruggs, Edward (Mr.) 09090909 Schedule: 6/13 Report: 54/61 Date 5 Payee name PayPal 11/14/2014 City; State; Zip Code Payee address 6 Amount (\$) \$12.80 2145 Hamilton Ave San Jose, CA 95125 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 Transaction Fees for on-line donations **PURPOSE** Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name Date **PayPal** 11/16/2014 Payee address City: State: Zip Code Amount (\$) 2145 Hamilton Ave \$6.40 San Jose, CA 95125 Calegory (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Transaction fees for on-line donations. **PURPOSE** Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date PayPal 11/17/2014 City; State; Zip Code Amount (\$) Payee address 2145 Hamilton Ave \$3.20 San Jose, CA 95125 Description (If travel outside of Texas, complete Schedule T) Transaction fees for on-line donations. Category (See Categories listed at the lop of this schedule) **PURPOSE** Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/17/2014 **PayPat** Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$16.85 San Jose, CA 95125 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Transaction fees for on-line donations **PURPOSE** Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Consulting Expense Gitts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Food/Beverage Expense **Event Expense** Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Scruggs, Edward (Mr.) Schedule: 7/13 Report: 55/61 09090909 4 Date 5 Payee name PavPal 11/18/2014 6 Amount (\$) Payee address City; State; Zip Code 2145 Hamilton Ave \$6.10 San Jose, CA 95125 8 (a) Category (See Categories listed at the top of this schedute) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Transaction fees for on-line donations. Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/20/2014 PayPal Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$6.98 San Jose, CA 95125 Category (See Categories listed at the top of this schedule) Description (It travel outside of Texas, complete Schedule T) Transaction fees for on-line donations. PURPOSE Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/21/2014 PayPal Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$1.75 San Jose, CA 95125 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Transaction fees for on-line donations. **PURPOSE** Accounting/Banking OF EXPENDITURE ___ Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name PayPal 11/21/2014 Amount (\$) Pavee address City: State: Zip Code 2145 Hamilton Ave \$85.57 San Jose, CA 95125 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Transaction fees for on-line donations. Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

Texas Ethics Commission P.O.Box 12070 Austin. Texas 78711-2070

POLITIC	AL EXPENDITURES		SCHEDULE F	
	EXPENDITURE CATE	GORIES		
Advertising Expe Accounting/Bank Consulting Expel Event Expense Fees	ng Legal Services Solicitation/Fur ise Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of C	ndraising Expense Transportal Contribution District Candida nd/Rental Expense OTHER (er	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By te/Officeholder/Political Committee nter a category not listed above)	
1 PAGE#	2 FILER NAME Scruggs, Edward (Mr.)		3 ACCOUNT # (TEC filers) 09090909	
Schedule: 8/13 F	5 Payee name		09090909	
11/24/2014	PayPal			
6 Amount (\$) \$18.30	7 Payee address City; State; Zip Code 2145 Hamilton Ave San Jose, CA 95125			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Transaction fees for on		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Check if Austin, TX, officeholder living expense Office sought: Office held:			
Date	Payee name		- -	
11/26/2014 Amount (\$)	PayPai Payee address City; State; Zip Code			
\$8.15	2145 Hamilton Ave San Jose, CA 95125			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outs Transaction fees for on Check if Austin, TX, officeho		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:	
Date	Payee name			
11/28/2014 Amount (\$)	PayPal Payee address City; State; Zip Code			
\$29.05	2145 Hamilton Ave San Jose, CA 95125			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description (If travel outs Transaction fees for on	ide of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, office to Office sought:	older living expense Office held:	
Date	Payee name			
12/01/2014	PayPal Payon address City: State: 7in Code			
Amount (\$) \$64.75	Payee address City; State; Zip Code 2145 Hamilton Ave San Jose, CA 95125			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Transaction fees for on		
Complete ONLY if	Candidate / Officeholder name	Office sought:	older living expense Office held:	
direct expenditure to benefit C/OH	Cardidate / Chicerolder Hatte	Onice sough.	Оже пец.	

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Event Expense Polling Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME PAGE # 3 ACCOUNT # (TEC filers) Scruggs, Edward (Mr.) Schedule: 9/13 Report: 57/61 09090909 4 Date 5 Payee name **PayPal** 12/01/2014 6 Amount (\$) Payee address City; State; Zip Code 2145 Hamilton Ave \$23.40 San Jose, CA 95125 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Transaction fees for on-line donations. Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name PayPal 12/02/2014 Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$27.00 San Jose, CA 95125 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Transaction fees for on-line donations. **PURPOSE** Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Complete ONLY if Candidate / Officeholder name Office held: direct expenditure to benefit C/OH Date Payee name PayPa1 12/03/2014 Payee address City; State; Zip Code Amount (\$) 2145 Hamilton Ave \$33.27 San Jose, CA 95125 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Transaction fees for on-line donations. **PURPOSE** Accounting/Banking OF EXPENDITURE ___ Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name Date PayPal 12/04/2014 Amount (\$) Pavee address City: State: Zip Code 2145 Hamilton Ave \$37.62 San Jose, CA 95125 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE Transaction fees for on-line donations. Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Contributions/Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Event Expense Office Overhead/Rental Expense OTHER (enter a calegory not listed above) The INSTRUCTION GUIDE explains how to complete this form. 3 ACCOUNT # (TEC lilers) 2 FILER NAME PAGE # Scruggs, Edward (Mr.) 09090909 Schedule: 10/13 Report: 58/61 5 Payee name 4 Date Randall's Food Store 12/02/2014 Pavee address City; State; Zip Code 6 Amount (\$) \$62.94 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** Fund rasing event Food/Beverage Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Office held: g Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Randall's Food Store 12/02/2014 Pavee address City: State: Zip Code Amount (\$) \$137.43 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Fund Raising event Food/Beverage Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name Rindy & Associates 10/26/2014 Payee address City; State; Zip Code Amount (\$) 2401 East 6th St # 1007 \$8,500.00 Austin, TX 78702 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Campaign Mailer Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Rindy & Associates 11/19/2014 Amount (\$) Payee address City; State; Zip Code 2401 East 6th St # 1007 Austin, TX 78702 \$7,500.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Media Services Advertising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES**

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

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

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out OI District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Polling Expense Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# 2 Scruggs, Edward (Mr.) Schedule: 11/13 Report: 59/61 09090909 5 Payee name 4 Date Rindy & Associates 12/04/2014 Payee address City; State; Zip Code 6 Amount (\$) 2401 East 6th St # 1007 \$16,045,00 Austin, TX 78702 (a) Category (See Categories listed at the top of this schedule) (if travel outside of Texas, complete Schedule T) 8 (b) Description **PURPOSE** Produce Mail out materials Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name The UPS Store 10/27/2014 City; State; Zip Code Amount (\$) Payee address 4301 W. William Cannon Dr \$6.00 Suite B 150 Austin, TX 78749 Description (If travel outside of Texas, complete Schedule T) Notary Public fee - wittness signature of Campaign Category (See Categories listed at the top of this schedule) **PURPOSE** Fees OF Finance Rpt **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office saught: Office held: direct expenditure to benefit C/OH Date Pavee name **US Post Office** 11/24/2014 Payee address City; State; Zip Code Amount (\$) Northcross Station \$980.00 Austin, TX 78757-9998 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Postage fee for mail-outs PURPOSE Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name **US Post Office** 11/24/2014 Pavee address City: State: Zip Code Amount (\$) Chimney Corners Station Austin, TX 78731-9998 \$980.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** US Postage for campaign mail-outs Advertising Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense

Office held:

Office sought:

P.O.Box 12070

SCHEDULE F POLITICAL EXPENDITURES **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District **Event Expense** Pollina Expense OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME PAGE # Scruggs, Edward (Mr.) 09090909 Schedule: 12/13 Report: 60/61 5 Payee name 4 Date **US Post Office** 12/02/2014 6 Amount (\$) Payee address City; State; Zip Code Northcross Station \$539.00 Austin, TX 78757-9998 (If travel outside of Texas, complete Schedule T) (b) Description (a) Category (See Categories listed at the top of this schedule) 8 US Postal fees for campaign mail-outs **PURPOSE** Advertising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: g Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 12/06/2014 **US Post Office** Payee address City; State; Zip Code Amount (\$) Oak Hill Station \$1,127.00 Austin, TX 78749 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Postage stamps for campaign mailing materials **PURPOSE** Advertising Expense ΩE **EXPENDITURE** Check if Austin, TX, officeholder living expense Office sought: Office held: Complete ONLY if Candidate / Officeholder name direct expenditure to benefit C/OH Date Payee name 12/02/2014 Wattles, Matthew (Mr.) Payee address City; State; Zip Code Amount (\$) 6513 Harrogate Dr Austin, TX 78759 \$140.00 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description Block Walking **PURPOSE** Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure Date Payee name Worley Printing 11/14/2014 Amount (\$) Payee address City: State: Zip Code 3217 N IH35 Frontage Rd \$86.60 Austin, TX 78722 Description (If travel outside of Texas, complete Schedule T) 500 Tiny Labels for campaign items Category (See Categories listed at the top of this schedule) **PURPOSE Printing Expense** EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Event Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Gifts/Awards/Memorial Expense Legal Services Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Food/Beverage Expense Polling Expense Travel In District Travel Out Of District Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Scruggs, Edward (Mr.) Schedule: 13/13 Report: 61/61 09090909 4 Date 5 Payee name 11/18/2014 Worley Printing 6 Amount (\$) Payee address City; State; Zip Code 3217 N IH35 Frontage Rd Austin, TX 78722 \$251.14 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE 1000 Lapel stickers and 2700 small stickers for **Printing Expense** OF campaign materials EXPENDITURE Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/20/2014 **Worley Printing** Payee address City; State; Zip Code Amount (\$) 3217 N IH35 Frontage Rd \$507.69 Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** 1500 Pushcards/door hangers for campaigning **Printing Expense** OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/25/2014 Worley Printing Amount (\$) Payee address City; State; Zip Code 3217 N IH35 Frontage Rd \$42.22 Austin, TX 78722 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** 1000 Small Stickers for campaign materials **Printing Expense** OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH