(512)463-5800 TDD 1-800-735-2989

	OFFICEHOLDER INANCE REPORT			FOR COVER S	M C/OH HEET PG 1
The C/OH Instruction Gui	DE explains how to complete this form.	(E	CCOUNT # thics Commission filers) 0000001	2 PAGE# 1 of 81	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Mrs. Ellen NICKNAME LAST Troxclair		MI SUFFIX	OFFICE Date Received	USE ONLY,
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: 8510 Tyhurst Dr. Austin, TX 78749	CITY;	STATE; ZIP CODE	Date Hand-delivere	d or Date Posime ked
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Leslie NICKNAME LAST Robnett		MI SUFFIX	Date Processed Date Imaged	· · · · · · · · · · · · · · · · · · ·
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); AP 2411 Sharon Lane Austin, TX 78703	PT/SUITE #;	CITY; STATE;	ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 294-3583	,	EXTENSION		
8 REPORT TYPE	January 15 30th day before		X Runoff Exceeded \$500 limit	appointment (d	campaign treasurer officeholder only) trach C/OH - FR)
9 PERIOD COVERED	Month Day Year 10/26/2014	THROUGH	Month D	Year 2014	
10 ELECTION	l.v	Primary	X Runoff [General	Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (II kn Austin City Coun		
	GO	TO PAG	2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS		Co	FORM C/OH OVER SHEET PG 2		
13 C/OH NAME Troxc	lair, Ellen (Mrs.)		14 ACCOU 000000	-	
15 NOTICE FROM POLITICAL	have been made with	otice of political expenditures by political committees to support the cal hout the candidate's or officeholder's knowledge or consent. Candidate ay receive notice of such expenditures			
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME			
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS			
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00	
	1	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 53,805.38	
EXPENDITURE TOTALS	3. TOTAL P	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZEI	D	\$ 0.00	
	4. TOTAL F	POLITICAL EXPENDITURES		\$ 37,415.51	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AYOF THE REPORTING PERIOD		\$ 80,908.93	
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD		\$ 55,000.00	
17 AFFIDAVIT					
		I swear, or affirm, under penalty is true and correct and includes a me under Title 15, Election Code	all information		
ANN FRANKLIN Notary Public, State of Texas My Commission Expires October 17, 2018 ANN FRANKLIN Signature of Candidate or Officeholder					
Sworn to and subscribe	. //	the said <u>Fillin Troxclair</u>	, this th	ne Sth day	
Signature of officer admir	anllin	Ann Franklis Print name of officer administering oath	Molas Title of office	eradministering oath	

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 1/41 Report: 3/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID#_ In-kind contribution Date Amount of contribution (\$) description (if applicable) Abbott, Sean 6 Contributor address; City; State; Zip Code \$200.00 12/03/2014 5935 Lomita Verde Circle Austin, TX 78749 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Allen Boone Humphries Robinson LLP Attorney Amount of In-kind contribution Date description (if applicable) contribution (\$) Abell, Charlotte Contributor address; 11/05/2014 City; State; Zip Code \$50.00 10933 Bexley Laле Austin, ТХ 78739 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) retired retired Date Amount of In-kind contribution contribution (\$) description (if applicable) Adam Haynes, Kerri Rowland Contributor address; 11/18/2014 City; State; Zip Code \$350.00 2800 Silverleal Circle Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution description (if applicable) contribution (\$) 11/14/2014 Contributor address; City; State; Zip Code \$350.00 7537 Cameron Road Austin, TX 78752 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Austin Apartment Association Contributor address; 11/11/2014 City; State; Zip Code \$350.00 8620 Burnet Rd., Ste. 475 Austin, TX 78757 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 2/41 Report: 4/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ut-ot-state PAC (ID# Date Amount of In-kind contribution description (if applicable) contribution (\$) Austin Board of Realtors 6 Contributor address: City: State: Zip Code \$350.00 12/04/2014 4106 Medical Parkway Austin, TX 78756 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Amount of In-kind contribution Date contribution (\$) description (if applicable) Barth, Ruth & Richard Contributor address; City; State; Zip Code \$100.00 11/09/2014 2910 Thousand Oaks Drive Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired Date Full name of contributor ut-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Beckwith, David Contributor address; 11/19/2014 City; State; Zip Code \$350.00 2711 Bartons Bluff Lane Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired Amount of contribution (\$) In-kind contribution Date description (if applicable) Bell Niesha 11/05/2014 Contributor address; City: State: Zip Code \$50.00 6640 Ruxton Lane Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired Date In-kind contribution Amount of contribution (\$) description (if applicable) Bergstrom, Tom 11/25/2014 Contributor address: City; State; Zip Code \$100.00 6102 Open Range Trail Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired

Austin, Texas 78711-2070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE # The Instruction Guide explains how to complete this form. Schedule: 3/41 Report: 5/81 2 FILER NAME Troxclair, Ellen (Mrs.) ACCOUNT # (Ethics Commission filers) 00000001 5 Full name of contributor out-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Blackridge 6 Contributor address; City; State; Zip Code 11/17/2014 \$350.00 919 Congress Avenue Ste 950 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) 9 Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Bohls, Ryan 11/16/2014 Contributor address; City; State; Zip Code \$350.00 1800 Bay Hill Drive Austin, TX 78705 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Commercial Real Estate Jones Lang LaSalle Date Amount of In-kind contribution contribution (\$) description (if applicable) Bohls, Vicki & Kirk Contributor address: 11/21/2014 City; State; Zip Code \$350.00 1800 Bay Hill Drive Austin, TX 78746 (If travel outside of Texas, complete Schedule Y) Principal occupation / Job title (See Instructions) Employer (See Instructions) Columnist Austin American Statesman Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Bonham, Jeff 11/17/2014 Contributor address; City; State; Zip Code \$350.00 6900 Indica Cove Austin, TX 78759 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Government Relations CenterPoint Energy Date Amount of In-kind contribution contribution (\$) Borgelt, Roger description (if applicable) 11/07/2014 Contributor address: City: State: Zip Code \$350.00 106 Laurel Lane Austin, TX 78705 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney **Borgelt Law**

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
F	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 4/	41 Report: 6/81
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Bowen, Jeffery	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/16/2014	6 Contributor address; City; State; Zip Code 8404 Caspian Drive Austin, TX 78749		\$50.00	! ! !
<u>_</u>	Principal occur	pation / Job title (See Instructions)	10 Employer (See In	<u> </u>	Texas, complete Schedule T)
Ľ	Contractor	anon 7 dub line (occ mandonors)	Jeffery L Bower		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 2603 Wooldridge Austin, TX 78703	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$350.00	
L				<u> </u>	Texas, complete Schedule T)
	Principal occup Consultant	oation / Job title (See Instructions)	Employer (See In Self	structions)	
j	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/24/2014	Contributor address; City; State; Zip Code 6209 Turtle Point Drive Austin, TX 78746		\$50.00	
				_ 'E	Texas, complete Schedule T)
	Principal occup retired	pation / Job title (See Instructions)	Employer (See In: retired	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Burton, Joseph Howell)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/05/2014	Contributor address; City; State; Zip Code 2113 Zach Scott Street Austin, TX 78723		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Senior Projec	ation / Job title (See Instructions) it Manager	Employer (See In: Jones Lang LaS	•	
	Date	Full name of contributor ut-of-state PAC (ID# Bury, Paul	•	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 221 West 6th Street Ste 600 Austin, TX 78701		\$350.00	
			•	(If travel outside of	Texas, complete Schedule T)
	Principal occup President	vation / Job title (See Instructions)	Employer (See in: Bury	<u> </u>	,, , _

Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 Texas Ethics Commission P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 5/41 Report: 7/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Eilen (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date description (if applicable) contribution (\$) Caldwell, Kathryn 6 Contributor address: City; State; Zip Code \$350.00 11/25/2014 2219 Tarlton Cove Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Political Self Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Cannon, Thure Contributor address; City; State; Zip Code 11/05/2014 \$350.00 7711 Ponoma Trail Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Texas Pipeline Association President In-kind contribution Date Amount of contribution (\$) description (if applicable) Cantella, Richard City; State; Zip Code 11/06/2014 Contributor address: \$50.00 7501 Shadowridge Run Unit 163 Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Memili Lynch Financial Advisor Retired Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Carr, Mindy & Snapper 11/17/2014 Contributor address; City; State; Zip Code \$200.00 4380 River Garden Trail Austin, TX 78746 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Focused Advocacy General Counsel Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Carter, Teddy Contributor address; 11/21/2014 City; State; Zip Code \$100.00 4494 Heritage Well Lane Round Rock, TX 78005 (If travel outside of Texas, complete Schedule T)

Employer (See Instructions)

Devon Energy

Principal occupation / Job title (See Instructions)

Gov Affairs

POLITICAL CONTRIBUTIONS

SCHEDULE A

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 6/	41 Report: 8/81		
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID) Cartwright, Linda	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	11/26/2014	6 Contributor address; City; State; Zip Code 8205 Forest Heights Ln Austin, TX 78749		\$40.00	 		
				(if travel outside of	Texas, complete Schedule T)		
9	Principal occup Medical Billin	pation / Job title (See Instructions) g	10 Employer (See In Self	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Casteel, William	/)	Amount of contribution (\$)	In-kind contribution description (il applicable)		
	11/10/2014	Contributor address; City; State; Zip Code PO Box 1153 Austin, TX 78767		\$350.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup President	nation / Job title (See Instructions)	Employer (See In FourOneThree	structions) Communications			
	Date	Full name of contributor ut-of-state PAC (ID# Chamberlin, Anastasia)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/05/2014	Contributor address; City; State; Zip Code 21 N 2nd Street 401 Campbell, CA 95008		\$50.00	 		
L				(If travel outside of	Texas, complete Schedule T)		
	Principal occup n/a	nation / Job title (See Instructions)	Employer (See In n/a	structions)			
	Date	Full name of contributor out-of-state PAC (ID# Chastain, Steve	£)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/18/2014	Contributor address; City; State; Zip Code 3501 Peregrine Falcon Drive Austin, TX 78746		\$100.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Retired Austin F				
	Date	Full name of contributor out-of-state PAC (ID# Chastain, Steve)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/20/2014	Contributor address; City; State; Zip Code 3501 Peregrine Falcon Dr. Austin, TX 78746		\$100.00	 		
				(il travel outside of	Texas, complete Schedule T)		
		ation / Job title (See Instructions) n Fire Captain	Employer (See In Retired		· <u></u>		

Teacher

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: 7/41 Report: 9/81 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Christian, Kevin 6 Contributor address; 11/04/2014 City; State; Zip Code \$50.00 356 Timber Ridge Lane Coppell, TX 75019 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Stewardship Resources President Amount of In-kind contribution Date contribution (\$) description (if applicable) Cloud, Michael 11/20/2014 Contributor address; City; State; Zip Code 6016 Bel Fay Lane Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) NTT Data Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Coleman, Aan & Charles 11/06/2014 Contributor address; City; State; Zip Code \$700.00 9890 Silver Mountain Drive Austin, TX 78737 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Coleman Lube Manager Full name of contributor ut-of-state PAC (ID# Date to tnuomA In-kind contribution contribution (\$) description (if applicable) Committee to Elect Jason Isaac Contributor address; City; State; Zip Code 11/08/2014 \$350.00 100 Commons Road Box 7-125 Dripping Springs, TX 78620 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) **Emptoyer (See Instructions)** Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution description (if applicable) contribution (\$) Corcoran, Nancy & Jim Contributor address; City; State; Zip Code 11/06/2014 \$700.00 3606 Saddlestring Trail Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Retired

P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 8/41 Report: 10/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID# Amount of tn-kind contribution Date description (if applicable) contribution (\$) Dalgleish, David & Sarah 6 Contributor address; City; State; Zip Code \$700.00 11/19/2014 6400 Sprucewood Drive Austin, TX 78731 (It travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Dalgleish Construction Owner Amount of In-kind contribution Date contribution (\$) description (if applicable) Daugherty, Gerald Contributor address; 11/13/2014 City; State: Zip Code \$350.00 1403 Club Ridge Cove Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) **County Commissioner Travis County** Date Full name of contributor ut-of-state PAC (tD#) Amount of In-kind contribution contribution (\$) description (if applicable) Daywood, Carl 11/19/2014 Contributor address: City; State; Zip Code \$250.00 11231 Tracton Lane Suite 200 Austin, TX 78739 (If travel outside of Texas, complete Schedule ?) Principal occupation / Job title (See Instructions) Employer (See Instructions) Realtor self Date Amount of In-kind contribution description (if applicable) contribution (\$) Dickey, James 11/20/2014 Contributor address; City; State; Zip Code \$350.00 5213 Green Thread Trail Spicewood, TX 78669 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **IMGA** Marketing Full name of contributor ut-of-state PAC (ID#) Date Amount of In-kind contribution contribution (\$) description (if applicable) Dieter, Robert Contributor address; City; State; Zip Code 11/17/2014 \$50.00 8204 Navidad Drive Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) retired retired

retired

Texas Ethics Commission POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 9/41 Report: 11/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor out-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Doner Kate, Craig Chick 11/17/2014 6 Contributor address; City; State; Zip Code \$50.00 815 Brazos Street Ste 701 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) **Doner Fundraising** Full name of contributor ut-of-state PAC (ID#) Amount of In-kind contribution Date description (if applicable) contribution (S) Dow, Melanie & James Contributor address; City; State; Zip Code 11/18/2014 \$350.00 2523 Exposition Boulevard Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Date Amount of In-kind contribution contribution (\$) description (If applicable) Durham, Alex Contributor address; 11/21/2014 City; State; Zip Code \$350.00 915 A Beaver Trail Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Broker Amount of In-kind contribution Date description (if applicable) contribution (\$) Dwyer, James 11/14/2014 Contributor address; City; State; Zip Code \$100.00 4100 Gochman Street Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) CH2M HILL Engineer Date Amount of In-kind contribution contribution (\$) description (if applicable) Edwards, Rosemary Contributor address: City; State; Zip Code 12/04/2014 \$25.00 6528 Heron Dr Austin, TX 78759 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

	OTHER THAN PLEDGES ON LOANS							
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 10	0/41 Report: 12/81			
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)			
4	Date	5 Full name of contributor out-of-state PAC (ID# Elliott, Ellen & John	<u>; </u>	7 Amount of contribution (\$)	B In-kind contribution description (if applicable)			
	12/05/2014	6 Contributor address; City; State; Zip Code 1036 Liberty Park Drive Apt 35 Austin, TX 78746		\$700.00	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Partner	oation / Job title (See Instructions)	10 Employer (See In Smith, Robertso	structions) on, Elliott & Dougl	as, L.L.P.			
	Date	Full name of contributor ut-of-state PAC (ID# Ellis, Amy & Christopher)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	12/01/2014	Contributor address; City; State; Zip Code 4408 Long Champ #10 Austin, TX 78746		\$350.00	 			
L				, ·	Texas, complete Schedule T)			
	Principal occup Founding Pri	vation / Job title (See Instructions) ncipal	Employer (See In Endeavor Real					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (il applicable) Event supplies			
	11/17/2014	Contributor address; City; State; Zip Code 200 Congress Ave. #40FF Austin, TX 78701		\$104.83	! ! !			
				(If travel outside of	Texas, complete Schedule 1)			
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In Self	structions)				
	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 200 Congress Ave. #40FF Austin, TX 78701		\$245.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Consultant	vation / Job title (See Instructions)	Employer (See In Self	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Espinosa, Carlos)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	11/19/2014	Contributor address; City; State; Zip Code 2800 Barton's Bluff Lane Apt 1604 Austin, TX 78746		\$100.00	1 1 1			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup Staff	ation / Job title (See Instructions)	Employer (See In Railroad Comm					

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 11/41 Report: 13/81 (Ethics Commission filers) ACCOUNT # 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ☐ out-of-state PAC (ID#_ In-kind contribution Date Amount of description (if applicable) contribution (\$) Farmer, Gary 11/17/2014 6 Contributor address: City; State; Zip Code \$350.00 309 Lake Clift Trail Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Heritage Title Company of Austin, Inc. President In-kind contribution Date Amount of contribution (\$) description (if applicable) Feil, David Contributor address; City; State; Zip Code \$50,00 11/06/2014 7601 Rialto Blvd #1524 Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Sachem, Inc. Accountant In-kind contribution Date Amount of contribution (\$) description (if applicable) Follett, Brian & Bernice 12/03/2014 Contributor address: City; State; Zip Code \$700.00 5600 Craggy Point Austin, TX 78731 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date In-kind contribution Amount of contribution (\$) description (if applicable) Foster, Col. James 12/03/2014 Contributor address; City; State; Zip Code \$50.00 8006 El Dorado Drive Austin, TX 78737 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Civil Engineer Date Full name of contributor ut-of-state PAC (1D# Amount of In-kind contribution contribution (\$) description (if applicable) Gale, Brien Contributor address; City; State; Zip Code 11/05/2014 \$350.00 700 Shady Lane Court Highland Village, TX 75077 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Pharmacist** Texas Health Resources

Consultant

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: 12/41 Report: 14/81 (Ethics Commission filers) ACCOUNT # 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor out-of-state PAC (ID#) In-kind contribution Date Amount of description (il applicable) contribution (\$) Gale, Susan & Rex 6 Contributor address; City; State; Zip Code \$700.00 11/05/2014 2 Otter Road Hilton Head Island, SC 29928 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Blue Cross Blue Shield SC Healthcare Consultant In-kind contribution Full name of contributor ut-of-state PAC (ID# Amount of Date contribution (\$) description (if applicable) Garza, Melissa & Silver Contributor address; City; State; Zip Code 12/02/2014 \$700.00 8101 Ravello Ridge Cove Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Business Manager** Self Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Gatewood, Roger Contributor address; City; State; Zip Code 11/06/2014 \$350.00 4400 Twisted Tree Drive Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired USAF and State Govt Retired USAF and State Govt In-kind contribution Date Amount of contribution (\$) description (if applicable) Gold, Mira & Bradley 11/21/2014 Contributor address; City; State; Zip Code \$100.00 7908 Adelaide Drive Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Emptoyer (See Instructions) Full name of contributor ut-of-state PAC (ID# Amount of in-kind contribution Date description (if applicable) contribution (\$) Goldman, Adam Contributor address; City; State; Zip Code \$25.00 11/17/2014 1901 Hill Oaks Court Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Capitol Partners Consulting

Te	xas Ethics Com	nmission P.O.Box	12070	Austin,	Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
		CAL CONTRIB THAN PLEDG		IAO.	NS		SCHEDULE A
	The Instruction	он Guide explains how to con	nplete this form.			1 PAGE# Schedule: 13	8/41 Report: 15/81
2	FILER NAME	Troxclair, Ellen (Mrs.)				3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Goldman, Jenn	out-of-state F	AC (ID#	·)	7 Amount of contribution (S)	In-kind contribution description (il applicable)
	11/17/2014	6 Contributor address; 1901 Hill Caks Court Austin, TX 78703	City: State: Zip	Code		\$25.00	
	1	<u> </u>				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	pation / Job title (See Instruction	ns)		10 Employer (See Ins Malish & Cowan		
	Date	Full name of contributor Grant, Kathryn	out-of-state P	AC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/06/2014	Contributor address; 915 W Johanna Street Austin, TX 78704	City; State; Zip	p Code		\$200.00	<u>{</u>
		1				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	pation / Job title (See Instruction	ns) .		Employer (See Ins Self	tructions)	
	Date	Full name of contributor Grimes, Jennifer & Michae		AC (ID#	,)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event supplies
	11/24/2014	Contributor address; 2009 Real Catorce Austin, TX 78746	City; State; Zip	p Code		\$146.12	! ! !
						(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	pation / Job title (See Instruction	ns)		Employer (See Ins Self	structions)	
	Date	Full name of contributor Gross, L.COL Donald W.	Out-of-state P	AC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/26/2014	Contributor address; 4509 Grider Pass Austin, TX 78749	City; State; Zip) Code		\$100.00	
						<u> </u>	Texas, complete Schedule T)
	Principal occup Real Estate 8	oation / Job title (See Instruction Broker	ns)		Employer (See Ins Self	structions)	
	Date	Full name of contributor Gross, L.COL Donald W.	out-of-state P	AC (ID#		Amount of ∞ntribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; 4509 Grider Pass Austin, TX 78749	City; State; Zip	Code		\$100.00	
						(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instruction	ns)		Employer (See Ins	structions)	

TDD 1-800-735-2989 Austin, Texas 78711-2070 (512)463-5800 Texas Ethics Commission P.O.Box 12070 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 14/41 Report: 16/81 (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) ACCOUNT # 00000001 In-kind contribution 5 Full name of contributor ut-of-state PAC (ID# Amount of Date contribution (\$) description (if applicable) Guenthner, David City; State; Zip Code 6 Contributor address; \$100.00 11/23/2014 6114 Gardenridge Hollow Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Senior Director for Public Affairs In-kind contribution Full name of contributor out-of-state PAC (ID# Amount of Date description (il applicable) contribution (\$) Hackney, Susan & Clint Contributor address; City; State; Zip Code \$700.00 11/17/2014 PO Box 163164 Austin, TX 78716 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self In-kind contribution Date Amount of contribution (\$) description (if applicable) Hale, Justin 12/06/2014 Contributor address; City; State; Zip Code \$150.00 1411 Devonshire Tyler, TX 75703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Policy Analys	ation / Job file (See instructions)	State of Texas	siructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/13 <i>[</i> 2014	Contributor address; City; State; Zip Code 1052 Overlook Road Berkeley, CA 94708		\$350.00 	
			(If travel outside of To	exas, complete Schedule T)
Principal occup President	pation / Job title (See Instructions)	Employer (See In Touchstone Go		
Date	Full name of contributor ut-of-state PAC (ID# Harris, Vincent		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/05/2014	Contributor address; City; State; Zip Code 708 East Monroe Austin, TX 78704		\$25.00	
			(If travel outside of To	exas, complete Schedule T)
Principal occur CEO	oation / Job title (See Instructions)	Employer (See In Harris Media	structions)	
				Electronic Filing Version 3.4.0

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	ON GUIDE explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE#	/41 Report: 17/81
2	FILER NAME	Troxclair, Ellen (Mrs.)	- -	3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; City; State; Zip Code 5804 Magee Bend Austin, TX 78749		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	pation / Job title (See Instructions)	10 Employer (See In Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (# applicable)
	11/11/2014	Contributor address; City; State; Zip Code 8140 Exchange Drive Austin, TX 78754		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
H	Date	Full name of contributor ut-ol-state PAC (ID#)	Amount of	In-kind contribution
		Heckler, Jeffrey	,	contribution (S)	description (if applicable)
	11/14/2014	Contributor address; City: State; Zip Code 1301 Nueces Street Ste 200 Austin, TX 78701		\$150 .00	(
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Lobbyist	ation / Job title (See Instructions)	Employer (See In GovBiz Partners		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/27/2014	Contributor address; City; State; Zip Code 6628 Estana Lane Austin, TX 78739		\$150.00	!
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Dentist	vation / Job title (See Instructions)	Employer (See In: Hedgecock Der		•
	Date	Full name of contributor ut-of-state PAC (ID# Herring, Pat & Greg)	Amount of contribution (\$)	in-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code 6502 Tom Kite Circle Austin, TX 78746		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	vation / Job title (See Instructions)	Employer (See In The Herring Gro	structions)	The second secon

POLITICAL CONTRIBUTIONS

SCHEDULE A

	OTHER	THAN PLEDGES OR LOAD	N5		
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 16	/41 Report: 18/81
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/05/2014	6 Contributor address; City; State; Zip Code 405 Brady Lane Austin, TX 78746		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	oation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
	Dale	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (il applicable)
	11/15/2014	Contributor address; City; State; Zip Code 40 Pascal Lane Austin, TX 78746		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In Self	1	Total, compete contains 1)
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 7403 Mifflin Kenedy Terrace Austin, TX 78749		\$300.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup n/a	ation / Job title (See Instructions)	Employer (See In n/a	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/24/2014	Contributor address; City; State; Zip Code 2100 Greenwood Avenue Austin, TX 78723		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Hock, Stacy & Joel	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/19/2014	Contributor address; City; State; Zip Code 3331 Westlake Drive Austin, TX 78746		\$700.00	[].
				(II travel outside of	Texas, complete Schedule 1)
		ation / Job title (See Instructions)	Employer (See In	•	<u> </u>
	Philanthropist	1	Self		

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
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F	The Instruction	อง Guioe explains how to complete this form.		1 PAGE# Schedule: 17	/41 Report: 19/81
2	FILER NAME	Troxclair, Ellen (Mrs.)	 	3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID) Holt, William & Sandra	})	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd #17 Austin, TX 78735		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In Retired	structions)	
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd #17 Austin, TX 78735		\$350.00	
				(if travel outside of	Texes, complete Schedule T)
	• •	pation / Job title (See Instructions)	Employer (See in	structions)	
	retired		retired		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 3200 Grandview Street #16 Austln, TX 78705	:	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	pation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; City; State: Zip Code 229 Kingston Avenue Charlotte, NC 28203		\$350.00	[
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Founder	ation / Job title (See Instructions)	Employer (See In: Hopper Commu		
	Date	Full name of contributor ut-of-state PAC (ID# Hosek, Chandra & Chris)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 1401 Bay Hill Drive Austin, TX 78746		\$700.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins H2 Strategic Co		

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 18/41 Report: 20/81 (Ethics Commission filers) 3 ACCOUNT# 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 In-kind contribution description (if applicable) 5 Full name of contributor ☐ out-of-state PAC (ID# Date Amount of contribution (\$) Hosek, Curtis Event supplies \$100.00 6 Contributor address; City; State; Zip Code 11/21/2014 511 Lockland Lane League City, TX 77573 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Clear Creek ISD Teacher In-kind contribution Amount of Date contribution (\$) description (if applicable) Hosek, Trudy Contributor address; City; State; Zip Code 11/17/2014 \$350.00 162 County Road 340 Gonzales, TX 78629 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Full name of contributor ut-ol-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Howard, Anne Contributor address; 11/24/2014 City; State; Zip Code \$146.12 4504 Dusik Lane Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Emptoyer (See Instructions) In-kind contribution Date Full name of contributor ut-of-state PAC (ID# Amount of description (if applicable) contribution (\$) Howard, Jay Contributor address; City; State; Zip Code 11/24/2014 \$350.00 823 Congress Avenue Ste 900 Austin, TX 78701 (if travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant HillCo In-kind contribution Date Amount of contribution (\$) description (if applicable) Hurst, Bradley Contributor address; 11/05/2014 City; State; Zip Code \$25.00 8302 Moccasin Path Austin, TX 78736 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Nuclear Physicist Bridgeport Instruments**

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 19	/41 Report: 21/81
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor	.)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/18/2014	6 Contributor address; City; State; Zip Code 8302 Moccasin Path Austin, TX 78736		\$100.00	
			:	(If travel outside of	Texas, complete Schedule T)
9	Principal occup Director of Ac	ation / Job title (See Instructions) dvancement	10 Employer (See In City School	structions)	
	Dale	Full name of contributor ul-of-state PAC (ID# Hutchens, Mia)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event supplies
	11/21/2014	Contributor address; City; State; Zip Code 1500 Woodlawn Boutevard #9 Austin, TX 78703	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$298.36	
				(lf travel outside of	Texas, complete Schedule T)
	Principal occup Scheduler	ation / Job title (See Instructions)	Employer (See In: Office of the Go		
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/08/2014	Contributor address; City; State; Zip Code 280 Manchester Lane Austin, TX 78737		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In: Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (il applicable)
	11/17/2014	Contributor address; City; State; Zip Code 8509 Southwest Parkway Austin, TX 78746		\$250.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate B	ation / Job title (See Instructions) Groker	Employer (See In: Self	structions)	
	Date	Full name of contributor out-of-state PAC (ID# Johnson, Allison)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event supplies
	11/24/2014	Contributor address; City; State; Zip Code 4612 Dusik Lane Austin, TX 78746		\$146.12	
				(If traval outcide of	Texas, complete Schedule T)
	Principal occup n/a	ation / Job title (See Instructions)	Employer (See In		

Director

Austin, Texas 78711-2070 (512)463-5800 P.O.Box 12070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guipe explains how to complete this form. Schedule: 20/41 Report: 22/81 2 FILER NAME Troxclair, Ellen (Mrs.) ACCOUNT # (Ethics Commission filers) 00000001 5 Full name of contributor Out-of-state PAC (ID# in-kind contribution Amount of Date contribution (\$) description (il applicable) Johnson, David 6 Contributor address; City; State; Zip Code \$350.00 12/05/2014 8921 Lanna Bluff Loop Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) **Executive Director** Centex Independent Electrical Contractors Association Full name of contributor out-of-state PAC (ID# Amount of tn-kind contribution Date contribution (\$) description (if applicable) Johnson, Robert A. 11/24/2014 Contributor address; City: State: Zip Code \$350,00 4612 Dusik Lane Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self Date Amount of In-kind contribution description (if applicable) contribution (\$) Johnston, David 11/05/2014 Contributor address: City: State; Zip Code \$250.00 116 Birnam Wood Courl Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Community Supporter Self Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Jordan, Emily Contributor address; City; State; Zip Code 11/06/2014 \$350.00 4438 E Hove Loop Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Optometrist Master Eve Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution description (if applicable) contribution (\$) Joseph, John Contributor address: City; State; Zip Code 12/04/2014 \$25.00 4231 Westlake Austin, TX 78746 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

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		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	อง Guide explains how to complete this form.		1 PAGE#	/44 D
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	/41_Report: 23/81 (Ethics Commission filers)
4	Date	5 Full name of contributor	;)	7 Amount of contribution (\$)	8
	12/01/2014	6 Contributor address; City; State; Zip Code 1805 Frazier Austin, TX 78704		\$19.00	
9	Principal occup Retired	pation / Job title (See Instructions)	10 Employer (See In Retired	<u> </u>	Texas, complete Schedule T)
	Date	Full name of contributor ut-of-state PAC (ID#	!)	Amount of	In-kind contribution
		Kearns, Dennis		contribution (\$)	description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 1001 Congress Avenue Ste 450 Austin, TX 78701		\$150.00	
				,	Texas, complete Schedule T)
	Principal occup General Cour	pation / Job title (See Instructions) nsel	Employer (See In TX Railroad Ass		
	Date	Full name of contributor out-of-state PAC (iD# Keathley, Trina & Ryan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State; Zip Code 417 Honeycomb Ridge Austin, TX 78746		\$150.00	
			·	(If travel outside of	Texas, complete Schedule T)
	Principal occup Senior VP	oation / Job title (See Instructions)	Employer (See In Southwest at In	structions) dCor Properties, I	nc
	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 2430 Austin, TX 78768		\$350.00	 -
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Manager	pation / Job title (See Instructions)	Employer (See In Exelon Corpora	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/17/2014	Contributor address; City; State; Zip Code 2101 W 10th Street		\$350.00	
		Austin, TX 78703)
	Principal occup Consultant	eation / Job title (See Instructions)	Employer (See In Blackridge	l '.	Texas, complete Schedule T)

	POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS				SCHEDULE A	
	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 22	2/41 Report: 24/81	
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor out-of-state PAC (ID# Kernan, Michael	!	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/30/2014	6 Contributor address; City; State; Zip Code 2316 Sully Creek Dr Austin, TX 78748		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Security Spec	pation / Job title (See Instructions) cialist	10 Employer (See In Homeland Secu			
	Date	Full name of contributor out-of-state PAC (ID# Kever, Andrew	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/05/2014	Contributor address; City; State; Zip Code 6105 Highland Hills Drive Austin, TX 78731		\$350.00	! 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)		ployer (See Instructions)		
	Attorney		Enoch Kever Pt	Enoch Kever PLLC		
	Date	Full name of contributor out-of-state PAC (ID# Kinghorn, Austin		Amount of contribution (S)	In-kind contribution description (if applicable)	
	11/07/2014	Contributor address; City; State; Zip Code 12323 Limerick Avenue Austin, TX 78758		\$350.00	I 	
				(If travel outside of	Texas, complete Schedule 1)	
Principal occupation / Job title (See Instructions) Staff Attorney			Employer (See in: Supreme Court	•		
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/06/2014	Contributor address; City; State; Zip Code 1034 Hidden Hills Drive Dripping Springs, TX 78620		\$25.00	1 	
				(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Consultant		Employer (See In	<u> L'</u>			
	Date	Full name of contributor out-of-state PAC (ID# Kooker, Kay & Steve)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/08/2014	Contributor address; City; State; Zip Code 3961 Sendero Drive Austin, TX 78735		\$100.00	 	
		Toronii, IV 10100) _	
	Drinelant	ation / Joh title /Con (page ations)	Employee (Can to	<u> </u>	Texas, complete Schedule T)	
	n/a	ation / Job title (See Instructions)	Employer (See In: n/a	structions)		

Texas Ethics Commission

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 23/41 Report: 25/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Kuykendall, Brant 6 Contributor address; City; State; Zip Code \$50.00 11/05/2014 3908 Danli Lane Austin, TX 78749 (If travel outside of Toxes, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) VMWare, Inc Consultant in-kind contribution Amount of Date contribution (\$) description (if applicable) Lamm, Jennifer Contributor address; City; State; Zip Code \$200.00 11/24/2014 6502 Lost Cove Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Property Manager **Bell Southwest Austin** Date Amount of In-kind contribution contribution (\$) description (if applicable) Lawson, Richard 11/21/2014 Contributor address; City; State; Zip Code \$350.00 1106 Canyon Maple Road Pflugerville, TX 78660 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired In-kind contribution Date Amount of description (if applicable) contribution (\$) LeBlanc, Emily & Steve 11/16/2014 Contributor address; City; State; Zip Code \$700.00 823 Congress Ave. Suite 1111 Austin, TX 78701 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Musician Self In-kind contribution Date Amount of description (il applicable) contribution (\$) Lewis, John Contributor address; City; State; Zip Code 11/20/2014 \$350.00 3839 Bee Cave Road Ste 204 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Self John Lewis Company

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 24/41 Report: 26/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ul-of-state PAC (ID#_ In-kind contribution Date Amount of description (if applicable) contribution (\$) Lirette, Albert 6 Contributor address: City; State; Zip Code \$25.00 11/05/2014 3903 Kandy Drive Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) **Building Engineer** Retired Full name of contributor ut-of-state PAC (ID#____ Date Amount of In-kind contribution contribution (\$) description (if applicable) Locke Lord LLP Contributor address; City; State; Zip Code \$350.00 11/21/2014 600 Congress Ave., Ste. 2200 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Loonam, Timothy Contributor address; 11/06/2014 City; State; Zip Code \$350.00 2001 S Mopac Expy #2524 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) TCGT Agency Inc. Insurance Administration Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Lucero, Homero 11/16/2014 Contributor address; City; State; Zip Code \$100.00 7513 Espina Dr Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) SR VP Texas Travel Industry Association Full name of contributor ut-of-state PAC (ID# in-kind contribution Date Amount of contribution (\$) description (if applicable) Macias, Luke Contributor address; City; State; Zip Code 11/06/2014 \$350.00 31540 Smithson Valley Road Bulverde, TX 78163 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 25/41 Report: 27/81			
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID)	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	12/05/2014	6 Contributor address; City; State; Zip Code 5805 Bull Creek Rd Austin, TX 78756		\$150.00	1 1 t		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Government	ation / Job title (See Instructions) Relations	10 Employer (See In Chesapeake Er				
	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 3201 Esperanza Crossing #247 Austin, TX 78758		\$100.00	 		
		Austili, 17 70736		(if travel outside of	Texas, complete Schedule T)		
	Principal occupation / Job title (See Instructions) Solutions Architect		Employer (See In Embarcadero T				
	Date	Full name of contributor ut-of-state PAC (ID# Mahn, David	<u>+ </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/17/2014	Contributor address; City; State; Zip Code 6204 Salcon Cliff Drive Austin, TX 78749		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occupation / Job title (See Instructions) Developer		Employer (See In Benchmark Dev				
	Date	Full name of contributor ut-of-state PAC (ID# Maier, Richard N	<u> </u>	Amount of contribution (\$)	in-kind contribution description (if applicable)		
	11/21/2014	Contributor address; City; State; Zip Code 704 East 45th 1/2 Street Austin, TX 78751		\$100.00	 		
				(if travel outside of	Texas, complete Schedule T)		
-	Principal occup Homebuilder	ation / Job title (See Instructions)	Employer (See In DR Horton	istructions)	. -		
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	12/01/2014	Contributor address; City; State; Zip Code 2408 Windsor Road Austin, TX 78703	•••••	\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
一	Principal occup Managing Pri	ation / Job title (See Instructions)	Employer (See In Endeavor Real	structions)	· · · · · · ·		
1	wanaying Ph	ποιραι	LINGEAVOI DEAI	Listate Group			

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 26/41 Report: 28/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 Full name of contributor out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Massingill, Gavin 6 Contributor address; City; State; Zip Code \$350.00 12/05/2014 PO Box 1583 Austin, TX 78767 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Consultant Self In-kind contribution Amount of Date contribution (\$) description (if applicable) Massingill, Holly Contributor address; City; State; Zip Code \$350.00 12/05/2014 4907 South Crest Dr. Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Reator Self Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Matz and Company, LLC Event supplies Contributor address: City: State: Zip Code 11/17/2014 \$104.83 1001 Congress Avenue Ste 450 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Date Amount of In-kind contribution contribution (\$) description (if applicable) Mauldin, Ryan Contributor address; City; State; Zip Code 11/23/2014 \$100.00 816 Big Woods Road Longview, TX 75605 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) McClam, Janie Contributor address; City; State; Zip Code \$100.00 11/18/2014 7113 Doswell Lane Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

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 PAGE# The Instruction Guide explains how to complete this form. Schedule: 27/41 Report: 29/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 In-kind contribution Full name of contributor Out-of-state PAC (ID# Date Amount of description (if applicable) contribution (\$) McClellan, Darcy & George 6 Contributor address: City; State; Zip Code \$700.00 11/05/2014 510 Hunt Field Road Richmond, VA 23103 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) **Business Owner** In-kind contribution Amount of Date contribution (\$) description (if applicable) McGarah, Carol Contributor address; City: State; Zip Code \$350.00 11/05/2014 6201 Skahan Lane Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Blackridge Consultant Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) McGuinness, Patrick 11/18/2014 Contributor address; City: State; Zip Code \$200.00 9310 Old Lampasas Trail Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Self In-kind contribution Date Amount of contribution (\$) description (if applicable) Mitchell, Brian 11/18/2014 Contributor address; City; State; Zip Code \$50.00 2509 Quarry Road A Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Office of Rep. Workman Legislative Staff Full name of contributor ut-of-state PAC (ID#_ Amount of In-kind contribution Date contribution (\$) description (if applicable) Mock, Margaret & Raiph 11/19/2014 Contributor address; City; State; Zip Code \$50.00 6606 Beckett Road Austin, TX 78749 (If travel outside of Texes, complete Schedule T)

Employer (See Instructions)

retired

Principal occupation / Job title (See Instructions)

retired

Full name of contributor ut-of-state PAC (ID#_

City; State; Zip Code

Date

11/05/2014

Attorney

Morrison, Rick

6408 Magenta Lane Austin, TX 78739

Principal occupation / Job title (See Instructions)

Contributor address;

Amount of

contribution (\$)

\$250.00

In-kind contribution

description (if applicable)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

	Тће інѕтвистк	on Guide explains how to complete this form.		1 PAGE#			
				1	0/41 Report: 31/81		
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT#	(Elhics Commission filers)		
				0000001			
4	Date	5 Full name of contributor ut-of-state PAC (ID Niedert, Wolfgang	#)	7 Amount of contribution (\$)	tn-kind contribution description (if applicable)		
	11/19/2014	6 Contributor address; City; State; Zip Code 1216 Tamranae Court Austin, TX 78746		\$350.00	I I I		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Managing Pa	nation / Job title (See Instructions) rtner	10 Employer (See In Cielo Private Ed				
F	Date	Full name of contributor	#)	Amount of	In-kind contribution		
		Noell, John R		contribution (\$)	description (if applicable)		
	11/28/2014	Contributor address; City; State; Zip Code 3660 Stoneridge E101 Austin, TX 78746		\$350.00	! !		
		rusiii, 17707-tu			-		
Ļ			(If travel outside of Texas, complete Schedule T)				
	Engineer	valion / Job title (See Instructions)	Employer (See th UDG	structions)	***		
	Date	Full name of contributor 🔲 out-of-state PAC (ID:	#)	Amount of	In-kind contribution		
		Norman Jr., Scott		contribution (\$)	description (if applicable)		
	11/17/2014	Contributor address; City; State; Zip Code 3605 Edgemont Drive Austin, TX 78731		\$350.00	 		
		:		(if travel outside of	Texas, complete Schedule T)		
Г		ation / Job title (See Instructions)	Employer (See In				
	Executive Dir	ector	TX Association	of Builders			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	11/1 <i>4/</i> 2014	Contributor address; City; State; Zip Code 6 Sundown Parkway Austin, TX 78746		\$25 0 .00	 		
1				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Associate	ation / Job tille (See Instructions)	Employer (See In Texas Pipeline				
-	Date	Full name of contributor	# \	In IncomA	In-kind contribution		
	Date	Oswald, J William	"——— <i>1</i>	contribution (\$)	description (if applicable)		
	11/17/2014	Contributor address; City; State; Zip Code 8201 Scenic Ridge Cove Austin, TX 78735		\$350.00	I I		
		Austin, TX 78735			i		
				(If travel outside of	Texas, complete Schedule T)		
	. ,	ation / Job title (See Instructions)	Employer (See In:	structions)			
ļ	Consultant		Self				

Texas Ethics Commission

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 30/41 Report: 32/81 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 In-kind contribution description (if applicable) ut-of-state PAC (ID# Date 5 Full name of contributor Amount of contribution (\$) Pardue, Jason 6 Contributor address; City: State: Zip Code \$100.00 11/17/2014 7115 Tanaqua Lane Austin, TX 78739 (If travel outside of Texas, complete Schedule T) g Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Samuels Jewelers Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Pastor, Andrew & Linda Contributor address; City; State; Zip Code 11/27/2014 \$700.00 2908 Sparkling Brook Ln Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Endeavor Real Estate Group** Real Estate Date Amount of In-kind contribution contribution (\$) description (if applicable) Pate, Gardner Contributor address; 11/06/2014 City; State; Zip Code \$350.00 1413 Bay Hill Drive Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Locke Lord, LLP Attorney Date Full name of contributor ut-of-state PAC (iD# Amount of In-kind contribution contribution (\$) description (if applicable) Perkins, Rick 11/05/2014 Contributor address; City; State; Zip Code \$350.00 8503 El Rey Blvd Austin, TX 78737 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Chemical Engineer Chemical Logic Inc Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Phillips, Denise & Randy 11/11/2014 Contributor address; City; State; Zip Code \$700.00 8901 W Highway 71 Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Minister Life Austin

Texas Ethics Commission

i	_	CAL CONTRIBUTIONS THAN PLEDGES OR LOAI		SCHEDULE A		
	The Instruction	ON Guide explains how to complete this form.		1 PAGE# Schedule: 31	/41 Report: 33/81	
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-ol-state PAC (ID# Phillips, Rebecca	')	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	11/20/2014	6 Contributor address; City; State; Zip Code 3504 Hampton Road Austin, TX 78705		\$350.00	 	
				<u>L</u>	Texas, complete Schedule T)	
9	Principal occup Retired	oation / Job title (See Instructions)	10 Employer (See In Retired	structions)		
	Date	Full name of contributor ul-of-state PAC (tD# Pitts Jr., John R)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/20/2014	Contributor address; City; State; Zip Code 1703 Mohle Drive Austin, TX 78703	, , , , , , , , , , , , , , , , , , , ,	\$350.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Consultant		Employer (See In Self	Employer (See Instructions)		
	Date	Full name of contributor)	Amount of	tn-kind contribution	
		Pool, Trent		contribution (\$)	description (if applicable)	
	11/18/2014	Contributor address; City; State; Zip Code 3800 Creek Road Dripping Springs, TX 78720		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Consultant	oation / Job title (See Instructions)	Employer (See In Benezet Consul			
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	11/06/2014	Contributor address; City; State; Zip Code 4902 Canyon Crest Court Austin, TX 78735		\$100.00	r 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occupation / Job title (See Instructions) Former Executive Assistant		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 PO Box 13366 Austin, TX 78711		\$700.00		
				(If traval autoido es	Tayas complete Schodule Ti	
	Principal occupation / Job title (See Instructions) Owner		(If travel outside of Texas, complete Schedule T) Employer (See Instructions) The Renner Project			

Те	xas Ethics Con	nmission P.O.Box	12070 Aust	in, Texas 78711-2070	(512)463-5800	TDD 1-800-735-2989
		CAL CONTRIB		ANS		SCHEDULE A
	The Instruction	on Guide explains how to con	plete this form.		1 PAGE# Schedule: 32	/41 Report: 34/81
2	FILER NAME	Troxclair, Ellen (Mrs.)			3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor Rigsbee, Sharon & Ken	out-of-state PAC (iD#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/06/2014	6 Contributor address; 6406 Old Harber Lane Austin, TX 78739	City; State; Zip Cod	e	\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup professional	pation / Job title (See Instruction engineer	ns)	10 Employer (See In retired	structions)	
	Date	Full name of contributor Rivero, Hector	Out-ol-state PAC (D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/29/2014	Contributor address; 4036 Enclave Mesa Circle Austin, TX 78731	City; State; Zip Cod	e	\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Executive	pation / Job title (See Instruction	ns)	Employer (See In Texas Chemica		
	Date	Full name of contributor Roberts, Scott & Susan	out-of-state PAC (I	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; PO Box 311 Driftwood, TX 78619	City State: Zip Cod	e	\$700.00	
					(II travel outside of	Texas, complete Schedule T)
	Principal occup Business Ow	eation / Job title (See Instruction ner	ns)	Employer (See in: Self	structions)	
	Date	Full name of contributor Roberts-Loring, Katharine	•	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/02/2014	Contributor address; 1604 Nickerson Street Austin, TX 78704	City; State; Zip Code	e	\$700.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Business Ow	ation / Job title (See Instruction ner	ns)	Employer (See In Self	structions)	
	Date	Full name of contributor Roche, David	out-of-state PAC (I	D#)	Amount of contribution (\$)	tn-kind contribution description (if applicable)
	11/19/2014	Contributor address; 1600 Mount Larson Road Austin, TX 78746	City; State; Zip Code	e	\$350.00	
	:				(If travel outside of	Texas, complete Schedule T)
	Principal occup Founding Prin	ation / Job title (See Instruction acipal	ns)	Employer (See In: Endeavor Real	•	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 33/41 Report: 35/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ut-ol-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Rodriguez, Mike 11/10/2014 6 Contributor address: City; State; Zip Code \$100.00 10218 Braemar Drive Austin, TX 78747 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Military Officer (retired) USAF Full name of contributor ut-of-state PAC (iD# In-kind contribution Date Amount of contribution (\$) description (if applicable) Ross, James T. Contributor address; City; State; Zip Code \$100.00 11/14/2014 8947 Bee Cave Road Ste 101 Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Talisman Group, Inc. Founder Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (il applicable) Ruckel, Maricella & Grant 11/17/2014 Contributor address: City; State; Zip Code \$300.00 1506 E 11th Street Austin, TX 78702 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Energy Transfer** Senior Director Date In-kind contribution Amount of description (if applicable) contribution (\$) Sager, Susan & Alan 12/04/2014 Contributor address; City; State; Zip Code \$700.00 4205 Greystone Austin, TX 78752 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Entreprenuer Self Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Savers, Clint Contributor address; City; State; Zip Code \$350.00 12/01/2014 3103 Bee Cave Road, Suite 238 Austin, TX 78746 (If travel outside of Texes, complete Schedule T)

Employer (See Instructions)

Sayers & Associates, Inc.

Principal occupation / Job title (See Instructions)

Real Estate Brokerage and Appraisal

P.O.Box 12070 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 34/41 Report: 36/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Schissler, James 6 Contributor address; City; State; Zip Code \$350.00 11/30/2014 1701 Directors Blvd Ste 400 Austin, TX 78744 (If travel outside of Texes, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Jones & Carter, Inc. Vice President Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Seidlits, Melody & Curtis 11/17/2014 Contributor address; City: State; Zip Code \$150.00 823 Congress Avenue Ste 1200 Austin, TX 78701 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) CEO Focused Advocacy In-kind contribution Date Amount of contribution (\$) description (if applicable) Sellers, Araminta & Tom Contributor address: City; State; Zip Code 11/17/2014 \$700.00 2102 Woodmont Avenue Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) **Gov Affairs ConocoPhillips** Full name of contributor ut-of-state PAC (ID# Date Amount of In-kind contribution contribution (\$) description (if applicable) Shackelford, Lynn City; State; Zip Code 11/13/2014 Contributor address; \$350.00 3614 Crosswind Drive Spicewood, TX 78669 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) VP Development **Touchstone Golf** Amount of In-kind contribution Date description (if applicable) contribution (\$) Shafford, Bill 11/05/2014 Contributor address; City; State; Zip Code \$150.00 8507 Tyhurst Drive Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Engineer **TCEQ**

Principal occupation / Job title (See Instructions)

Engineer

(If trevel outside of Texas, complete Schedule T)

Employer (See Instructions)

Cirrus Logic

Retired

Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989 P.O.Box 12070 **POLITICAL CONTRIBUTIONS** SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 36/41 Report: 38/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ☐ out-of-state PAC (ID# Amount of in-kind contribution Date description (if applicable) contribution (\$) Smith, Hank 6 Contributor address; 11/14/2014 City; State; Zip Code \$250.00 2801 Bear Springs Trail Austin, TX 78748 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) Texas Engineering Solutions Engineer Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Smith, Robert E. Contributor address; City; State; Zip Code 11/18/2014 \$10.00 4831 Calhoun Canyon Loop Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired n/a In-kind contribution Amount of Date description (if applicable) contribution (\$) Stewart, Lisa & Michael 11/17/2014 Contributor address; City: State: Zip Code \$350.00 10204 Rhett Butler Drive Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Longbow Partners Partner Date Full name of contributor ut-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Stratton, John Robert Contributor address: City; State; Zip Code 12/06/2014 \$100.00 PO Box 2232 Austin, TX 78768 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Putonti Escovar & Rossick Attorney Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) Suehs, Thomas 11/20/2014 Contributor address; City; State; Zip Code \$150.00 1800 West 29th Street Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

Retired

SCHEDULE	Α
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	OTHER	THAN PLEDGES OR LOA!	NS		000000
	The Instruction	on Guide explains how to complete this form.	·	1 PAGE# Schedule: 37	7/41 Report: 39/81
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT# 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/26/2014	6 Contributor address; City; State; Zip Code 7901 Cameron Road Ste 3-202 Austin, TX 78754		\$350.00	1 f 1
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	oation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/20/2014	Contributor address; City; State; Zip Code 3105 Bowman Avenue Austln, TX 78703		\$700.00	! ! !
L				L	Texas, complete Schedule T)
	Principal occup Real Estate	oation / Job title (See Instructions) nvestments	Employer (See In FourT Realty	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/07/2014	Contributor address; City; State; Zip Code 4300 Tambre Bend Austin, TX 78738		\$150.00	; } J
l				(If travel outside of	Texas, complete Schedule T)
	Principal occup Commercial I	pation / Job title (See Instructions) Banker	Employer (See In Wells Fargo Ba	,	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	12/01/2014	Contributor address; City; State; Zip Code 7800 Wykeham Drive Austin, TX 78749		\$50.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup n/a	pation / Job title (See Instructions)	Employer (See In n/a	structions)	·
	Date	Full name of contributor out-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 919 Congress Avenue Ste 1500 Austin, TX 78701		\$350.00]
				(If travel outside of	Texas, complete Schedule T)
<u> </u>	Principal occup Consultant	Dation / Job title (See Instructions)	Employer (See In Self	· .	The second secon

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 38/41 Report: 40/81 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 ☐ out-of-state PAC (ID# Date 5 Full name of contributor Amount of In-kind contribution contribution (\$) description (if applicable) Tucker, Steve 6 Contributor address: City; State: Zip Code \$100.00 11/05/2014 3717 Allegro Lugar Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) Real Estate Self Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Turner, Holly & Chris Contributor address; City; State; Zip Code 11/11/2014 \$350.00 7701 Rialto Blvd Austin, TX 78735 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Stampede Consulting Date Amount of in-kind contribution description (if applicable) contribution (\$) 11/18/2014 Contributor address; City; State: Zip Code \$250.00 6809 Via Correto Austin, TX 78749 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Lawyer Gardere Full name of contributor ut-of-state PAC (ID#_ Date Amount of In-kind contribution description (if applicable) contribution (\$) Vogt, Peggy Contributor address; City; State; Zip Code 12/01/2014 \$25.00 6708 Back Bay Lane Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Non Profit Volunteer none Date Amount of In-kind contribution contribution (\$) description (if applicable) Walters, Warren City; State; Zip Code 11/10/2014 Contributor address: \$250.00 2918 RR 620 N Apl 166 Austin, TX 78734 (If travel outside of Texas, complete Schedule T) Principal occupation / Job litle (See Instructions) Employer (See Instructions) Real Estate Investment Simmons Vedder Partners

none

Date

11/06/2014

Consultant

POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS PAGE# The Instruction Guide explains how to complete this form. Schedule: 39/41 Report: 41/81 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 5 Full name of contributor ut-of-state PAC (ID# Date Amount of in-kind contribution contribution (\$) description (if applicable) Ward, Leslie & Don 6 Contributor address; City; State; Zip Code \$50.00 12/02/2014 1201 Quaker Ridge Drive Austin, TX 78746 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) External Affairs AT&T Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Welch, Steven Contributor address; City; State; Zip Code \$200.00 11/05/2014 14708 Flat Top Ranch Road Austin, TX 78732 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Founder DreamIt Date tn-kind contribution Amount of contribution (\$) description (if applicable) Welp, Mark 11/13/2014 Contributor address; City; State; Zip Code \$200.00 7108 Barefoot Cove Austin, TX 78730 (If traval outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) owner self employed In-kind contribution Date Amount of contribution (\$) description (if applicable) White, Leslie Contributor address; City; State; Zip Code 11/09/2014 \$100.00 6550 Needham Lane Austin, TX 78739 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions)

retired

Self

Employer (See Instructions)

Amount of

contribution (\$)

\$700.00

Full name of contributor ut-of-state PAC (ID#

City; State; Zip Code

White, Liz & David

Contributor address:

7000 Chuck Wagon Trail Austin, TX 78749

Principal occupation / Job title (See Instructions)

in-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	אס Guioe explains how to complete this form.		1 PAGE#	0/41 Report: 42/81
2	FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Whitfield, Gail)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/20/2014	6 Contributor address; City; State; Zip Code 901 S Mopac Ste. 1-160 Austin, TX 78746		\$350.00	
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	<u>'</u>	Texas, complete Schedule T)
	Real Estate E	Broker	Self		
	Date	Full name of contributor	·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/18/2014	Contributor address; City; State; Zip Code 4221 Canoas Drive Austin, TX 78730		\$350.00	
					Texas, complete Schedule T)
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/08/2014	Contributor address; City; State; Zip Code 1104 Lafayette Lane Pflugerville, TX 78660		\$700.00	
				•	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Natural Develop		
•	Date	Full name of contributor ut-of-state PAC (ID# Wilson, Margaret)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 2005 Arthur Lane Austin, TX 78704		\$150.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Professor	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# WJM Interiors)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; City; State; Zip Code 12309 Gatling Gun Lane		\$100.00	1 !
		Austin, TX 78739		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OF LOANS

SCHEDULE A

OTHER	- THAN PLEDGES OR LOAD			
The instructi	non Gurde explains how to complete this form.		1 PAGE# Schedule: 41	/41 Report: 43/81
2 FILER NAME	Troxclair, Ellen (Mrs.)		3 ACCOUNT # 00000001	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Womack, Daniel	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/24/2014	6 Contributor address; Clty; State; Zip Code 6904 Barstow Court Austin, TX 78749		\$150.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Government	ipation / Job title (See Instructions) : Affairs	10 Employer (See In Dow Chemical	structions)	
Date	Full name of contributor	 	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/18/2014	Contributor address; City; State; Zip Code 4008 Berkman Drive Austin, TX 78723	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$250.00) -
			(If travel outside of	Texas, complete Schedule T)
Principal occu Principal	pation / Job title (See Instructions)	Employer (See In: Policy Solutions	structions)	
Date	Full name of contributor	y)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/20/2014	Contributor address; City; State; Zip Code 11317 Pebble Garden Lane Austin, TX 78739		\$250.00	
			<u> </u>	Texas, complete Schedule T)
Principal occu Business Ov	pation / Job title (See Instructions) wner	Employer (See Ins Wurzel Builders	structions) i, 1st plumbing & /	AC Services
Date	Full name of contributor ut-of-state PAC (ID# Yokubaitis, C.M. & R.B.	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/03/2014	Contributor address; City; State; Zip Code 1044 Liberty Park Dr. Austin, TX 78746		\$250.00	1
			•	Texas, complete Schedule T)
Principal occu CEO	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/19/2014	Contributor address; City; State; Zip Code 300 Bowle Street #100A Austin, TX 78703		\$350.00	
	<u> </u>		(If travel outside of	Texas, complete Schedule T)
Principal occu Owner & Pre	pation / Job title (See Instructions) esident	Employer (See Ins Investors Alliand	structions)	

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Sing Legal Services Sise Food/Beverage Expense Tolling Expense Printing Expense C	URE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense ravel in District ravel Out Of District price Overhead/Rental Expense Explains how to complete this f	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) orm.
1 PAGE# Schedule: 1/38 P	2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name Coffee Bean & Tea Leaf		
11/24/2014 6 Amount (\$) \$13.53	7 Payee address City; State; Zij 5701 W. Slaughter Austin, TX 78749) Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this Food/Beverage Expense	coffee for v	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	IL Check it Aust Office so	in, TX, officeholder living expense ught: Office held:
Date	Payee name Coffee Bean & Tea Leaf		
11/24/2014 Amount (\$)	Payee address City; State; Zi	Code	
\$12.67	5701 W. Slaughter Austin, TX 78749		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Food/Beverage Expense	coffee for v	
Complete ONLY it direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	in, TX, afficeholder living expense ught: Office held:
Date	Payee name Conviction Digital		
11/15/2014 Amount (\$)		Code	
\$712.50	401 Little Texas Lane #1731 Austin, TX 78745		
PURPOSÉ OF EXPENDITURE	Category (See Categories listed at the top of this Advertising Expense	digital medi	(If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office so	
Date	Payee name		
10/29/2014 Amount (\$)	Jersey Mike's Payee address City; State; Zig	Code	
\$7.61	4404 West William Cannon Drive Suite Austin, TX 78749		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Food/Beverage Expense	food for vol	
Complete ONLY if	Candidate / Officeholder name	Check if Aust Office so	in, TX, officeholder living expense ught: Office held:
direct expenditure	Samuelo i Omoonoleoi name	Office 50	ogia. Onice neld.

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Gifts/Awards/Memorial Expense Advertising Expense Accounting/Banking Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Consulting Expense Event Expense Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Polling Expense Printing Expense The INSTRUCTION Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 2/38 Report: 45/81 4 Date 5 Payee name 11/04/2014 Jersey Mike's Amount (\$) Payee address City; State; Zip Code 4404 West William Cannon Drive Suite K \$14.16 Austin, TX 78749 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE food for volunteers Food/Beverage Expense EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Mackie, Gaye 10/28/2014 Amount (\$) Payee address City; State: Zip Code 812 Post Oak Drive \$450.00 Dripping Springs, TX 78620 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** financial reports Office Overhead/Rental Expense OF EXPENDITURE Check it Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name 10/30/2014 McGee, Chelsey Amount (\$) Pavee address City: State: Zip Code 3816 S Lamar Blvd \$1,500.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) staff pay **PURPOSE** Salaries/Wages/Contract Labor 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 Payee name 11/17/2014 McGee, Chelsey City; State; Zip Code Amount (\$) Payee address 3816 S Lamar Blvd \$1,000.00 Austin, TX 78704 (If travel outside of Texas, complete Schedule T) Category (See Categories tisted at the top of this schedule) Description staff pay PURPOSE Salaries/Wages/Contract Labor 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 OTHER (enter a category not listed above) Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Food/Beverage Expense Event Expense Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Troxclair, Ellen (Mrs.) 00000001 Schedule: 3/38 Report: 46/81 5 Pavee name 4 Date 12/02/2014 McGee, Chelsey Pavee address City: State: Zip Code Amount (S) 3816 S Larnar Blvd \$1,500.00 Austin, TX 78704 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** staff pay Salaries/Wages/Contract Labor **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 Office Depot 12/04/2014 Amount (\$) Payee address City: State: Zip Code 5300 Mopac Expy S #101 Austin, TX 78749 \$27.04 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) office supplies **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 11/20/2014 Papa Johns Payee address City; State; Zip Code Amount (\$) 8106 Brodie Lane \$42.70 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE food for volunteers Food/Beverage 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 Payee name Date 10/30/2014 Paperless Post Payee address City; State; Zip Code Amount (\$) 115 Broadway \$51.00 **Suite 1803** Suite 1803 NY 10006 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE invitations to event **Event Expense** EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

POLITIC	CAL EXPENDITURES	SCHEDULE F
	EVDENDITIO	E CATEGORIES
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salar ing Legal Services Solici nse Food/Beverage Expense Trave Polting Expense Office Printing Expense Office	ites/Mages/Contract Labor lation/Fundraising Expense It in District Soverhead/Rental Expense Contributions/Conations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE# Schedule: 4/38 F	2 FILER NAME Troxclair, Ellen (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
4 Dale	5 Payee name	
10/28/2014	Paragon Printing 7 Payee address City; State; Zip Co	do
6 Amount (\$) \$1,421.89	l'	AUG
8 PURPOSE	(a) Category (See Categories listed at the top of this sch Printing Expense	edule) (b) Description (It travel outside of Texas, complete Schedule T) printing campaign materials
OF EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/14/2014	Paragon Printing	
Amount (\$) \$1,881.87	Payee address City; State; Zip Co 10423 McKalla Place Austin, TX 78758	de
	, Low, TX TO TO	
PURPOSE OF	Category (See Categories listed at the top of this sch Printing Expense	Description (if travel outside of Texas, complete Schedule T) printing campaign materials
EXPENDITURE		Check if Austin TV afficeholder fring avenue
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/21/2014	Paragon Printing	
Amount (\$)	Payee address City; State; Zip Co	de
\$2,430.78	10423 McKalla Place Austin, TX 78758	
0.100000	Category (See Categories listed at the top of this sch	edule) Description (If travel outside of Texes, complete Schedule T)
PURPOSE OF EXPENDITURE	Printing Expense	printing campaign materials & postage
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/29/2014	Paragon Printing	
Amount (\$)	Payee address City; State; Zip Co	de
\$2,276.04	10423 McKalla Place Austin, TX 78758	
i	Category (See Categories listed at the top of this scho	
PURPOSE OF	Printing Expense	printing campaign materials
EXPENDITURE		.
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate i Onicendati name	Onice sought. Onice held.

POLITICAL EXPENDITURES SCHEDULE F **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 Gifts/Awards/Memorial Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Event Expense Fees Polling Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Troxclair, Ellen (Mrs.) 00000001 Schedule: 5/38 Report: 48/81 4 Date 5 Payee name 10/26/2014 Piryx Payee address State; Zip Code 6 Amount (\$) 144 2nd St \$2.88 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) (b) Description B **PURPOSE** credit card processing fee Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Office sought: 9 Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 10/27/2014 Рігух Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$8.63 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit CIOH Date Payee name Piryx 10/29/2014 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$8.63 San Francisco, CA 90105 Calegory (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees 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 Piryx 10/29/2014 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees 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

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not fisted above) Advertising Expense Accounting/Banking Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Services Consulting Expense Event Expense Food/Beverage Expense Travel in District Travel Out Of District Office Overhead/Rental Expense Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 6/38 Report: 49/81 4 Date 5 Payee name 10/31/2014 Piryx Payee address City; State; Zip Code Amount (\$) 6 144 2nd St. \$14.38 San Francisco, CA 90105 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE credit card processing fee Fees 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 11/04/2014 Piryx Amount (\$) Payee address City: State: Zip Code 144 2nd St. \$2.88 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) credit card processing fee **PURPOSE** Fees 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 Piryx 11/05/2014 Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$2.88 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Calegory (See Categories listed at the top of this schedule) Description **PURPOSE** credit card processing fee EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Payee name 11/05/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$8.63 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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.

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Advertising Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Event Expense Fees Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 7/38 Report: 50/81 4 Date 5 Payee name 11/05/2014 Piryx City; State; Zip Code 6 Amount (\$) Payee address 144 2nd St. \$2.88 San Francisco, CA 90105 (a) Category (See Categories fisted at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE credit card processing fee **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Piryx 11/05/2014 City; State; Zip Code Payee address Amount (\$) 144 2nd St. \$1.44 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** credit card processing fee Fees 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 11/05/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$2.88 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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 11/05/2014 Piryx Amount (\$) City; State; Zip Code Payee address 144 2nd St. \$2.88 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) PURPOSE credit card processing fee Fees 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

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officaholder/Political Committee OTHER (enter a category not fisted above) Advertising Expense Accounting/Banking Consulting Expense Event Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Travel In District Polling Expense Ponting Expense Travel Out OI District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Troxclair, Ellen (Mrs.) 00000001 Schedule: 8/38 Report: 51/81 5 Payee name 4 Date 11/05/2014 Piryx Amount (\$) Payee address City: State: Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 (b) Description (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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 11/05/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$14.38 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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 11/05/2014 Piryx Amount (\$) Pavee address City: State: Zip Code 144 2nd St \$5.75 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee 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 Рауее пате 11/05/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$14.38 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) credit card processing fee PURPOSE Fees 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.

POLITIC	CAL EXPENDITURES	SCHEDULE F
	EXPENDITURE CAT	TECODIES
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gifts/Awards/Memorial Expense Salaries/Wag sing Legal Services Solicitation/Fi nse Food/Beverage Expense Travel to Dist Polling Expense Travel Out of	es/Contract Labor Indraising Expense range of the following Ex
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers
Schedule: 9/38 F	Report: 52/81 Troxclair, Ellen (Mrs.)	00000001
11/05/2014	Piryx	
6 Amount (\$) \$1.44	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) [credit card processing fee
EXPENDITORE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/05/2014 Amount (\$)	Piryx Payee address City; State; Zip Code	
\$5.75	144 2nd St. San Francisco, CA 90105	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Credit card processing fee
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit CIOH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/05/2014	Piryx	
Amount (\$) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee
	0 1111 (015) 11	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name Piryx	
11/05/2014 Amount (\$)	Payee address City; State; Zip Code	
\$20.13		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

POLITIC	AL EXPENDITURES	SCHEDULE F
	EXPENDITURE	CATEGORIES
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gitts/Awards/Memorial Expense Salaries ing Legal Services Solicitat nse Food/Beverage Expense Travel (Polling Expense Printing Expense Office C	M/ages/Contract Labor Conference Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Contributions/Donations Made By Contributions/Political Committee Conference Confer
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 10/38		00000001
4 Date 11/05/2014	5 Payee name Piryx	
6 Amount (\$) \$40.25	7 Payee address City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Fees	ule) (b) Description (II travel outside of Texas, complete Schedule T) credit card processing fee
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/05/2014	Piryx	
Amount (\$)	Payee address City; State; Zip Code 144 2nd St.)
\$20.13	San Francisco, CA 90105	
PURPOSE	Category (See Categories listed at the top of this schedu	de) Description (If travel outside of Texas, complete Schedule T) credit card processing fee
OF EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/05/2014	Piryx	
Amount (\$)	Payee address City; State; Zip Code 144 2nd St.	
\$2.88	San Francisco, CA 90105	
PURPOSE	Category (See Categories listed at the top of this sched	ule) Description (If travel outside of Texas, complete Schedule T) Credit card processing fee
OF EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/05/2014 Amount (\$)	Piryx Payee address City; State; Zip Code	
\$11.50	1	
φτ1.50	San Francisco, CA 90105	
PURPOSE	Category (See Categories listed at the top of this schedu	Description (it travel outside of Texas, complete Schedule T) credit card processing fee
OF	Fees	Great care processing rec
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

POLITIC	CAL EXPENDITURES		SCHEDULE F
	EVDENDI	TURE CATEGORIES	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	anse Gitts/Awards/Memorial Expense ting Legal Services nse Food/Beverage Expense Potting Expense Printing Expense	Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Nortal Expense on explains how to complete this	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) s form.
1 PAGE# Schedule: 11/38	. 2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 11/05/2014	5 Payee name Piryx		
6 Amount (\$) \$40.25	7 Payee address City; State; Z	ip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Fees		n (If travel outside of Texas, complete Schedule T) drocessing fee
EXI ENDITORIE			ætin, TX, officeholder living expense
g Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought: Office held:
Date	Payee name Piryx		- 1 1
11/05/2014 Amount (\$)		ip Code	
\$1.44	144 2nd St. San Francisco, CA 90105	.,,	
PURPOSE OF	Category (See Categories listed at the top of th Fees		n (If travel outside of Texas, complete Schedule T) d processing fee
EXPENDITURE		<u></u>	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		ustin, TX, officeholder living expense sought: Office held:
Date	Payee name		
11/05/2014	Piryx		
Amount (\$) \$8.63	Payee address City; State; Z 144 2nd St. San Francisco, CA 90105	ip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of th Fees	credit ca	rd processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		sstin, TX, afficaholder living expense sought: Office held:
Date 11/06/2014	Payee name Piryx		
Amount (\$) \$11.50	Payee address City: State; Z 144 2nd St. San Francisco, CA 90105	ip Code	
PURPOSE OF EXPENDITURE	Calegory (See Categories listed at the top of thi Fees	credit car	d processing fee
0	Condidate (Officebolder name		ustin, TX, officeholder living expense
Complete ONLY if a direct expenditure	Candidate / Officeholder name	Office	sought: Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursament Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Legal Services Food/Beverage Expense Consulting Expense Event Expense Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 12/38 Report: 55/81 4 Date 5 Payee name 11/06/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$1.44 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** credit card processing fee Fees EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Date Piryx 11/06/2014 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$2.88 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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 Payee name 11/06/2014 Piryx Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$20.13 San Francisco, CA 90105 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee 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 11/06/2014 Piryx City; State; Zip Code Amount (\$) Payee address 144 2nd St \$20.13 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees 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** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Loan Repayment/Reimbursement Cantributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Legal Services Food/Beverage Expense Travel In District Event Expense Fees Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 13/38 Report: 56/81 4 Date 5 Payee name 11/06/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE credit card processing fee EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Рігух 11/06/2014 Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$40.25 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office held: Office sought: direct expenditure to benefit C/OH Payee name 11/06/2014 Piryx Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$2.88 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Payee name Piryx 11/06/2014 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description credit card processing fee **PURPOSE** Fees 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

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper	ing Legal Services Solicitation/Fun nse Food/Beverage Expense Travel In Distric	s/Contract Labor Loan Repa draising Expense Transporta at Contributio	yment/Reimbursement tion Equipment & Related Expense ns/Donations Made By
Event Expense Fees	Polling Expense Travel Out Of E Printing Expense Office Overhea The Instruction Guide explains h	d/Rental Expense OTHER (a	te/Officeholder/Political Committee nter a category not listed above)
1 PAGE# Schedule: 14/38	2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 11/06/2014	5 Payee name Piryx		
6 Amount (S) \$40.25	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel out credit card processing	side of Texas, complete Schedule T}
		Check if Austin, TX, officeh	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/06/2014	Piryx		
Amount (\$) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105		
PURPOSE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outs credit card processing	side of Texas, complete Schedule T)
OF EXPENDITURE		Check if Austin, TX, officeh	nlder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/07/2014	Piryx Pavee address City; State; Zip Code		
Amount (\$) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outs credit card processing	side of Texas, complete Schedule T) 🔲 fee
EXPENDITURE		Check if Austin, TX, officeb	older living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/07/2014	Payee name Piryx		
Amount (S)	Payee address City; State; Zlp Code		
\$8.63	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (II travel outs credit card processing	ide of Texas, complete Schedule T) ee
EXPENDITURE		Check if Austin, TX, officeh	ofder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Advertising Expense Accounting/Banking Consulting Expense Travel In District Travel Out OI District Office Overhead/Pental Expense Polling Expense Printing Expense Event Expense The Instruction Guide explains how to complete this form. 1 PAGE# 3 ACCOUNT # (TEC filers) FILER NAME Troxclair, Ellen (Mrs.) 00000001 Schedule: 15/38 Report: 58/81 4 Date 5 Payee name Piryx 11/08/2014 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$40.25 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee **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 11/09/2014 Piryx Amount (\$) Payee address City: State: Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY it Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name 11/10/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St \$20,13 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure Date Payee name 11/10/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St \$5.75 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Loan repayment/orlemousement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Food/Beverage Expense Travel In District Politing Expense Printing Expense Travel Out OI District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Troxclair, Ellen (Mrs.) Schedule: 16/38 Report: 59/81 00000001 4 Date 5 Рауее пате 11/10/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$14.38 San Francisco, CA 90105 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE credit card processing fee Fees 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 Payee name Date 11/11/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$40.25 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees 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 Payee name 11/13/2014 Piryx Amount (\$) Pavee address City; State: Zip Code 144 2nd St. \$11.50 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office held: Office sought: direct expenditure to benefit C/OH Date Payee name 11/13/2014 Piryx City; State; Zip Code Amount (\$) Payee address 144 2nd St \$20.13 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Funda	Contract Labor Loan Repay raising Expense Transportasis Contribution Strict Candidate APental Expense OTHER (ent	ment/Reimbursement ion Equipment & Related Expense is/Donations Made By e/Officeholder/Political Committee ler a category not listed above)
1 PAGE# Schedule: 17/38	2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 11/13/2014	5 Payee name Piryx		
6 Amount (\$) \$20.13	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105		, <u>, , , , , , , , , , , , , , , , , , </u>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories fisted at the top of this schedule) Fees	credit card processing fe	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office held:
Date	Payee name Piryx		
11/14/2014 Amount (\$)	Payee address City; State; Zip Code		
\$20.13	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (It travel outsic credit card processing fe	de of Texas, complete Schedule T) 98
EXPENDITURE		Check if Austin, TX, office ho	lder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name Piryx		
11/14/2014 Amount (\$)	Payee address City; State; Zip Code		
\$14.38	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outsic credit card processing fe	de of Texas, complete Schedule T) 🔲 B e
EXPENDITURE		Check if Austin, TX, officehol	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Olfice sought:	Office held:
Date 11/14/2014	Payee name Piryx		
Amount (\$)	Payee address City; State; Zip Code	 	
\$5.75	144 2nd St. San Francisco, CA 90105		
PURPOSE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside credit card processing fe	de of Texas, complete Schedule T)
OF EXPENDITURE	1 663	Check if Austin, TX, officehol	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

Texas Ethics Com	mission P.O.Box 12070 Austin, Texas 78711-	2070 (512)463-5800 TDD 1-800-735-298
POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundra	ontract Labor aising Expense Transportation Equipment & Related Expense Contributions/Donations Made By rict Cendidate/Officeholder/Political Committee OTHER (enter a category not listed above)
1 PAGE# Schedule: 18/38	, · · · · · · · · · · · · · · · · · · ·	3 ACCOUNT # (TEC filers 00000001
4 Date 11/14/2014 6 Amount (\$) \$8.63	5 Payee name Piryx 7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (if travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/14/2014 Amount (\$) \$1.15	Payee name Piryx Payee address City: State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/15/2014 Amount (\$) \$11.50	Payee name Piryx Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/16/2014 Amount (\$) \$40.25	Payee name Piryx Payee address City: State; Zip Code 144 2nd St. San Francisco, CA 90105 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF EXPENDITURE	Fees	credit card processing fee

Check if Austin, TX, officeholder living expense
Office sought: Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Advertising Expense Accounting/Banking Consulting Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Food/Beverage Expense Event Expense Fees Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Troxclair, Ellen (Mrs.) 00000001 Schedule: 19/38 Report: 62/81 4 Date 5 Payee name 11/16/2014 Piryx Payee address City; State; Zip Code 6 Amount (\$) 144 2nd St. \$5.75 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name 11/16/2014 Piryx Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$20.13 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit CIOH Payee name Date 11/16/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$2.88 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees 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 Piryx 11/16/2014 Amount (S) Payee address City; State; Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees **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 OTHER (enter a category not listed above) 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 Event Expense Fees Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guice explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 20/38 Report: 63/81 4 Date 5 Payee name 11/16/2014 Рігух Payee address City; State; Zip Code 6 Amount (\$) 144 2nd St. \$5.75 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Comptete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name Piryx 11/17/2014 Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$20.13 San Francisco, CA 90105 Description (II travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY is Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/17/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$14.38 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 11/17/2014 Piryx Payee address City; State; Zip Code Amount (\$) 144 2nd St \$2.88 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees 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

POLITIC	CAL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe	ing Legal Services Soticitation/Fund nse Food/Beverage Expense Travel In District	Contract Labor Loan Repay raising Expense Transportati Contribution	ment/Reimbursement on Equipment & Related Expense s/Donations Made By
Event Expense Fees	Polling Expense Travel Out Oil Di- Printing Expense Office Overhead The Instruction Guipe explains ho	Rental Expense OTHER (en	e/Officeholder/Political Committee ter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 21/38	Report: 64/81 Troxclair, Ellen (Mrs.)		00000001
4 Date 11/17/2014	5 Payee name Piryx		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$1.44	144 2nd St. San Francisco, CA 90105		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (It travel outsi credit card processing f	de of Texas, complete Schedule T) 🔲 ee
EXPENDITURE		Check if Austin, TX, officeho	lder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Рауее пате		
11/17/2014	Piryx		
Amount (\$)	Payee address City: State: Zip Code		
\$1.44	144 2nd St. San Francisco, CA 90105		
PURPOSE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outsi credit card processing for	de of Texas, complete Schedule T)
OF EXPENDITURE	1333		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeho	Office held:
direct expenditure to benefit C/OH			
Date	Payee name		
11/17/2014	Piryx	 	<u> </u>
Amount (\$)	Payee address City; State; Zip Code 144 2nd St.		
\$ 5.75	San Francisco, CA 90105		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outsi credit card processing for	de of Texas, complete Schedule T)
OF	Fees	5. Val. Val. 6 p. 22-22-1. g	-
EXPENDITURE		Check if Austin, TX, officeho	Ider living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/17/2014	Piryx City State 7's Code		
Amount (\$)	Payee address City; State; Zip Code 144 2nd St.		
\$5.75	San Francisco, CA 90105	·	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outsice credit card processing for	de of Texas, complete Schedule T)
OF EXPENDITURE	1003 	, and the second	
EVLENDIIONE		Check if Austin, TX, officeho	lder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Texas Ethics Com	rmission P.O.Box 12070 Austin, Texas 78711	-2070 (512)463-5800 TDD	1-800-735-298
POLITIC	CAL EXPENDITURES	SCH	EDULE F
Advertising Expe Accounting/Benk Consulting Exper Event Expense Fees	ting Legal Services Solicitation/Fund	Contract Labor Loan Repayment/Reimbursen raising Expense Transportation Equipment & F Contributions/Donations Made strict Candidate/Officeholder/Pol (Rental Expense OTHER (enter a category not	Related Expense a By itical Committee
1 PAGE#	2 FILER NAME	3 ACCOU	NT# (TEC filers
Schedule: 22/38		00000	001
4 Date	5 Payee name Piryx		
11/17/2014 6 Amount (\$)	7 Payee address City; State; Zip Code		
\$14.38	144 2nd St. San Francisco, CA 90105		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, compored credit card processing fee	plete Schedule T)
OF EXPENDITURE	•		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expen	
Date	Payee name		
11/18/2014	Piryx		
Amount (\$)	Payee address City; State; Zip Code		
\$14.38	144 2nd St. San Francisco, CA 90105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If traval outside of Texas, compored tradition of traval outside of Texas, compored tradition of the traval outside of Texas, compored traval outside of Texas, compored traval outside of Texas, compored tra	_
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office	
Date 11/18/2014	Payee name Piryx		
Amount (\$) \$0.58	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105		
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, comp	olata Sabadula T)
PURPOSE OF EXPENDITURE	Fees	credit card processing fee	note scriedare 17
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expen Office sought: Office	
Date	Payee name		
11/18/2014	Piryx	<u> </u>	
Amount (\$)	Payee address City: State; Zip Code		
\$20.13	144 2nd St. San Francisco, CA 90105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, comporedit card processing fee	elete Schedute T)
	Ondidate / Officeholder no-	Check if Austin, TX, officeholder living expen	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office	neid:

POLITIC	CAL EXPENDITURES		SCHEDULE F
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1 PAGE# Schedule: 23/38	2 FILER NAME	explains now to complete this torm.	3 ACCOUNT # (TEC filers) 00000001
4 Dale 11/18/2014	5 Payee name Piryx		-
6 Amount (\$) \$5.75	7 Payee address City; State; Zip 144 2nd St. San Francisco, CA 90105	Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Fees	credit card processing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, office Office sought:	holder living expense Office held:
Date 11/18/2014	Payee name Piryx		·
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\$5.75	144 2nd St. San Francisco, CA 90105		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s Fees	credit card processing	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check it Austin, TX, office Office sought:	holder living expense Office held:
Date 11/18/2014	Payee name Piryx		
Amount (\$) \$20.13	Payee address City; State; Zip (144 2nd St. San Francisco, CA 90105	Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s Fees	Chedule) Description (If travel or credit card processing Check if Austin, TX, office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/18/2014	Payee name Piryx		
Amount (\$)	Payee address City: State; Zip (Code	
\$5.75	l dia a.		
PURPOSE	Category (See Categories listed at the top of this s	chedule) Description (If travel ou credit card processing	itside at Texas, complete Schedule T)
OF EXPENDITURE	Fees		
	Condidate / Office hald	Check if Austin, TX, office	
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES			SCHEDULE F
	EXPENDIT	TURE CATEGORIES		
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services nse Food/Beverage Expense Polling Expense Printing Expense	Salanes/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense E explains how to complete thi	Contributions/Dona Candidate/Office OTHER (enter a ca	uipment & Related Expense
1 PAGE# Schedule: 24/38	Report: 67/81 2 FILER NAME Troxclair, Ellen (Mrs.)		3	ACCOUNT # (TEC filers) 00000001
4 Date 11/19/2014	5 Payee name Piryx			
6 Amount (\$) \$40.25	7 Payee address City; State; Zi	ip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of thi Fees	credit ca	rd processing fee	exas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		ustin, TX, officeholder li sought:	office held:
Date	Рауее пате			
11/19/2014 Amount (\$)	Piryx Payee address City: State; Zi	in Code		
\$20.13	144 2nd St. San Francisco, CA 90105	, cod		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Fees		n (If travel outside of T rd processing fee	exas, complete Schedule T)
			ustin, TX, officeholder li	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought:	Office held:
Date 11/19/2014	Payee name Piryx			
Amount (\$)	Payee address City; State; Zi	p Code		
\$20.13	144 2nd St. San Francisco, CA 90105			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Fees		rd processing fee	exas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		ustin, TX, officeholder lin sought:	ving expense Office held:
Date	Рауее пате			
11/19/2014 Amount (\$)	Piryx Payee address City; State; Zi	p Code		
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PURPOSE OF	Category (See Categories listed at the top of this Fees		n (If travel outside of T rd processing fee	exas, complete Schedule T)
EXPENDITURE		Check if A	ustin, TX, officeholder li	ving expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office	sought:	Office held:

Texas Ethics Commission

POLITICAL EXPENDITURES SCHEDULE F EXPENDITURE CATEGORIES Loan Repayment/Reimbursament Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense Event Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 25/38 Report: 68/81 4 Date 5 Payee name 11/19/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** credit card processing fee **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit CIOH Date Payee name Piryx 11/19/2014 Payee address Amount (\$) City; State; Zip Code 144 2nd St. \$14.38 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH. Payee name 11/19/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$40.25 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee 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 Date Payee name 11/20/2014 Piryx Payee address City; State; Amount (\$) Zip Code 144 2nd St. \$14.38 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description credit card processing fee PURPOSE Fees 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

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Office/holdst/Political Committee OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Consulting Expense Gitts/Awards/Memorial Expense Legal Services Food/Beverage Expense 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 3 ACCOUNT # (TEC filers) 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 26/38 Report: 69/81 5 Payee name 4 Date 11/20/2014 Piryx 6 Amount (\$) Payee address City: State; Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE credit card processing fee Fees EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name 11/20/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees 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 11/20/2014 Piryx City; State; Zip Code Amount (\$) Payee address 144 2nd St. \$5.75 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Payee name Date Piryx 11/20/2014 Amount (\$) City; State; Zip Code Payee address \$1.44 144 2nd St. San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** credit card processing fee Fees 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 OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Gifts/Awards/Memorial Expense Advertising Expense Legal Services Food/Beverage Expense Accounting/Banking Consulting Expense Event Expense Fees Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Troxclair, Ellen (Mrs.) 00000001 Schedule: 27/38 Report: 70/81 4 Date 5 Payee name 11/20/2014 Piryx 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE credit card processing fee 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 Piryx 11/20/2014 Amount (\$) Payee address City: State: Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 Calegory (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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 Piryx 11/20/2014 Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$40.25 San Francisco, CA 90105 Calegory (See Calegories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee 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 Payee name Date 11/21/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Funda	Contract Labor raising Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Poirtical Committee Rental Expense Contributions/Donations Made By Candidate/Officeholder/Poirtical Committee OTHER (enter a category not listed above)
1 PAGE# Schedule: 28/38	2 FILER NAME Troxclair, Ellen (Mrs.)	3 ACCOUNT # (FEC filers) 00000001
4 Date 11/21/2014	5 Payee name Piryx	
6 Amount (\$) \$20.13	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) credit card processing fee
	-	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/21/2014	Piryx	· · · · · · · · · · · · · · · · · · ·
Amount (S) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/23/2014	Payee name Piryx	
Amount (\$)	Payee address City; State; Zip Code	.
\$5.75	144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Рауее пате	
11/23/2014	Piryx	
Amount (\$) \$5.75	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Credit card processing fee
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		Since cough.

Candidate / Officeholder name

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/Political Committee OTHER (enter a category not listed above) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel to District Travel Out Of District Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# 2 FILER NAME Troxclair, Ellen (Mrs.) Schedule: 29/38 Report: 72/81 00000001 4 Date 5 Payee name 11/24/2014 Piryx Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$8.63 San Francisco, CA 90105 (b) Description (If travel outside of Texas, complete Schedule T) (a) Category (See Categories listed at the top of this schedule) PURPOSE credit card processing fee Fees 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 Рігух 11/25/2014 Amount (S) Payee address City: State: Zip Code 144 2nd St. \$5.75 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees 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 Piryx 11/25/2014 Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$20.13 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description PURPOSE credit card processing fee OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office held: Office sought: direct expenditure to benefit C/OH Payee name 11/26/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$2.30 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense

Office held:

Office sought:

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation see Food/Beverage Expense Travel In Polling Expense Travel O Printing Expense Office O	Wages/Contract Labor Loan Repayment/Reimbursement on/Fundraising Expense Transportation Equipment & Related Expense
1 PAGE# Schedule: 30/38	Peport: 73/81 2 FILER NAME Troxclair, Ellen (Mrs.)	3 ACCOUNT # (TEC filers) 00000001
4 Date 11/27/2014	5 Payee name Piryx	
6 Amount (\$) \$40.25	7 Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedules	(b) Description (If travel outside of Texas, complete Schedule T) credit card processing fee
EXPENDITURE		Check if Austin, TX_officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/28/2014	Piryx	
Amount (\$) \$20.13	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu Fees	Description (If travel outside of Texas, complete Schedule T) credit card processing fee
<u>.</u>		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Рауее пате	
11/30/2014	Piryx Payee address City; State; Zip Code	
Amount (\$) \$5,75	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu Fees	credit card processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 12/01/2014	Payee name Piryx	
Amount (\$) \$14.09	Payee address City; State; Zip Code 144 2nd St. San Francisco, CA 90105	
PURPOSÉ OF EXPENDITURE	Category (See Categories listed at the top of this schedu Fees	credit card processing fee
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Sandanio i Sinstituto i italio	Onice neig.

POLITICAL EXPENDITURES SCHEDULE F **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 Event Expense Fees Polling Expense Printing Expense Travel Out Of District Office Overhead/Rental Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) FILER NAME 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 31/38 Report: 74/81 4 Date 5 Payee name 12/01/2014 Рігух 6 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$1.44 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE credit card processing fee EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Piryx 12/01/2014 Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Complete ONLY if Office held: direct expenditure to benefit C/OH Payee name 12/01/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$1.09 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fee 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 Payee name 12/03/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$40.25 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description credit card processing fee **PURPOSE** Fees 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

POLITICAL EXPENDITURES SCHEDULE F EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Event Expense Fees Polting Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Troxclair, Ellen (Mrs.) 00000001 Schedule: 32/38 Report: 75/81 4 Date 5 Payee name 12/03/2014 Piryx Amount (\$) Payee address City; State; Zip Code 144 2nd St. \$11.50 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) 8 PURPOSE credit card processing fee Fees EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/04/2014 Piryx Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$40.25 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fee Fees 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 Payee name Piryx 12/04/2014 Payee address City; State; Zip Code Amount (\$) 144 2nd St. \$1.44 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) credit card processing fee PURPOSE EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH Payee name 12/04/2014 Piryx Amount (S) Payee address City; State; Zip Code 144 2nd St. \$1.44 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees 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 OTHER (enter a category not listed above) Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Advertising Expense Gifts/Awards/Memorial Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel In District Travel Out Of District Office Overhead/Rental Expense Event Expense Fees Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Troxclair, Ellen (Mrs.) 00000001 Schedule: 33/38 Report: 76/81 4 Date 5 Payee name 12/05/2014 Piryx City; State; Zip Code 6 Amount (\$) Payee address 144 2nd St \$5.75 San Francisco, CA 90105 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee 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 Payee name Piryx 12/05/2014 Payee address Amount (\$) City; State; Zip Code 144 2nd St. \$20.13 San Francisco, CA 90105 (if travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** credit card processing fee Fees 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 Payee name 12/05/2014 Piryx Amount (\$) Payee address City: State: Zip Code 144 2nd St. \$8.63 San Francisco, CA 90105 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee 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 Date Payee name 12/05/2014 Piryx City: State: Zip Code Amount (\$) Payee address 144 2nd St. \$1.44 San Francisco, CA 90105 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description credit card processing fee **PURPOSE** Fees 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

POLITIC	AL EXPENDITURES		SCHEDULE F
	EXPENDIT	URE CATEGORIES	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense S ing Legal Services S nse Food/Beverage Expense T Polling Expense T Printing Expense C	alaries/Wages/Contract Labor olicitation/Fundraising Expense ravel fout Of District flice Overhead/Rental Expense explains how to complete this for	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE# Schedule: 34/38	Peport: 77/81 2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date 12/06/2014	5 Payee name Piryx		
6 Amount (\$)	7 Payee address City; State; Zip	Code	,
\$11.50	144 2nd St. San Francisco, CA 90105		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this Fees	schedule) (b) Description (credit card pro	(If travel outside of Texas, complete Schedule T) ocessing fee
EXPENDITURE		Check if Austin.	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	
Date	Payee name		
12/06/2014 Amount (\$)	Piryx Payee address City; State; Zip	Code	
\$8.63	144 2nd St. San Francisco, CA 90105		
PURPOSE OF	Category (See Categories listed at the top of this Fees	schedule) Description (credit card pro	If travel outside of Texas, complete Schedule T) cessing fee
EXPENDITURE		Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht: Office held:
Date	Payee name Randalls	- · · · · · · · · · · · · · · · · · · ·	
10/31/2014 Amount (\$)	Payee address City; State; Zip	Code	
\$28.14	6600 S Mopac Expy Austin, TX 78749		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Event Expense	schedule) Description (water for volu	It travel outside of Texas, complete Schedule T) nteers
	0		TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	nr: Onice neta:
Date	Payee name		
11/03/2014 Amount (\$)	Rock and Roll Rentals Payee address City; State; Zip	Code	
\$49.79	1420 W Oltorf Austin, TX 78704		
PURPOSE	Category (See Categories listed at the top of this	schedule) Description (projector	If travel outside of Texas, complete Schedule T)
OF EXPENDITURE	Event Expense	p.0,000	
			TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office soug	ht: Office held:

POLITICAL EXPENDITURES SCHEDULE F **EXPENDITURE CATEGORIES** Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Advertising Expense Accounting/Banking Consulting Expense Legal Services Food/Beverage Expense Travel Out Of District Office Overhead/Rental Expense Event Expense Fees Polling Expense Printing Expense The Instruction Guide explains how to complete this form 2 FILER NAME 3 ACCOUNT # (TEC filers) PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 35/38 Report: 78/81 4 Date 5 Payee name 11/04/2014 Santa Rita 6 Amount (\$) Payee address City; State; Zip Code 5900 W. Slaughter Lane Austin, TX 78749 \$1,372,59 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE campaign event **Event Expense** EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name g Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH Payee name Date 11/29/2014 Square Payee address City; State; Zip Code Amount (\$) 1455 Market St \$12.40 San Francisco, CA 90103 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE credit card processing fee Fees OF EXPENDITURE Check if Austin, TX, officeholder living expense Office sought: Candidate / Officeholder name Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Starbucks 11/03/2014 Amount (\$) Payee address City; State; Zip Code 6600 S. Mopac Austin, TX 78749 \$6.39 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** coffee for volunteer 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 Payee name Strategic Campaign Group 10/28/2014 City; State; Zip Code Amount (\$) 4600 North Fairfax Drive Ste. 802 \$1,483.09 Arlington, VA 22203 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** phone services Office Overhead/Rental 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

EXPENDITURE

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

POLITIC	CAL EXPENDITURES		SCHEDULE F
	EXPENDIT	URE CATEGORIES	
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ense Gifts/Awards/Mernorial Expense S ting Legal Services S nse Food/Beverage Expense Ti Polling Expense Ti Printing Expense O	alaries/Wages/Contract Labor olicitation/Fundraising Expense ravel in District arvel Out Of District office Overhead/Rental Expense explains how to complete this for	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE# Schedule: 37/38	Peport: 80/81 2 FILER NAME Troxclair, Ellen (Mrs.)		3 ACCOUNT # (TEC filers) 00000001
4 Date	5 Payee name USPS		
11/14/2014 6 Amount (\$)	7 Payee address City; State; Zip	Code	
\$2,985.56	1		
B PURPOSE OF	(a) Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule) (b) Description postage	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		Check if Austin,	TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	
Date	Payee name		
11/17/2014	USPS City: State: Zin	Codo	<u> </u>
Amount (\$) \$49.00	Payee address City; State; Zip 6104 Old Fredericksburg Rd Austin, TX 78749	Code	
PURPOSE OF	Category (See Categories listed at the top of this Office Overhead/Rental Expense	schedule) Description (stamps	(If travel outside of Texas, complete Schedule T)
EXPENDITURE		Check if Austin.	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	
Date	Payee name		
11/17/2014 Amount (\$)	USPS Payee address City; State; Zip	Code	
\$28.00	6104 Old Fredericksburg Rd Austin, TX 78749	oue	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Office Overhead/Rental Expense	pochedule) Description PO box renev	(If travel outside of Texas, complete Schedule T)
EXI ENDITORIE			TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	int: Office held:
Date	Payee name		
11/29/2014 Amount (\$)	USPS Payee address City; State; Zip	Code	
\$3,490.06	8225 Cross Park Drive Austin, TX 78710		
PURPOSE OF	Calegory (See Categories listed at the top of this of Office Overhead/Rental Expense	schedule) Description (postage	If travel outside of Texas, complete Schedule T) ☐
EXPENDITURE		Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office soug	ht: Office held:

Texas Ethics Commission

SCHEDULE F **POLITICAL EXPENDITURES EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not fisted above) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 2 FILER NAME 1 PAGE# Troxclair, Ellen (Mrs.) 00000001 Schedule: 38/38 Report: 81/81 4 Date 5 Payee name 11/22/2014 Vera Payee address City: State: Zip Code 6 Amount (\$) 818 Craters of the Moon Blvd. \$375.00 Pflugerville, TX 78660 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE contract labor Salaries/Wages/Contract Labor EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH