

FORM C/OH  
COVER SHEET PG 1

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**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****13 C/OH NAME** Almanza, Susana (Ms.)**14 ACCOUNT #** (Ethics Commission filers)  
00078741**15 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

**COMMITTEE TYPE****COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****16 CONTRIBUTION  
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

60.00

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

\$

34,015.58

**EXPENDITURE  
TOTALS**

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

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

15,783.60

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

\$

21,063.89

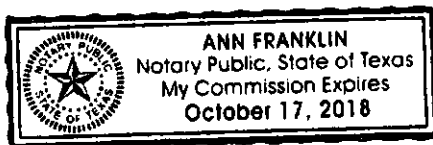
**OUTSTANDING  
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

0.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



AFFIX NOTARY STAMP / SEAL ABOVE

*Susana Almanza*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said

*Susana Almanza*

this the

*8th*

day

of *December*, 20 *14*, to certify which, witness my hand and seal of office.

*Ann Franklin*  
Signature of officer administering oath

Ann Franklin  
Print name of officer administering oath

*Notary*  
Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/6 Report: 3/26	
2 FILER NAME Almanza, Susana (Ms.)		3 ACCOUNT # (Ethics Commission filers) 00078741	
4 Date  11/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aleshire, Bill (Mr.)  6 Contributor address; City; State; Zip Code 3605 Shady Valley Dr. Austin, TX 78739	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Riggs, Aleshire, & Ray PC	
Date  11/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Basciano, Joyce (Ms.)  Contributor address; City; State; Zip Code 1907 W. 34th Austin, TX 78703	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calderon, Ernesto (Ms.)  Contributor address; City; State; Zip Code 7309 Shadywood Dr. Austin, TX 78745	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calderon, Ruby (Ms.)  Contributor address; City; State; Zip Code 7309 Shadywood Dr. Austin, TX 78745	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chauvin, Andrew (Mr.)  Contributor address; City; State; Zip Code 4404 E. Oltorf Apt. 12102B Austin, TX 78741	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/6 Report: 4/26

2 FILER NAME Almanza, Susana (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00078741

4 Date

11/18/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

City of Austin-Fair Campaign Fund

6 Contributor address; City; State; Zip Code  
201 W. Cesar Chavez  
Austin, TX

7 Amount of  
contribution (\$)

\$27,988.58

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Cooper, Lanetta (Ms.)

Contributor address; City; State; Zip Code  
5008 Eilers  
Austin, TX 78751

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/11/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Cooper, Lanetta (Ms.)

Contributor address; City; State; Zip Code  
5008 Eilers  
Austin, TX 78751

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/25/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

De Leon, Jesse (Mr.)

Contributor address; City; State; Zip Code  
507 Chihuahua Trail  
Austin, TX 78745

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Diaz, Antonio (Mr.)

Contributor address; City; State; Zip Code  
458 38th St.  
Oakland, CA 94609

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Director

Employer (See Instructions)  
People Organized to Defend Environmental Rights  
(PODER)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/6 Report: 5/26

2 FILER NAME Almanza, Susana (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00078741

4 Date

11/04/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Dobbs, Andrew (Mr.)

6 Contributor address; City; State; Zip Code  
2504 Huntwick Dr., #1303  
Austin, TX 78741

7 Amount of  
contribution (\$)

\$50.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

11/18/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Eubanks, Tim (Mr.)

Contributor address; City; State; Zip Code  
4416 Lareina  
Austin, TX 78745

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/25/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Godoy, Lourdes (Ms.)

Contributor address; City; State; Zip Code  
2901 E. 5th St.  
Austin, TX 78702

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/08/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Grigassy, Chris (Mr.)

Contributor address; City; State; Zip Code  
2304 Riverside Farms Rd  
Austin, TX 78741

Amount of  
contribution (\$)

\$22.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/26/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)

Henry, Joe (Mr.)

Contributor address; City; State; Zip Code  
1313 Newning  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/6 Report: 6/26

2 FILER NAME Almanza, Susana (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00078741

4 Date

10/31/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kennedy, Paloma (Ms.)

6 Contributor address; City; State; Zip Code  
2308 Riverside Farms Rd  
Austin, TX 78741

7 Amount of  
contribution (\$)

\$50.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/04/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kennedy, Paloma (Ms.)

Contributor address; City; State; Zip Code  
2308 Riverside Farms Rd  
Austin, TX 78741

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/14/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
King, David (Mr.)

Contributor address; City; State; Zip Code  
1808 Kerr Dr.  
Austin, TX 78704

Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/01/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
La Voz

Contributor address; City; State; Zip Code  
TX

Amount of  
contribution (\$)

\$3,000.00

In-kind contribution  
description (if applicable)  
Advertising Newspaper  
Ad

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Leib, Richard (Mr.)

Contributor address; City; State; Zip Code  
455 Barbara Ave.  
Solana Beach, CA 92075

Amount of  
contribution (\$)

\$250.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Self

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/6 Report: 7/26

2 FILER NAME Almanza, Susana (Ms.)

3 ACCOUNT # (Ethics Commission filers)

00078741

4 Date

12/04/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Loya, Maria (Ms.)

6 Contributor address; City; State; Zip Code  
464 Lucas Ave, Ste 202  
Los Angeles, CA 90017

7 Amount of  
contribution (\$)

\$350.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)  
Director

10 Employer (See Instructions)  
LAANE (Los Angeles Alliance for a New Economy)

Date

11/21/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perales, Marisa (Ms.)

Contributor address; City; State; Zip Code  
2104 Willow St.  
Austin, TX 78702

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/10/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rivera, Gilbert (Ms.)

Contributor address; City; State; Zip Code  
1000 Glen Oaks Court  
Austin, TX 78702

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/10/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rivera, Jane (Ms.)

Contributor address; City; State; Zip Code  
1000 Glen Oaks Court  
Austin, TX 78702

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/21/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rivera, Jane (Ms.)

Contributor address; City; State; Zip Code  
1000 Glen Oaks Court  
Austin, TX 78702

Amount of  
contribution (\$)

\$25.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

**POLITICAL CONTRIBUTIONS  
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 6/6 Report: 8/26

**2** FILER NAME Almanza, Susana (Ms.)**3** ACCOUNT # (Ethics Commission filers)

00078741

**4** Date

11/10/2014

**5** Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Rodgers, Brian (Mr.)**6** Contributor address; City; State; Zip Code  
1112 W. 9th St.  
Austin, TX 78703**7** Amount of  
contribution (\$)

\$350.00

**8** In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐**9** Principal occupation / Job title (See Instructions)**10** Employer (See Instructions)

Date

11/21/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Salazar, Dionisio (Mr.)Contributor address; City; State; Zip Code  
8113 Doe Meadow Dr.  
Austin, TX 78749Amount of  
contribution (\$)

\$100.00

In-kind contribution  
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/18 Report: 9/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 12/06/2014		<b>5 Payee name</b> Alonso's Tacos			
<b>6 Amount (\$)</b> \$21.33		<b>7 Payee address</b> City: State: Zip Code Austin, TX			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 11/19/2014		<b>Payee name</b> AT&T Mobility			
<b>Amount (\$)</b> \$191.30		<b>Payee address</b> City: State: Zip Code Austin, TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Phone		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cell  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 11/05/2014		<b>Payee name</b> Briones, Patricia (Ms.)			
<b>Amount (\$)</b> \$110.00		<b>Payee address</b> City: State: Zip Code 5001 Lott Ave Austin, TX 78721			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 11/03/2014		<b>Payee name</b> Cicis Pizza			
<b>Amount (\$)</b> \$25.46		<b>Payee address</b> City: State: Zip Code TX			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name		Office sought: Office held:	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/18 Report: 10/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/06/2014	<b>5 Payee name</b> City of Austin				
<b>6 Amount (\$)</b> \$49.49	<b>7 Payee address</b> City; State; Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Utilities		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/04/2014	<b>Payee name</b> City of Austin				
<b>Amount (\$)</b> \$32.88	<b>Payee address</b> City; State; Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Utilities		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/01/2014	<b>Payee name</b> Ck ???				
<b>Amount (\$)</b> \$250.00	<b>Payee address</b> City; State; Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/06/2014	<b>Payee name</b> Ck 1060				
<b>Amount (\$)</b> \$220.00	<b>Payee address</b> City; State; Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/18 Report: 11/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 12/01/2014	<b>5 Payee name</b> Corner Store				
<b>6 Amount (\$)</b> \$21.16	<b>7 Payee address</b> City: State: Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Gas		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/04/2014	<b>Payee name</b> Dan's Hamburgers				
<b>Amount (\$)</b> \$19.02	<b>Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/02/2014	<b>Payee name</b> Dollar General				
<b>Amount (\$)</b> \$31.39	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/06/2014	<b>Payee name</b> Dollar General				
<b>Amount (\$)</b> \$51.96	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Misc.		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/18 Report: 12/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 12/06/2014	<b>5 Payee name</b> Dollar General				
<b>6 Amount (\$)</b> \$17.57	<b>7 Payee address</b> City: State: Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) OTHER - Supplies		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/04/2014	<b>Payee name</b> El Milagro				
<b>Amount (\$)</b> \$8.10	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/04/2014	<b>Payee name</b> Gabriel, Cassandra (Ms.)				
<b>Amount (\$)</b> \$80.00	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/04/2014	<b>Payee name</b> Gabriel, Cassandra (Ms.)				
<b>Amount (\$)</b> \$65.00	<b>Payee address</b> City: State: Zip Code 4926 E. Cesar Chavez Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 5/18 Report: 13/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/05/2014	<b>5 Payee name</b> Gabriel, Kassandra (Ms.)				
<b>6 Amount (\$)</b> \$140.00	<b>7 Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/05/2014	<b>Payee name</b> Gas/Carwash #628				
<b>Amount (\$)</b> \$19.92	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Travel In District		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Gas		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/06/2014	<b>Payee name</b> GoFundMe				
<b>Amount (\$)</b> \$111.30	<b>Payee address</b> City: State: Zip Code				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER - Online Donations		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fee		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/06/2014	<b>Payee name</b> Guajardo, Martin (Mr.)				
<b>Amount (\$)</b> \$110.00	<b>Payee address</b> City: State: Zip Code 620 Montopolis Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 6/18 Report: 14/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 10/31/2014	<b>5 Payee name</b> HEB				
<b>6 Amount (\$)</b> \$25.46	<b>7 Payee address</b> City: State: Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Travel In District		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Gas		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/03/2014	<b>Payee name</b> HEB				
<b>Amount (\$)</b> \$67.32	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food and Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/29/2014	<b>Payee name</b> Herrera, Chavelo (Mr.)				
<b>Amount (\$)</b> \$40.00	<b>Payee address</b> City: State: Zip Code 1406 Vargas Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 10/30/2014	<b>Payee name</b> Herrera, Christino (Mr.)				
<b>Amount (\$)</b> \$125.00	<b>Payee address</b> City: State: Zip Code 1406 Vargas Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 7/18 Report: 15/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/28/2014	<b>5 Payee name</b> Herrera, Christino (Mr.)				
<b>6 Amount (\$)</b> \$250.00	<b>7 Payee address</b> City: State: Zip Code 1406 Vargas Austin, TX 78741				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/01/2014	<b>Payee name</b> Herrera, Sylvia Ph.D. (Ms.)				
<b>Amount (\$)</b> \$1,000.00	<b>Payee address</b> City: State: Zip Code 934 Springdale Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/04/2014	<b>Payee name</b> Hobby Lobby				
<b>Amount (\$)</b> \$20.50	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense.		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 10/30/2014	<b>Payee name</b> KTXZ				
<b>Amount (\$)</b> \$200.00	<b>Payee address</b> City: State: Zip Code 2211 S. IH 35, Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 8/18 Report: 16/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/28/2014	<b>5 Payee name</b> KTXZ				
<b>6 Amount (\$)</b> \$250.00	<b>7 Payee address</b> City: State: Zip Code 2211 S. IH 35, Austin, TX 78741				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/03/2014	<b>Payee name</b> La Voz				
<b>Amount (\$)</b> \$1,650.00	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Newspaper Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/26/2014	<b>Payee name</b> Little Cesar's				
<b>Amount (\$)</b> \$13.96	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/01/2014	<b>Payee name</b> Little Cesar's				
<b>Amount (\$)</b> \$13.96	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 9/18 Report: 17/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/25/2014		<b>5 Payee name</b> Llanes, Daniel (Mr.)			
<b>6 Amount (\$)</b> \$120.00		<b>7 Payee address</b> City: State: Zip Code 4907 Red Bluff Rd. Austin, TX 78702			
<b>8 PURPOSE OF EXPENDITURE</b>		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 11/25/2014		<b>Payee name</b> Llanes, Daniel (Mr.)			
<b>Amount (\$)</b> \$1,500.00		<b>Payee address</b> City: State: Zip Code 4907 Red Bluff Rd. Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 11/05/2014		<b>Payee name</b> Marcelino's Pan y Vida			
<b>Amount (\$)</b> \$116.64		<b>Payee address</b> City: State: Zip Code Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
<b>Date</b> 11/21/2014		<b>Payee name</b> Marcelino's Pan y Vida			
<b>Amount (\$)</b> \$15.23		<b>Payee address</b> City: State: Zip Code Austin, TX 78702			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 10/18 Report: 18/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/10/2014	<b>5 Payee name</b> Mi Madres Restaurant				
<b>6 Amount (\$)</b> \$41.02	<b>7 Payee address</b> City: State: Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/24/2014	<b>Payee name</b> Murphy/Walmart				
<b>Amount (\$)</b> \$22.77	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Travel In District		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Gas		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/12/2014	<b>Payee name</b> Office Depot				
<b>Amount (\$)</b> \$69.27	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/12/2014	<b>Payee name</b> Office Depot				
<b>Amount (\$)</b> \$102.81	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 11/18 Report: 19/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/14/2014	<b>5 Payee name</b> Office Depot				
<b>6 Amount (\$)</b> \$14.06	<b>7 Payee address</b> City: State: Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) OTHER - Office		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/01/2014	<b>Payee name</b> Office Depot				
<b>Amount (\$)</b> \$89.98	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/10/2014	<b>Payee name</b> Office Max				
<b>Amount (\$)</b> \$66.52	<b>Payee address</b> City: State: Zip Code 907 West Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/20/2014	<b>Payee name</b> Office Max				
<b>Amount (\$)</b> \$15.47	<b>Payee address</b> City: State: Zip Code 907 West Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Print		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 12/18 Report: 20/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 12/05/2014	<b>5 Payee name</b> Office Max				
<b>6 Amount (\$)</b> \$91.77	<b>7 Payee address</b> City: State: Zip Code 907 West Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) OTHER - Supplies		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/10/2014	<b>Payee name</b> Online Detail and Images				
<b>Amount (\$)</b> \$3.00	<b>Payee address</b> City: State: Zip Code				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Design		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/17/2014	<b>Payee name</b> Opinion Analysts				
<b>Amount (\$)</b> \$135.31	<b>Payee address</b> City: State: Zip Code 906 Rio Grande Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER - Electoral Info		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Data		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/25/2014	<b>Payee name</b> Opinion Analysts				
<b>Amount (\$)</b> \$146.14	<b>Payee address</b> City: State: Zip Code 906 Rio Grande Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER - Electoral Info		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Data		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 13/18 Report: 21/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/24/2014	<b>5 Payee name</b> Quick Print-Shoal				
<b>6 Amount (\$)</b> \$2,600.47	<b>7 Payee address</b> City: State: Zip Code 8311 Shoal Creek Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mail Out Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/28/2014	<b>Payee name</b> Quick Print-Shoal				
<b>Amount (\$)</b> \$3,600.00	<b>Payee address</b> City: State: Zip Code 8311 Shoal Creek Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mail Out Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/04/2014	<b>Payee name</b> Radio Fiesta 97.1				
<b>Amount (\$)</b> \$270.00	<b>Payee address</b> City: State: Zip Code 7901 Cameron Rd Austin, TX 78754				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Radio Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/06/2014	<b>Payee name</b> Renteria, Corazon (Ms.)				
<b>Amount (\$)</b> \$220.00	<b>Payee address</b> City: State: Zip Code 1406 Vargas Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 14/18 Report: 22/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/13/2014	<b>5 Payee name</b> Renteria, Lucy (Ms.)				
<b>6 Amount (\$)</b> \$30.00	<b>7 Payee address</b> City: State: Zip Code 4926 E. Cesar Chavez Austin, TX 78702				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/12/2014	<b>Payee name</b> Santis, Rosa				
<b>Amount (\$)</b> \$500.00	<b>Payee address</b> City: State: Zip Code 403 Springdale Rd Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Headquarters		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/01/2014	<b>Payee name</b> Shell				
<b>Amount (\$)</b> \$27.33	<b>Payee address</b> City: State: Zip Code Austin, TX.				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Travel In District		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Gas		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 10/27/2014	<b>Payee name</b> Shultz, Erin (Ms.)				
<b>Amount (\$)</b> \$40.00	<b>Payee address</b> City: State: Zip Code 4926 E. Cesar Chavez, Bldg B. Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 15/18 Report: 23/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/05/2014	<b>5 Payee name</b> Sonic Drive In				
<b>6 Amount (\$)</b> \$12.97	<b>7 Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/26/2014	<b>Payee name</b> Taqueria Arandina				
<b>Amount (\$)</b> \$20.17	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 10/31/2014	<b>Payee name</b> Taqueria Chapala				
<b>Amount (\$)</b> \$18.41	<b>Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/07/2014	<b>Payee name</b> Taqueria Chapala				
<b>Amount (\$)</b> \$18.41	<b>Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 16/18 Report: 24/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/12/2014	<b>5. Payee name</b> Taqueria Chapala				
<b>6 Amount (\$)</b> \$37.47	<b>7 Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/14/2014	<b>Payee name</b> Taqueria Chapala				
<b>Amount (\$)</b> \$30.65	<b>Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/24/2014	<b>Payee name</b> Taqueria Chapala				
<b>Amount (\$)</b> \$34.14	<b>Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 12/05/2014	<b>Payee name</b> Taqueria Chapala				
<b>Amount (\$)</b> \$28.28	<b>Payee address</b> City: State: Zip Code Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:



**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 17/18 Report: 25/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 12/06/2014	<b>5 Payee name</b> Threadgills				
<b>6 Amount (\$)</b> \$21.88	<b>7 Payee address</b> City: State: Zip Code Austin, TX				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meeting		
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/06/2014	<b>Payee name</b> USPS				
<b>Amount (\$)</b> \$39.20	<b>Payee address</b> City: State: Zip Code Austin, TX				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 10/27/2014	<b>Payee name</b> Vargas, Laura (Ms.)				
<b>Amount (\$)</b> \$120.00	<b>Payee address</b> City: State: Zip Code 4926 E. Cesar Chavez, Bldg B Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/04/2014	<b>Payee name</b> Vargas, Laura (Ms.)				
<b>Amount (\$)</b> \$50.00	<b>Payee address</b> City: State: Zip Code 4926 E.Cesar Chavez Austin, TX 78702				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 18/18 Report: 26/26		<b>2 FILER NAME</b> Almanza, Susana (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 00078741	
<b>4 Date</b> 11/04/2014	<b>5 Payee name</b> Vega, Mathew (Mr.)				
<b>6 Amount (\$)</b> \$110.00	<b>7 Payee address</b> City: State: Zip Code 1010 Valdez Austin, TX 78741				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/12/2014	<b>Payee name</b> Villalobos, Anita (Ms.)				
<b>Amount (\$)</b> \$100.00	<b>Payee address</b> City: State: Zip Code 1206 Begonia Terrace Austin, TX 78741				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/26/2014	<b>Payee name</b> Walgreens				
<b>Amount (\$)</b> \$18.06	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) OTHER - Supplies		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 11/03/2014	<b>Payee name</b> Walmart				
<b>Amount (\$)</b> \$54.09	<b>Payee address</b> City: State: Zip Code TX				
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held: