

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00110414		2 PAGE # 1 of 35	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Sheri		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
	NICKNAME LAST SUFFIX Gallo				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #, CITY: STATE: ZIP CODE PO Box 26550 Austin, TX 78755				
<input type="checkbox"/> Change of Address					
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Lew				
	NICKNAME LAST SUFFIX Little Jr.				
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 2806 Stratford Drive Austin, TX 78746				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 480-9702				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year Month Day Year 12/07/2014 THROUGH 12/31/2014				
10 ELECTION	ELECTION DATE Month Day Year 12/16/2014		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 10		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Gallo, Sheri

14 ACCOUNT # (Ethics Commission filers)
0011041415 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

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages16 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 0.00

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

\$ 21,544.98

EXPENDITURE
TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

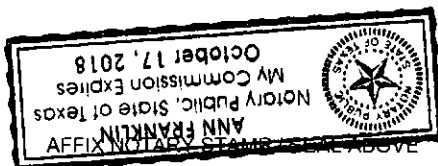
\$ 50,314.74

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD\$ ~~18,778.81~~
29 10,842.15OUTSTANDING
LOAN TOTALS6. 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.



Sheri Gallo
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Sheri Gallo, this the 15th day of January, 2015, 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: 1/22 Report: 3/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Acuna, Oscar Gerard 6 Contributor address; City; State; Zip Code PO Box 26499 Austin, TX 78755	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) Director		10 Employer (See Instructions) Tri-Recycling	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arbuckle, Tom Contributor address; City; State; Zip Code PO Box 14103 Austin, TX 78761	Amount of contribution (\$) \$100.00	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 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Auler, Charles Contributor address; City; State; Zip Code 1402 San Antonio Street Suite 200 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Fall Creek Vineyards	
Date 12/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barr, Alan Contributor address; City; State; Zip Code 7706 Stonewood Drive Austin, TX 78731	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 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barton, Lydia Contributor address; City; State; Zip Code 1407 Wathen Avenue Austin, TX 78703	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/22 Report: 4/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barton, Thomas Orr 6 Contributor address; City; State; Zip Code 1407 Wathen Avenue Austin, TX 78703	7 Amount of contribution (\$) \$175.00	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) Estate Planning & Probate		10 Employer (See Instructions) McGinnis Lochridge	
Date 12/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brady, Sharon Contributor address; City; State; Zip Code 6409 Mesa Drive Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Breed, Ann H. Contributor address; City; State; Zip Code 4405 Deepwoods Austin, TX 78731	Amount of contribution (\$) \$110.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retailer		Employer (See Instructions) Self	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Jay Contributor address; City; State; Zip Code 1001 Congress Avenue Suite 400 Austin, TX 78701	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Jennifer Emerson Contributor address; City; State; Zip Code 1005 Congress Avenue Suite 1040 Austin, TX 78701	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (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: 3/22 Report: 5/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cahill, Macklin 6 Contributor address; City; State; Zip Code 1801 Laurel Lane Leander, TX 78641	7 Amount of contribution (\$) \$25.00	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)		10 Employer (See Instructions)	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cammack, Kerry Contributor address; City; State; Zip Code 6702 West Courtyard Drive Austin, TX 78730	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Cammack & Strong PC	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cannatti, Karen E. Contributor address; City; State; Zip Code 2704 Macken Street Austin, TX 78703	Amount of contribution (\$) \$100.00	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 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Collins, Gregory Kent Contributor address; City; State; Zip Code 2510 El Greco Cove Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Conlan, Sandra Contributor address; City; State; Zip Code 4103 Honeycomb Rock Circle Austin, TX 78731	Amount of contribution (\$) \$100.00	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: 4/22 Report: 6/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooke, Carlton Lee Jr. 6 Contributor address; City; State; Zip Code PO Box 50442 Austin, TX 78763	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) Retired		10 Employer (See Instructions) N/A	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cooper, Helen L. Contributor address; City; State; Zip Code 831 Sunfish Lakeway, TX 78734	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cotner, Cheryl Shull Contributor address; City; State; Zip Code 1211 Country Club Drive Midland, TX 79701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Management		Employer (See Instructions) Self	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covert, George Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 214 Austin, TX 78731	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 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Covert, Helen C. Contributor address; City; State; Zip Code 4100 Jackson Avenue Apt. 214 Austin, TX 78731	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/22 Report: 7/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowley, Carol 6 Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) N/A	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crowley, Tim Contributor address; City; State; Zip Code 5902 Lonesome Valley Trail Austin, TX 78731	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Austin Regional President		Employer (See Instructions) Frost National Bank	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Mark J. Contributor address; City; State; Zip Code 4000 Tablerock Drive Austin, TX 78731	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Mark J. (Mrs.) Contributor address; City; State; Zip Code 4000 Tablerock Drive Austin, TX 78731	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curtis, Patricia Contributor address; City; State; Zip Code 4200 Jackson Avenue Apt. 1020 Austin, TX 78731-6047	Amount of contribution (\$) \$200.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/22 Report: 8/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curtis, Patricia 6 Contributor address; City; State; Zip Code 4200 Jackson Avenue Apt. 1020 Austin, TX 78731-6047	7 Amount of contribution (\$) \$150.00	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) Retired		10 Employer (See Instructions) N/A	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duggan, Bradford C. Contributor address; City; State; Zip Code 3312 River Road Austin, TX 78703	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) Chairman, National Advisory Board		Employer (See Instructions) Triand, Inc.	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duggan, Laura Contributor address; City; State; Zip Code 3312 River Road Austin, TX 78703	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) Realtor		Employer (See Instructions) West Austin Properties	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edgar, Mike Contributor address; City; State; Zip Code 5821 Trailridge Austin, TX 78731	Amount of contribution (\$) \$100.00	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 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edgar, Susan Contributor address; City; State; Zip Code 5821 Trailridge Austin, TX 78731	Amount of contribution (\$) \$100.00	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: 7/22 Report: 9/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ehrlich, Robert 6 Contributor address; City; State; Zip Code 1601 W. 38th Street Suite 206 Austin, TX 78731	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) Real Estate		10 Employer (See Instructions) Self	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellmer, Mindy R. Contributor address; City; State; Zip Code 200 Congress Avenue Suite 40FF Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Government Affairs Consultant		Employer (See Instructions) Self	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gallo, Anthony Contributor address; City; State; Zip Code PO Box 26550 Austin, TX 78755	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) IT Director		Employer (See Instructions) PECU	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, William III Contributor address; City; State; Zip Code 3125 Hemphill Park Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) William Gammon Insurance	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gammon, William III (Mrs.) Contributor address; City; State; Zip Code 3125 Hemphill Park Austin, TX 78705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/22 Report: 10/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldsby, Greta 6 Contributor address; City; State; Zip Code 4412 Rosedale Avenue Austin, TX 78756	7 Amount of contribution (\$) \$100.00	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)		10 Employer (See Instructions)	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gore, Rex Contributor address; City; State; Zip Code 1304 W Oltorf Street Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) PJS of Texas	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Elizabeth Contributor address; City; State; Zip Code 2612 Woolridge Drive Austin, TX 78703	Amount of contribution (\$) \$175.00	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 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Louis Contributor address; City; State; Zip Code 5808 Trailridge Circle Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investment Management		Employer (See Instructions) Capitol Wealth Management Group	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Granger, Tommy Contributor address; City; State; Zip Code 2612 Woolridge Drive Austin, TX 78703	Amount of contribution (\$) \$175.00	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: 9/22 Report: 11/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Bobby 6 Contributor address; City; State; Zip Code 2939 Westlake Cove Austin, TX 78746	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) Owner & CEO		10 Employer (See Instructions) Texas Disposal Systems	
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gregory, Kay Contributor address; City; State; Zip Code 2939 Westlake Cove Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Habitzreiter, Ronald Contributor address; City; State; Zip Code 1208 West Avenue Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hooser, Greg Contributor address; City; State; Zip Code 4501 Westlake Drive # 14 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hudspeth, William Contributor address; City; State; Zip Code 7602 Rim Cove Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Austin Trust Company	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/22 Report: 12/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jamail, Tim 6 Contributor address; City; State; Zip Code 1006 Mopac Circle Suite 101 Austin, TX 78746	7 Amount of contribution (\$) \$250.00	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) Real Estate Broker		10 Employer (See Instructions) Self	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnston, Cynthia Contributor address; City; State; Zip Code 9805 Glenlake Drive Austin, TX 78730	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joseph, John Contributor address; City; State; Zip Code 4231 Westlake Drive Austin, TX 78746	Amount of contribution (\$) \$25.00	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 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kaufman, Lisa Contributor address; City; State; Zip Code 6508 Mesa Austin, TX 78731	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kolly, Adrienne Contributor address; City; State; Zip Code PO Box 500128 Austin, TX 78613	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Keller Williams Realty	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/22 Report: 13/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kruger, David 6 Contributor address; City; State; Zip Code 722 Congress Avenue Austin, TX 78701	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) Owner		10 Employer (See Instructions) Krugers Diamonds	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kruger, David (Mrs.) Contributor address; City; State; Zip Code 722 Congress Avenue Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lauderback, Margaret Contributor address; City; State; Zip Code 1307 Elton Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) The Lauderback Group	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lauderback, William Contributor address; City; State; Zip Code 1307 Elton Lane Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Hill and Knowlton Strategies	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lehman, Jeanine Contributor address; City; State; Zip Code PO Box 202211 Austin, TX 78720	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Jeanine Lehman PC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/22 Report: 14/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Derek 6 Contributor address; City; State; Zip Code 2300 McCullough Street Austin, TX 78703	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) Real Estate		10 Employer (See Instructions) Stresann Realty Partners	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marsh, Charles A. Contributor address; City; State; Zip Code 2408 Windsor Road Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Endeavor	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McCartt, J. Contributor address; City; State; Zip Code 823 Congress Avenue Suite 900 Austin, TX 78701	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDaniel, Demetrius Contributor address; City; State; Zip Code 7601 Sandia Loop Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Greenberg Traurig, LLP	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNutt, Gordon Jr. Contributor address; City; State; Zip Code PO Box 5968 Austin, TX 78763	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/22 Report: 15/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McNutt, Kay 6 Contributor address; City; State; Zip Code PO Box 5968 Austin, TX 78763	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) Retired		10 Employer (See Instructions) N/A	
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meade, Nikelle Contributor address; City; State; Zip Code 5363 Austral Loop Austin, TX 78739	Amount of contribution (\$) \$25.00	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 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Merjanian, Ara Contributor address; City; State; Zip Code 3211 Hampton Road Austin, TX 78705	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 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Michael Contributor address; City; State; Zip Code 4211 Canoas Drive Austin, TX 78730	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) Pharmacist		Employer (See Instructions) HCA-/St. David's Hospital	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Selma Contributor address; City; State; Zip Code 4211 Canoas Drive Austin, TX 78730	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)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/22 Report: 16/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mullen, Carole 6 Contributor address; City; State; Zip Code 6902 Mesa Drive Austin, TX 78731	7 Amount of contribution (\$) \$300.00	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) Retired		10 Employer (See Instructions) N/A	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mullen, Ron Contributor address; City; State; Zip Code 6902 Mesa Drive Austin, TX 78731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Small Employer Benefits	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Munoz, Ned Contributor address; City; State; Zip Code 1711 W. 32nd Street Austin, TX 78703	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Murphy, Lois Crain Contributor address; City; State; Zip Code 8506 Dorothea Court Austin, TX 78759	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Muse, Ellen Contributor address; City; State; Zip Code 5802 Kentucky Derby Austin, TX 78746	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 15/22 Report: 17/35	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Muse, Ewell H.		7 Amount of contribution (\$) \$50.00		8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
6 Contributor address; City; State; Zip Code 5802 Kentucky Derby Austin, TX 78746					
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Myers, Cis		Amount of contribution (\$) \$25.00		In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor address; City; State; Zip Code 809 Canyon Creek Drive Austin, TX 78746					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newton, Jennifer		Amount of contribution (\$) \$87.22		In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor address; City; State; Zip Code PO Box 2185 Austin, TX 78768					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norman, Scott		Amount of contribution (\$) \$87.22		In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor address; City; State; Zip Code 313 E. 12th Street Suite 210 Austin, TX 78768					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nugent, Jerry Sr.		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor address; City; State; Zip Code 3800 Woodbrook Circle Austin, TX 78759					
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/22 Report: 18/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nugent, Phyllis 6 Contributor address; City; State; Zip Code 3800 Woodbrook Circle Austin, TX 78759	7 Amount of contribution (\$) \$100.00	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)		10 Employer (See Instructions)	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peoples, Karen Contributor address; City; State; Zip Code 7511 Fireoak Drive Austin, TX 78759	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Front Office		Employer (See Instructions) Austin Vision Associates	
Date 12/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Melissa Contributor address; City; State; Zip Code 7706 Rustling Road Austin, TX 78731-1336	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, Ryan Contributor address; City; State; Zip Code 7706 Rustling Road Austin, TX 78731-1336	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) Advertising/Bubbles (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self	
Date 12/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Peterson, LaTrelle Contributor address; City; State; Zip Code 6203 Cat MountainCove Austin, TX 78731	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)	

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The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 17/22 Report: 19/35	
2 FILER NAME Gallo, Sheri			3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prescott, Phyllis 6 Contributor address; City; State; Zip Code 4601 Greystone Drive Austin, TX 78731	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Prescott, Wayne Contributor address; City; State; Zip Code 4601 Greystone Drive Austin, TX 78731	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rechner, Kurt Contributor address; City; State; Zip Code 5908 Overlook Austin, TX 78731	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions) Chief Operating Officer		Employer (See Instructions) Prophet Capital Asset Management		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reck, Dwight Contributor address; City; State; Zip Code 4408 Enclave Cove Austin, TX 78731	Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reck, Victoria Contributor address; City; State; Zip Code 4408 Enclave Cove Austin, TX 78731	Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/22 Report: 20/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rhodes, Sonny 6 Contributor address; City; State; Zip Code 6506 Mesa Drive Austin, TX 78731	7 Amount of contribution (\$) \$100.00	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)		10 Employer (See Instructions)	
Date 12/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rhodes, Sonny Jr. Contributor address; City; State; Zip Code 6506 Mesa Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	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 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rivero, Hector Contributor address; City; State; Zip Code 1402 Nueces Street Austin, TX 78701	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, George Anne Contributor address; City; State; Zip Code 3201 Pecos Street # 7 Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Gris Contributor address; City; State; Zip Code 3201 Pecos Street # 7 Austin, TX 78703	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/22 Report: 21/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sager, Jessica 6 Contributor address; City; State; Zip Code 4205 Greystone Austin, TX 78731	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) Consultant		10 Employer (See Instructions) Self	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sliger, Tom Contributor address; City; State; Zip Code 1110 Iron Horse Leander, TX 78641	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Trust Administer		Employer (See Instructions) Austin Trust Company	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Small, Ed Contributor address; City; State; Zip Code 100 Congress Avenue Suite 1100 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson Walker LLP	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Small, Pam Contributor address; City; State; Zip Code 100 Congress Avenue Suite 1100 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Southwell, Brent Contributor address; City; State; Zip Code 3655 Glen Haven Blvd. Houston, TX 77025	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) PJS of Houston	

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SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/22 Report: 22/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spohn, Darren 6 Contributor address; City; State; Zip Code 9605 Corbe Drive Austin, TX 78726	7 Amount of contribution (\$) \$100.00	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)		10 Employer (See Instructions)	
Date 12/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tipps, Mary Contributor address; City; State; Zip Code 919 Congress Avenue Suite 455 Austin, TX 78701	Amount of contribution (\$) \$87.22	In-kind contribution description (if applicable) Event/Food & Beverage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trotter, J. David Contributor address; City; State; Zip Code 2499 S. Capital of Texas Hwy. Suite A-107 Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Investments		Employer (See Instructions) Self	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Walsh, Thomas Contributor address; City; State; Zip Code 4903 Valley Oak Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	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 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warren, Bill Contributor address; City; State; Zip Code 6702 Mesa Drive Austin, TX 78731	Amount of contribution (\$) \$100.00	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)	

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The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 21/22 Report: 23/35	
2 FILER NAME Gallo, Sheri				3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Warren, Pat		7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 6702 Mesa Drive Austin, TX 78731			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watters, Mark		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 21322 Sequoia Drive Chatsworth, CA 91311			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watters, Vanessa		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 21322 Sequoia Drive Chatsworth, CA 91311			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whorton, Michael (Mrs.)		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11200 Jollyville Road Austin, TX 78759			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Retired			Employer (See Instructions) N/A		
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whorton, Michael		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11200 Jollyville Road Austin, TX 78759			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Insurance			Employer (See Instructions) Whorton Insurance		

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

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 22/22 Report: 24/35	
2 FILER NAME Gallo, Sheri		3 ACCOUNT # (Ethics Commission filers) 00110414	
4 Date 12/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilson, Margaret 6 Contributor address; City; State; Zip Code 2005 Arthur Lane Austin, TX 78704	7 Amount of contribution (\$) \$50.00	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)		10 Employer (See Instructions)	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Worob, Marc Contributor address; City; State; Zip Code 4604 West Rim Cove Austin, TX 78731	Amount of contribution (\$) \$100.00	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 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.

1 PAGE # Schedule: 1/11 Report: 25/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/18/2014	5 Payee name Ampco Parking				
6 Amount (\$) \$15.00	7 Payee address City: State: Zip Code 100 Congress Avenue Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking		
	<input type="checkbox"/> 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 12/19/2014	Payee name Constant Contact				
Amount (\$) \$90.61	Payee address City: State: Zip Code Reservoir Place 1601 Trapelo Road Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Emails		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/08/2014	Payee name Democracy Engine LLC				
Amount (\$) \$23.66	Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/17/2014	Payee name Democracy Engine LLC				
Amount (\$) \$123.88	Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/11 Report: 26/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/24/2014	5 Payee name Democracy Engine LLC				
6 Amount (\$) \$92.71	7 Payee address City: State: Zip Code 850 Quincy Street # 402 Washington, DC 20011				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website donation fees <input type="checkbox"/> 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 12/10/2014	Payee name Dialing Services				
Amount (\$) \$584.58	Payee address City: State: Zip Code PO Box 372421 Denver, CO 80237				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phonebank <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/12/2014	Payee name Dialing Services				
Amount (\$) \$431.73	Payee address City: State: Zip Code PO Box 372421 Denver, CO 80237				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phonebank <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/15/2014	Payee name Facebook				
Amount (\$) \$65.86	Payee address City: State: Zip Code Dept 415 PO Box 10005 Palo Alto, CA 94303				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/11 Report: 27/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/15/2014	5 Payee name Facebook				
6 Amount (\$) \$36.57	7 Payee address City: State: Zip Code Dept 415 PO Box 10005 Palo Alto, CA 94303				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> 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 12/31/2014	Payee name Facebook				
Amount (\$) \$220.03	Payee address City: State: Zip Code Dept 415 PO Box 10005 Palo Alto, CA 94303				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ads		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/31/2014	Payee name Google				
Amount (\$) \$5.00	Payee address City: State: Zip Code Googleplex Mountain View, CA 94043				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/15/2014	Payee name Home Depot				
Amount (\$) \$16.22	Payee address City: State: Zip Code 10515 N Mopac Exp Austin, TX 78759				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Signs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/11 Report: 28/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/15/2014	5 Payee name Home Depot				
6 Amount (\$) \$89.07	7 Payee address City: State: Zip Code 10515 N Mopac Exp Austin, TX 78759				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Signs <input type="checkbox"/> 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 12/08/2014	Payee name Johnson, Christina				
Amount (\$) \$200.00	Payee address City: State: Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Field work <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/10/2014	Payee name KEYE				
Amount (\$) \$5,155.25	Payee address City: State: Zip Code 10700 Metric Blvd Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/10/2014	Payee name KEYE				
Amount (\$) \$170.00	Payee address City: State: Zip Code 10700 Metric Blvd Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/11 Report: 29/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/12/2014	5 Payee name KEYE				
6 Amount (\$) \$488.75	7 Payee address City: State: Zip Code 10700 Metric Blvd Austin, TX 78758				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad <input type="checkbox"/> 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 12/12/2014	Payee name KEYE				
Amount (\$) \$1,266.50	Payee address City: State: Zip Code 10700 Metric Blvd Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/18/2014	Payee name Kneaded Pleasures				
Amount (\$) \$62.08	Payee address City: State: Zip Code 3573 Far West Austin, TX 78731				
PURPOSE OF EXPENDITURE	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 expense <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/08/2014	Payee name KTBC				
Amount (\$) \$4,760.00	Payee address City: State: Zip Code 119 East 10th Street Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/11 Report: 30/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/15/2014	5 Payee name KTBC				
6 Amount (\$) \$1,853.00	7 Payee address City: State: Zip Code 119 East 10th Street Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV		
	<input type="checkbox"/> 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 12/10/2014	Payee name KVUE				
Amount (\$) \$5,843.75	Payee address City: State: Zip Code 3201 Steck Avenue Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/12/2014	Payee name KVUE				
Amount (\$) \$1,338.75	Payee address City: State: Zip Code 3201 Steck Avenue Austin, TX 78757				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/11/2014	Payee name Lily Pad Arts				
Amount (\$) \$2,390.63	Payee address City: State: Zip Code 1924 Kempwood Loop Round Rock, TX 78665				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Graphics		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/11 Report: 31/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/10/2014	5 Payee name LiN Television Sales				
6 Amount (\$) \$1,576.75	7 Payee address City: State: Zip Code 908 W MLK Blvd. Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> 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 12/10/2014	Payee name LiN Television Sales				
Amount (\$) \$1,254.00	Payee address City: State: Zip Code 908 W MLK Blvd. Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/12/2014	Payee name Lone Star Directions				
Amount (\$) \$3,845.00	Payee address City: State: Zip Code 403 Dawson Street # 5 San Antonio, TX 78202				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> TV production		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/29/2014	Payee name Nation Builder				
Amount (\$) \$29.00	Payee address City: State: Zip Code 448 S. Hill Street Los Angeles, CA 90013				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/11 Report: 32/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/08/2014	5 Payee name Olvero, Lisbete				
6 Amount (\$) \$600.00	7 Payee address City: State: Zip Code 2121 Burton # 1058 Austin, TX 78741				
8 PURPOSE OF EXPENDITURE	(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 data entry		
	<input type="checkbox"/> 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 12/09/2014	Payee name Paragon Printing				
Amount (\$) \$1,502.83	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/09/2014	Payee name Paragon Printing				
Amount (\$) \$1,408.00	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/11/2014	Payee name Paragon Printing				
Amount (\$) \$3,839.78	Payee address City: State: Zip Code 10423 McKalla Place Austin, TX 78758				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Comparison mailer printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/11 Report: 33/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/15/2014	5 Payee name Platinum Parking				
6 Amount (\$) \$5.00	7 Payee address City: State: Zip Code 221 W. 6th Street Lot 177 Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Parking		
	<input type="checkbox"/> 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 12/30/2014	Payee name Starbucks				
Amount (\$) \$2.11	Payee address City: State: Zip Code 3637 Far West Blvd Austin, TX 78731				
PURPOSE OF EXPENDITURE	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 expense		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/08/2014	Payee name Thompson, Kathryn				
Amount (\$) \$400.00	Payee address City: State: Zip Code 12700 Cloud Mountain Crossing Austin, TX 78726				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Data entry contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/24/2014	Payee name Thompson, Kathryn				
Amount (\$) \$400.00	Payee address City: State: Zip Code 12700 Cloud Mountain Crossing Austin, TX 78726				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/11 Report: 34/35		2 FILER NAME Gallo, Sheri		3 ACCOUNT # (TEC filers) 00110414	
4 Date 12/11/2014	5 Payee name Thompson & Knight, LLP				
6 Amount (\$) \$650.00	7 Payee address City: State: Zip Code 98 San Jacinto Blvd. Suite 1900 Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Attorney fees		
	<input type="checkbox"/> 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 12/10/2014	Payee name Time Warner Cable				
Amount (\$) \$4,340.20	Payee address City: State: Zip Code 10801 N. Mopac Expressway Bldg. 1, Suite 300 Austin, TX 78759				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/11/2014	Payee name Time Warner Cable				
Amount (\$) \$530.00	Payee address City: State: Zip Code 10801 N. Mopac Expressway Bldg. 1, Suite 300 Austin, TX 78759				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/11/2014	Payee name US Post Office Chimney Corners Station				
Amount (\$) \$3,742.94	Payee address City: State: Zip Code 3575 Far West Blvd. Austin, TX 78731				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/11 Report: 35/35	2 FILER NAME Gallo, Sheri	3 ACCOUNT # (TEC filers) 00110414
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4 Date 12/10/2014	5 Payee name West Austin News
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6 Amount (\$) \$408.75	7 Payee address City: State: Zip Code 5511 Parkcrest Drive # 105 Austin, TX 78731
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 12/11/2014	Payee name West Austin News
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Amount (\$) \$456.75	Payee address City: State: Zip Code 5511 Parkcrest Drive # 105 Austin, TX 78731
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Ad
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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AUSTIN CITY CLERK
RECEIVED

SCHEDULE ATX. 4 - attach to form C/OH (C&E)
Reference §2-2-25, Austin City Code

2015 JUL 28 AM 11 31

BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Sheri Gallo

For each checking, savings or other financial institution account maintained during 2014, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: BBVA Compass

Type of account: Checking

The beginning balance: \$0 (5/1/14)

The ending balance: \$11,789.15 (12/31/14)

Enter the following information for checks issued on that account that have not cleared by December 31:

Date	Payee	Amount
12/8/14	Lisbete Olvera	\$ 600.00
12/24/14	Kathryn Thompson	\$ 400.00

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

Date of receipt	Contributor	Amount

Sheri Gallo

SCHEDULE ATX. 4 - attach to form C/OH (C&E)
Reference §2-2-25, Austin City Code

Amount of interest or dividends earned: \$ 0

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal

A listing of all checks received by December 31 but not deposited into any account (whether or not the checks have been "accepted" within the definition of the Texas Election Code):

Date of receipt	Contributor	Amount
12/8	Mike + Susan Edgar	200.00
12/8	Bill + Pat Warren	200.00