Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989

# 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)
00000009

**2** PAGE #
1 of 18

**3** CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR | FIRST: Delia | MI
NICKNAME | LAST: Garza | SUFFIX

**4** CANDIDATE / OFFICEHOLDER MAILING ADDRESS
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 41795
Austin, TX 78704
☐ Change of Address

**5** CAMPAIGN TREASURER NAME
MS / MRS / MR | FIRST: Jackie | MI
NICKNAME | LAST: Goodman | SUFFIX

**6** CAMPAIGN TREASURER ADDRESS (Residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
1010 Austin Highlands
Austin, TX 78745

**7** CAMPAIGN TREASURER PHONE
AREA CODE | PHONE NUMBER | EXTENSION
(512) 445-2975

**8** REPORT TYPE
- [X] January 15
- [ ] 30th day before election
- [ ] Runoff
- [ ] 15th day after campaign treasurer appointment (officeholder only)
- [ ] July 15
- [ ] 8th day before election
- [X] Exceeded $500 limit
- [ ] Final report (Attach C/OH - FR)

**9** PERIOD COVERED
Month Day Year: 10/26/2014 THROUGH Month Day Year: 12/31/2014

**10** ELECTION
ELECTION DATE (Month Day Year): 11/04/2014
ELECTION TYPE
- [ ] Primary
- [ ] Runoff
- [X] General
- [ ] Special

**11** OFFICE
OFFICE HELD (if any)

**12** OFFICE SOUGHT (if known)
City Council, District 2

**OFFICE USE ONLY**
Date Received
2015 JAN 15 PM 4 01
AUSTIN CITY CLERK
RECEIVED
Date Hand-delivered or Date Postmarked
Receipt # Amount
Date Processed
Date Imaged

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH**
**COVER SHEET PG 2**

**13** C/OH NAME Garza, Delia

**14** ACCOUNT # (Ethics Commission filers) 00000009

**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

[X] GENERAL

[ ] SPECIFIC

COMMITTEE NAME: Austin Firefighters PAC

COMMITTEE ADDRESS: 7537 Cameron Rd. Austin, TX 78752

COMMITTEE CAMPAIGN TREASURER NAME: Lundstedt, David

COMMITTEE CAMPAIGN TREASURER ADDRESS: 1617 Taylor Gaines St. Austin, TX 78741

[X] additional pages

| | | | |
|---|---|---|---|
| **16** CONTRIBUTION TOTALS | 1. | TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | $ 175.00 |
| | 2. | **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | $ 9,200.00 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED | $ 411.66 |
| | 4. | **TOTAL POLITICAL EXPENDITURES** | $ 18,593.23 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | $ 3,770.85 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | $ 0.00 |

**17** AFFIDAVIT

SUSAN C. HARRY
Notary Public, State of Texas
My Commission Expires
May 16, 2015

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Delia Garza, this the 15th day of January, 20 15, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Susan Harry — Print name of officer administering oath | Notary — Title of officer administering oath

# CANDIDATE / OFFICEHOLDER REPORT:
## NOTICE FROM POLITCAL COMMITTEE(S)

**FORM C/OH**
**ADDENDUM**



C/OH NAME Garza, Delia

ACCOUNT # (Ethics Commission filers) 00000009

**17 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 | | |
|---|---|---|
| ☐ GENERAL | COMMITTEE NAME | Austinites for Equity |
| ☒ SPECIFIC | COMMITTEE ADDRESS | 1812 Centre Creek Dr.<br>Ste. 310<br>Austin, TX 78754 |
| | COMMITTEE CAMPAIGN TREASURER NAME | Kirfman, Jack |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | 15408 Interlachen Dr.<br>Austin, TX 78717 |

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 | | |
|---|---|---|
| ☒ GENERAL | COMMITTEE NAME | Sierra Club Political Committee of Texas |
| ☐ SPECIFIC | COMMITTEE ADDRESS | 615 Willow<br>San Antonio, TX 78202 |
| | COMMITTEE CAMPAIGN TREASURER NAME | Gonzalez, Hector |
| | COMMITTEE CAMPAIGN TREASURER ADDRESS | 615 Willow<br>San Antonio, TX 78202 |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/7 Report: 4/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Beckham, Brian<br>11205 Limoncillo Ct<br>Austin, TX 78750-3688 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| 9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions) |
|---|---|
| Rancher | Beckham Ranch, Inc. |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Beckham, Kimberly<br>11205 Limoncillo Ct<br>Austin, TX 78750-3688 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | Armbrust & Brown, PLLC |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Brown, Frank<br>602 Coquina Ln<br>West Lake Hills, TX 78746-4536 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Lawyer | Armbrust & Brown PLLC |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Brown, Janice<br>602 Coquina Ln<br>West Lake Hills, TX 78746-4536 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Educational Counselor | CAPSA |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Bunch, William<br>1307 Oxford Ave<br>Austin, TX 78704-2825 | $75.00 | (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: 2/7 Report: 5/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Burnett, Claudia<br>6 Contributor address; City; State; Zip Code<br>1601 Forest Trl<br>Austin, TX 78703-3231 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

9 Principal occupation / Job title (See Instructions): Housewife

10 Employer (See Instructions): Self-Employed

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Burnett, Michael<br>Contributor address; City; State; Zip Code<br>1601 Forest Trl<br>Austin, TX 78703-3231 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Armbrust & Brown

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Byars, Anne<br>Contributor address; City; State; Zip Code<br>2103 Schulle Ave<br>Austin, TX 78703-2141 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

Principal occupation / Job title (See Instructions): Farmer

Employer (See Instructions): Maple Lane Farm of Greenfield, LLC

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Byars, Samuel<br>Contributor address; City; State; Zip Code<br>2103 Schulle Ave<br>Austin, TX 78703-2141 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Armbrust & Brown, PLLC

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Carlson, Michelle<br>Contributor address; City; State; Zip Code<br>1609 Mohle Dr<br>Austin, TX 78703-1937 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Reed & Scardino LLP

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/7 Report: 6/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Carlson, Patrick<br>1609 Mohle Dr<br>Austin, TX 78703-1937 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| 9 Principal occupation / Job title (See Instructions): Attorney | | 10 Employer (See Instructions): Armbrust & Brown, PLLC | |
| 10/31/2014 | Chen, Sheng<br>5000 Mission Oaks Blvd<br>Unit 24<br>Austin, TX 78735-6742 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| Principal occupation / Job title (See Instructions): Owner | | Employer (See Instructions): Casulo Hotel | |
| 10/30/2014 | Cody, Buck<br>5708 Highland Hills Dr<br>Austin, TX 78731-4233 | $100.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| Principal occupation / Job title (See Instructions): | | Employer (See Instructions): | |
| 11/02/2014 | Guthikonda, Gopal<br>PO Box 200388<br>Austin, TX 78720-0388 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| Principal occupation / Job title (See Instructions): Engineer | | Employer (See Instructions): CP&Y, Inc | |
| 11/04/2014 | HDR, Inc. Political Action Committee (☐ out-of-state PAC (ID# C00103903))<br>8404 Indian Hills Drive<br>Omaha, NE 68114 | $350.00 | (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: 4/7 Report: 7/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Hobbs, Jeff<br>3700 Hillbrook Dr<br>Austin, TX 78731-4042 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| 9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions) |
|---|---|
| Attorney | Armbrust & Brown, PLLC |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Hobbs, Lisa<br>3700 Hillbrook Dr<br>Austin, TX 78731-4042 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | Kuhn Hobbs PLLC |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Jones, Annette<br>100 Congress Ave<br>Ste 1300<br>Austin, TX 78701-2744 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Not Employed | Not Employed |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Jones, Kenneth<br>100 Congress Ave<br>Ste 1300<br>Austin, TX 78701-2744 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | Armbrust & Brown, PLLC |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Krumme, Gregg<br>10702 Hastings Ln<br>Austin, TX 78750-4042 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Lawyer | Armbrust & Brown PLLC |

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/7 Report: 8/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Krumme, Robin<br>10702 Hastings Ln<br>Austin, TX 78750-4042 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| 9 Principal occupation / Job title (See Instructions) | 10 Employer (See Instructions) |
|---|---|
| Retired | Retired |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/27/2014 | Littlefield, Sue<br>204 Westhaven Dr<br>West Lake Hills, TX 78746-4443 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Attorney | Armbrust & Brown |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/04/2014 | Marsh, Charles<br>2408 Windsor Rd<br>Austin, TX 78703-2413 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| Principal | Endeavor |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/03/2014 | Marsh, Will<br>2117 W 12th St<br>Austin, TX 78703-3807 | $100.00 | (If travel outside of Texas, complete Schedule T) ☐ |

| Principal occupation / Job title (See Instructions) | Employer (See Instructions) |
|---|---|
| | |

| Date | Full name of contributor ☐ out-of-state PAC (ID#_____) / Contributor address; City; State; Zip Code | Amount of contribution ($) | In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/30/2014 | Martinez, Ramiro<br>10009 Childress Dr<br>Austin, TX 78753-4333 | $100.00 | (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: 6/7 Report: 9/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) / 6 Contributor address; City; State; Zip Code | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 11/02/2014 | Mohamed, Basheer<br>8305 Canola Bnd<br>Austin, TX 78729-6465 | $200.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| 9 Principal occupation / Job title (See Instructions): President | | 10 Employer (See Instructions): Quality Power, LLC | |
| 10/29/2014 | Newberg, Jeffrey<br>3830 Hunterwood Pt<br>Austin, TX 78746-1304 | $200.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| Principal occupation / Job title (See Instructions): Real Estate | | Employer (See Instructions): Endeavor Real Estate Group | |
| 10/29/2014 | Pastor, Andrew<br>2908 Sparkling Brook Ln<br>Austin, TX 78746-1987 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| Principal occupation / Job title (See Instructions): Real Estate | | Employer (See Instructions): Endeavor Real Estate Group | |
| 11/04/2014 | Patel, Piyush<br>529 Greenridge Dr<br>Coppell, TX 75019-5719 | $350.00 | (If travel outside of Texas, complete Schedule T) ☐ |
| Principal occupation / Job title (See Instructions): CEO | | Employer (See Instructions): CP&Y, Inc | |
| 10/28/2014 | Turnham, Joseph<br>677 Sherwood Dr<br>Auburn, AL 36830-6047 | $100.00 | (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: 7/7 Report: 10/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers) 00000009

| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_____) | 7 Amount of contribution ($) | 8 In-kind contribution description (if applicable) |
|---|---|---|---|
| 10/31/2014 | Zimel, Adam<br>6 Contributor address; City; State; Zip Code<br>4009 Madrid Cv<br>Austin, TX 78759-5058 | $100.00 | |

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

| 9 Principal occupation / Job title (See Instructions) | 10 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 # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
|---|---|---|
| Schedule: 1/6 Report: 11/16 | Garza, Delia | 00000009 |

| | | |
|---|---|---|
| 4 Date: 11/11/2014 | 5 Payee name: Ace Printing | |
| 6 Amount ($): $777.92 | 7 Payee address: 7807 Doncaster<br>Austin, TX 78745 | City; State; Zip Code |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule): Printing Expense | (b) Description (If travel outside of Texas, complete Schedule T): Printing<br>☐ 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: 11/11/2014 | Payee name: Azul Strategies | |
| Amount ($): $3,812.18 | Payee address: 1802 Ann Arbor<br>Austin, TX 78704 | City; State; Zip Code |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Printing Expense | Description (If travel outside of Texas, complete Schedule T): Printing, postage & mailing services<br>☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 11/11/2014 | Payee name: Azul Strategies | |
| Amount ($): $1,522.24 | Payee address: 1802 Ann Arbor<br>Austin, TX 78704 | City; State; Zip Code |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Advertising Expense | Description (If travel outside of Texas, complete Schedule T): Phone calls<br>☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 10/31/2014 | Payee name: Daze, Ken | |
| Amount ($): $162.00 | Payee address: 15401 Venadl Drive<br>Lakeway, TX 78734 | 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): Contract labor<br>☐ 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 # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
|---|---|---|
| Schedule: 2/6 Report: 12/16 | Garza, Delia | 00000009 |

| | | |
|---|---|---|
| 4 Date: 11/11/2014 | 5 Payee name: Daze, Ken | |
| 6 Amount ($): $60.00 | 7 Payee address City; State; Zip Code: 15401 Venadl Drive Lakeway, TX 78734 | |
| 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): Contract labor ☐ 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: 11/03/2014 | Payee name: First Data | |
| Amount ($): $189.98 | Payee address City; State; Zip Code: 5565 Glenridge Connector NE Atlanta, GA 30342 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Accounting/Banking | Description (If travel outside of Texas, complete Schedule T): Credit card processing fees ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 11/03/2014 | Payee name: First Data | |
| Amount ($): $141.80 | Payee address City; State; Zip Code: 5565 Glenridge Connector NE Atlanta, GA 30342 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Accounting/Banking | Description (If travel outside of Texas, complete Schedule T): Credit card processing fees ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 12/03/2014 | Payee name: First Data | |
| Amount ($): $9.60 | Payee address City; State; Zip Code: 5565 Glenridge Connector NE Atlanta, GA 30342 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Accounting/Banking | Description (If travel outside of Texas, complete Schedule T): Credit card processing fees ☐ 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 # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
|---|---|---|
| Schedule: 3/6 Report: 13/16 | Garza, Delia | 00000009 |

| | | |
|---|---|---|
| 4 Date: 12/03/2014 | 5 Payee name: First Data | |
| 6 Amount ($): $169.05 | 7 Payee address City; State; Zip Code: 5565 Glenridge Connector NE Atlanta, GA 30342 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule): Accounting/Banking | (b) Description (If travel outside of Texas, complete Schedule T) ☐: Credit card processing fees ☐ 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: 12/03/2014 | Payee name: First Data | |
| Amount ($): $66.22 | Payee address City; State; Zip Code: 5565 Glenridge Connector NE Atlanta, GA 30342 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Accounting/Banking | Description (If travel outside of Texas, complete Schedule T) ☐: Credit card processing fees ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 12/03/2014 | Payee name: First Data | |
| Amount ($): $42.53 | Payee address City; State; Zip Code: 5565 Glenridge Connector NE Atlanta, GA 30342 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Accounting/Banking | Description (If travel outside of Texas, complete Schedule T) ☐: credit card processing fees ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 11/11/2014 | Payee name: Garza, Delia | |
| Amount ($): $1,489.75 | Payee address City; State; Zip Code: 209 Sandra St. Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Loan Repayment/Reimbursement | Description (If travel outside of Texas, complete Schedule T) ☐: reimbursement of expenses previously reported ☐ 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 # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
|---|---|---|
| Schedule: 4/6 Report: 14/16 | Garza, Delia | 00000009 |

| | | |
|---|---|---|
| 4 Date: 11/11/2014 | 5 Payee name: Garza, Delia | |
| 6 Amount ($): $5,025.00 | 7 Payee address: 209 Sandra St. Austin, TX 78745 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule): Loan Repayment/Reimbursement | (b) Description (If travel outside of Texas, complete Schedule T): repayment of loan ☐ 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: 10/30/2014 | Payee name: IKEA | |
| Amount ($): $178.40 | Payee address: 1 Ikea Way Round Rock, TX 78665 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Gifts/Awards/Memorials Expense | Description (If travel outside of Texas, complete Schedule T): Gifts ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 10/27/2014 | Payee name: James, Beau | |
| Amount ($): $42.00 | Payee address: 6001 York Bridge Cir. Austin, TX 78749 | |
| 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): Contract labor ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 10/31/2014 | Payee name: James, Beau | |
| Amount ($): $66.00 | Payee address: 6001 York Bridge Cir. Austin, TX 78749 | |
| 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): Contract labor ☐ 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 # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
|---|---|---|
| Schedule: 5/6 Report: 15/16 | Garza, Delia | 00000009 |

| | | |
|---|---|---|
| 4 Date: 10/31/2014 | 5 Payee name: James, Derek | |
| 6 Amount ($): $172.00 | 7 Payee address City; State; Zip Code: 4902 Alma Loma Dr. Austin, TX 78749 | |
| 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): Contract labor ☐ 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: 11/11/2014 | Payee name: James, Derek | |
| Amount ($): $60.00 | Payee address City; State; Zip Code: 4902 Alma Loma Dr. Austin, TX 78749 | |
| 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): Contract labor ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 11/04/2014 | Payee name: Susan Harry Consulting, LLC | |
| Amount ($): $250.00 | Payee address City; State; Zip Code: P.O. Box 301074 Austin, TX 78703 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Consulting Expense | Description (If travel outside of Texas, complete Schedule T): Compliance Consulting ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |

| | | |
|---|---|---|
| Date: 11/04/2014 | Payee name: Trudy's | |
| Amount ($): $382.54 | Payee address City; State; Zip Code: 901 Little Texas Lane Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Event Expense | Description (If travel outside of Texas, complete Schedule T): Election night party ☐ 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 # | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
|---|---|---|
| Schedule: 6/6 Report: 16/16 | Garza, Delia | 00000009 |

| | |
|---|---|
| 4 Date: 10/31/2014 | 5 Payee name: Williams, Marisa |
| 6 Amount ($): $750.00 | 7 Payee address City; State; Zip Code: 6509 Scenic Cove Austin, TX 78739 |
| 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): Salary ☐ 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: 11/05/2014 | Payee name: Williams, Marisa |
| Amount ($): $1,750.00 | Payee address City; State; Zip Code: 6509 Scenic Cove Austin, TX 78739 |
| 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): Salary ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name; Office sought: Office held: |

| | |
|---|---|
| Date: 11/11/2014 | Payee name: Williams, Marisa |
| Amount ($): $500.00 | Payee address City; State; Zip Code: 6509 Scenic Cove Austin, TX 78739 |
| 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): Salary ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name; Office sought: Office held: |

| | |
|---|---|
| Date: 10/29/2014 | Payee name: Worley Printing |
| Amount ($): $562.36 | Payee address City; State; Zip Code: 3217 N Interstate 35 Frontage Rd Austin, TX 78735 |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule): Printing Expense; Description (If travel outside of Texas, complete Schedule T): Printing ☐ Check if Austin, TX, officeholder living expense |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name; Office sought: Office held: |

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

# 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: _____

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: Frost Bank

Type of account: Checking

The beginning balance: $0

The ending balance: $3,855.02

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

| Date | Payee | Amount |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

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

| Date of receipt | Contributor | Amount |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

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

Amount of interest or dividends earned: _____

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

| Date of deposit or withdrawal | Amount of deposit | Amount of withdrawal |
|---|---|---|
| Various | .30 cents total for year (bank interest) | |
| 5-6-14 | .34 cents (Gvalidate test deposit for accounting service) | |
| | | |
| | | |
| | | |

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 |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |