

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 MI Delia		OFFICE USE ONLY Date Received 2015 JUN 15 8 PM 4 01 AUSTIN CITY CLERK RECEIVED
	NICKNAME LAST SUFFIX Garza		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 41795 Austin, TX 78704		Date Hand-delivered Date Electronically
			Receipt # Amount
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Jackie		Date Processed
	NICKNAME LAST SUFFIX Goodman		Date Imaged
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	<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 checked="" type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year THROUGH Month Day Year 10/26/2014 12/31/2014		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 11/04/2014		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) City Council, District 2
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

COMMITTEE NAME

Austin Firefighters PAC

☒ GENERAL

COMMITTEE ADDRESS

7537 Cameron Rd.
Austin, TX 78752

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

Lundstedt, David

COMMITTEE CAMPAIGN TREASURER ADDRESS

1617 Taylor Gaines St.
Austin, TX 78741

☒ 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



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

Print name of officer administering oath

Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)****FORM C/OH
ADDENDUM**

Page 3 of 16

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☒ SPECIFIC**COMMITTEE NAME**

Austinites for Equity

COMMITTEE ADDRESS1812 Centre Creek Dr.
Ste. 310
Austin, TX 78754**COMMITTEE CAMPAIGN
TREASURER NAME**

Kirkman, Jack

**COMMITTEE CAMPAIGN
TREASURER ADDRESS**15408 Interlachen Dr.
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☐ SPECIFIC**COMMITTEE NAME**

Sierra Club Political Committee of Texas

COMMITTEE ADDRESS615 Willow
San Antonio, TX 78202**COMMITTEE CAMPAIGN
TREASURER NAME**

Gonzalez, Hector

**COMMITTEE CAMPAIGN
TREASURER ADDRESS**615 Willow
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

10/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Beckham, Brian

6 Contributor address; City; State; Zip Code
11205 Limoncillo Ct
Austin, TX 78750-3688

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Rancher

10 Employer (See Instructions)
Beckham Ranch, Inc.

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beckham, Kimberly

Contributor address; City; State; Zip Code
11205 Limoncillo Ct
Austin, TX 78750-3688

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Armbrust & Brown, PLLC

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, Frank

Contributor address; City; State; Zip Code
602 Coquina Ln
West Lake Hills, TX 78746-4536

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Lawyer

Employer (See Instructions)
Armbrust & Brown PLLC

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, Janice

Contributor address; City; State; Zip Code
602 Coquina Ln
West Lake Hills, TX 78746-4536

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Educational Counselor

Employer (See Instructions)
CAPSA

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bunch, William

Contributor address; City; State; Zip Code
1307 Oxford Ave
Austin, TX 78704-2825

Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/7 Report: 5/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers)

00000009

4 Date

11/04/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Burnett, Claudia6 Contributor address; City; State; Zip Code
1601 Forest Trl
Austin, TX 78703-32317 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Housewife10 Employer (See Instructions)
Self-Employed

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Burnett, MichaelContributor address; City; State; Zip Code
1601 Forest Trl
Austin, TX 78703-3231Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
Armbrust & Brown

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Byars, AnneContributor address; City; State; Zip Code
2103 Schulle Ave
Austin, TX 78703-2141Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
FarmerEmployer (See Instructions)
Maple Lane Farm of Greenfield, LLC

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Byars, SamuelContributor address; City; State; Zip Code
2103 Schulle Ave
Austin, TX 78703-2141Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
Armbrust & Brown, PLLC

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Carlson, MichelleContributor address; City; State; Zip Code
1609 Mohle Dr
Austin, TX 78703-1937Amount of
contribution (\$)

\$350.00

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

10/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Carlson, Patrick

6 Contributor address; City; State; Zip Code
1609 Mohle Dr
Austin, TX 78703-1937

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Attorney

10 Employer (See Instructions)
Armbrust & Brown, PLLC

Date

10/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chen, Sheng

Contributor address; City; State; Zip Code
5000 Mission Oaks Blvd
Unit 24
Austin, TX 78735-6742

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Casulo Hotel

Date

10/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cody, Buck

Contributor address; City; State; Zip Code
5708 Highland Hills Dr
Austin, TX 78731-4233

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/02/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Guthikonda, Gopal

Contributor address; City; State; Zip Code
PO Box 200388
Austin, TX 78720-0388

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
CP&Y, Inc

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# C00103903)
HDR, Inc. Political Action Committee

Contributor address; City; State; Zip Code
8404 Indian Hills Drive
Omaha, NE 68114

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/7 Report: 7/16

2 FILER NAME Garza, Delia

3 ACCOUNT # (Ethics Commission filers)

00000009

4 Date

10/27/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hobbs, Jeff6 Contributor address; City; State; Zip Code
3700 Hillbrook Dr
Austin, TX 78731-40427 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Attorney10 Employer (See Instructions)
Armbrust & Brown, PLLC

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hobbs, LisaContributor address; City; State; Zip Code
3700 Hillbrook Dr
Austin, TX 78731-4042Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
Kuhn Hobbs PLLC

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, AnnetteContributor address; City; State; Zip Code
100 Congress Ave
Ste 1300
Austin, TX 78701-2744Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
Not EmployedEmployer (See Instructions)
Not Employed

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, KennethContributor address; City; State; Zip Code
100 Congress Ave
Ste 1300
Austin, TX 78701-2744Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
AttorneyEmployer (See Instructions)
Armbrust & Brown, PLLC

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Krumme, GreggContributor address; City; State; Zip Code
10702 Hastings Ln
Austin, TX 78750-4042Amount of
contribution (\$)

\$350.00

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

11/04/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Krumme, Robin

6 Contributor address; City; State; Zip Code
10702 Hastings Ln
Austin, TX 78750-4042

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
Retired

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Littlefield, Sue

Contributor address; City; State; Zip Code
204 Westhaven Dr
West Lake Hills, TX 78746-4443

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Armbrust & Brown

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marsh, Charles

Contributor address; City; State; Zip Code
2408 Windsor Rd
Austin, TX 78703-2413

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Principal

Employer (See Instructions)
Endeavor

Date

11/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marsh, Will

Contributor address; City; State; Zip Code
2117 W 12th St
Austin, TX 78703-3807

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Martinez, Ramiro

Contributor address; City; State; Zip Code
10009 Childress Dr
Austin, TX 78753-4333

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/7 Report: 9/16	
2 FILER NAME Garza, Delia		3 ACCOUNT # (Ethics Commission filers) 00000009	
4 Date 11/02/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mohamed, Basheer 6 Contributor address; City; State; Zip Code 8305 Canola Bnd Austin, TX 78729-6465	7 Amount of contribution (\$) \$200.00	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) President		10 Employer (See Instructions) Quality Power, LLC	
Date 10/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Newberg, Jeffrey Contributor address; City; State; Zip Code 3830 Hunterwood Pl Austin, TX 78746-1304	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) Endeavor Real Estate Group	
Date 10/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pastor, Andrew Contributor address; City; State; Zip Code 2908 Sparkling Brook Ln Austin, TX 78746-1987	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 Real Estate Group	
Date 11/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patel, Piyush Contributor address; City; State; Zip Code 529 Greenridge Dr Coppell, TX 75019-5719	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) CP&Y, Inc	
Date 10/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Turnham, Joseph Contributor address; City; State; Zip Code 677 Sherwood Dr Auburn, AL 36830-6047	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: 7/7 Report: 10/16

2 FILER NAME Garza, Delia**3** ACCOUNT # (Ethics Commission filers)

00000009

4 Date

10/31/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Zimel, Adam**6** Contributor address; City, State; Zip Code
4009 Madrid Cv
Austin, TX 78759-5058**7** Amount of
contribution (\$)

\$100.00

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

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: 1/6 Report: 11/16		2 FILER NAME Garza, Delia		3 ACCOUNT # (TEC filers) 00000009	
4 Date 11/11/2014	5 Payee name Ace Printing				
6 Amount (\$) \$777.92	7 Payee address City: State: Zip Code 7807 Doncaster Austin, TX 78745				
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) <input type="checkbox"/> Printing		
	<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 11/11/2014	Payee name Azul Strategies				
Amount (\$) \$3,812.18	Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704				
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"/> Printing, postage & mailing services		
	<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 11/11/2014	Payee name Azul Strategies				
Amount (\$) \$1,522.24	Payee address City: State: Zip Code 1802 Ann Arbor Austin, TX 78704				
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"/> Phone calls		
	<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 10/31/2014	Payee name Daze, Ken				
Amount (\$) \$162.00	Payee address City: State: Zip Code 15401 Venadl Drive Lakeway, TX 78734				
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: 2/6 Report: 12/16		2 FILER NAME Garza, Delia		3 ACCOUNT # (TEC filers) 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) <input type="checkbox"/> Contract labor		
	<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 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) <input type="checkbox"/> Credit card processing 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 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) <input type="checkbox"/> Credit card processing 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 12/03/2014	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) <input type="checkbox"/> Credit card processing 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: 3/6 Report: 13/16		2 FILER NAME Garza, Delia		3 ACCOUNT # (TEC filers) 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) <input type="checkbox"/> Credit card processing 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 12/03/2014		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) <input type="checkbox"/> Credit card processing 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 12/03/2014		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) <input type="checkbox"/> credit card processing 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 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) <input type="checkbox"/> reimbursement of expenses previously reported <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: 4/6 Report: 14/16		2 FILER NAME Garza, Delia		3 ACCOUNT # (TEC filers) 00000009	
4 Date 11/11/2014		5 Payee name Garza, Delia			
6 Amount (\$) \$5,025.00		7 Payee address City: State: Zip Code 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) <input type="checkbox"/> repayment of loan <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 10/30/2014		Payee name IKEA			
Amount (\$) \$178.40		Payee address City: State: Zip Code 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) <input type="checkbox"/> Gifts <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 10/27/2014		Payee name James, Beau			
Amount (\$) \$42.00		Payee address City: State: Zip Code 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) <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:	
Date 10/31/2014		Payee name James, Beau			
Amount (\$) \$66.00		Payee address City: State: Zip Code 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) <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: 5/6 Report: 15/16		2 FILER NAME Garza, Delia		3 ACCOUNT # (TEC filers) 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) <input type="checkbox"/> Contract labor		
	<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 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) <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:
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) <input type="checkbox"/> Compliance Consulting		
	<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 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) <input type="checkbox"/> Election night party		
	<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: 6/6 Report: 16/16		2 FILER NAME Garza, Delia		3 ACCOUNT # (TEC filers) 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) <input type="checkbox"/> Salary		
	<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 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) <input type="checkbox"/> Salary		
	<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 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) <input type="checkbox"/> Salary		
	<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 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) <input type="checkbox"/> 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:

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

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