FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 00000009 CANDIDATE / MS/MRS/MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** Delia NAME Date Received **SUFFIX** NICKNAME LAST Garza Date Hand-delivered or Date Postmarked CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY: ZIP CODE **OFFICEHOLDER** 209 Sandra Street MAILING Receipl # **ADDRESS** Change of Address Austin, TX 78745 Date Processed Date Imaged CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** \sim Jackie ш NAME تح _ NICKNAME LAST **SUFFIX** Goodman CAMPAIGN ZIP CODE STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE: **TREASURER ADDRESS** 1010 Austin Highlands Austin, TX 78745 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 445-2975 PHONE REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) Exceeded \$500 limit X July 15 8th day before election PERIOD Month Month Day Year Day Year COVERED **THROUGH** 01/01/2015 06/30/2015 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 11/04/2014 χ General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known)

GO TO PAGE 2

Austin City Council Member District 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

				2 of 7						
13 C / OH NAME	Garza, Delia	1	4 Filer ID 00000009							
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made 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.									
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME								
	GENERAL									
		COMMITTEE ADDRESS								
	SPECIFIC									
		COMMITTEE CAMPAIGN TREASURER NAME								
		COMMITTEE CAMPAIGN TREASURER ADDRESS								
16 CONTRIBUTION TOTALS										
	•	AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 0.00						
EXPENDITURE TOTALS	· · · · · · · · · · · · · · · · · · ·									
		\$ 1,968.03								
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	ST DAY OF THE	\$ 2,270.31							
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	F THE LAST DAY	\$ 0.00							
17 AFFADAVIT		I swear, or affirm, under penalty of true and correct and includes all i under Title 15, Election Code.								
MYRNA G. RIOS My Commission Expires July 02, 2016 Signature of Candidate of Officeholder										
Sworn to and subscribed before me, by the said Alla Gaza this the day of Marcy to certify which, witness my hand and seal of office. Signature of officer administering Printed name of officer administering Title of officer administering oath										

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 19 Filer ID **18 FILER NAME** 00000009 Garza, Delia 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS ŝ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 4. SCHEDULE E: LOANS X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 1,500.53 5. \$ 6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ \mathbf{x} SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 8. \$ 467.50 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 11. \$ **TO FILER**

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Poling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica	y - al Corr	nmittee Le	ft/Awards/Memorials l egal Services he Instruction Gu	•		ages/Con	ntract Labor his form.		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch; 1/3 Rpt: 4/7	1	FILER NAME Garza, Delia						ı	Filer ID 00000009
4	Date 02/20/2015	i	Payee name Austin Indepe	endent School	District					
6	Amount (\$) \$104.03		Payee address; 3908 Avenue RM 205 Austin, TX 78	В	State;	; Zìp Co	ie			
8	PURPOSE OF EXPENDITURE		Category (See of Event Expens	Categories listed at th	ne top of this scho	iedule)		Check if Austin,	, TX,	de of Texas. Complete Schedule T. officeholder living expense ry Facility Use for Town Hall
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	_	Candidate/Office	holder name	C	Office sou	ght			Office held
	Date 02/20/2015	1	Payee name Austin Langua	age Justice Co	ollective					
	Amount (\$) Payee address; City; State; Zip Code \$370.00 3103 Powell Circle Austin, TX 78704									
	PURPOSE OF EXPENDITURE		(a) Category (see Categories listed at the top of this schedule) Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Translation Services for Town Hall Event						officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officel	holder name	0	Office sou	aht .			Office held
	Date Payee nan 06/15/2015 Child Inc.									
	Amount (\$) \$300.00		Payee address; 818 E. 53rd St Austin, TX 787	itreet	State;	; Zip Co	ie			
	PURPOSE OF EXPENDITURE		Contributions/	Categories listed at th /Donations Ma ficeholder/Polit	ide By	.	Co	Check if Austin,	, тх, е to Р	le of Texas. Complete Schedule T. officeholder living expense alomita Daycare for vandalism
	Complete <u>QNLY</u> if direct expenditure to benefit C/Oi	_	andidate/Officel	holder name	0	Office sou(jht		_	Office held

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:						
	Sch: 2/3 Rpt: 5/7	Garza, Delia 00000009					
4	Date	5 Payee name					
	03/17/2015	Con Mi Madre					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$250.00	1925 San Jacinto Blvd.					
		D3500					
		Austin, TX 78712					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense					
		Candidate/Officeholder/Political Committee Contribution					
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	04/29/2015	NARAL Pro Choice Texas					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$150.00	P.O. Box 684602					
		Austin, TX 78768					
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By					
	Candidate/Officeholder/Political Committee						
		Sponsorship for Men For Choice Event					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
	Date	Payee name					
	06/15/2015	Pizza Hut #7145					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$126.50	5510 S Interstate 35					
		Austin, TX 78745					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense Food sponsorship for volunteers for Palomita					
		Daycare cleanup efforts					
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
_	····						

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officebolder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense

Loan Repayment/Reimbu

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politics	d Co		Legal Services The Instruction G				Contract Labor te this form.		OTHER (enter a categor	y not listed above)
1	Total pages Schedule F1: Sch: 3/3 Rpt: 6/7	2	FILER NAME Garza, Delia		·					Filer (D 00000009	
4	Date 03/30/2015	5	Payee name	ity Democratic I	oarty				<u> </u>		
6	Amount (\$) \$200.00	7	Payee address 1311 E 6th :	Street	State;	Zip Co	de				
8	PURPOSE OF EXPENDITURE	(a)	Contribution	e Categories listed at t is/Donations Ma officeholder/Pol	ade By			_	, TX,	de of Texas. Complete Sc officeholder living expens JBR Dinner	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	Of	ffice soug	ght			Office held	

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Event Expense Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule G: 3 Filer ID 2 FILER NAME 00000009 Sch: 1/1 Rpt: 7/7 Garza, Delia 4 Date 5 Pavee name 05/18/2015 Graphic Granola Payee address; City; State; Zip Code 6 Amount (\$) \$467.50 1012 E. 38 1/2 Street Reimbursement from political contributions intended Austin, TX 78751 PURPOSE Check if travel outside of Texas. Complete Schedule T. (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Salaries/Wages/Contract Labor **EXPENDITURE** Late invoice for campaign website contract work Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH