

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 16 18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Delia	OFFICE USE ONLY Date Received 2015 JAN 15 8 PM 4 01 AUSTIN CITY CLERK RECEIVED Date Hand-delivered Date Retained Receipt # Amount Date Processed Date Imaged	
	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		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Jackie		
	NICKNAME LAST SUFFIX Goodman		
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 Month Day Year 10/26/2014 THROUGH 12/31/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
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) <input checked="" type="checkbox"/> additional pages	.. 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 <input checked="" type="checkbox"/> GENERAL <input type="checkbox"/> 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		

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 ADDRESS** 1812 Centre Creek Dr.
Ste. 310
Austin, TX 78754**COMMITTEE CAMPAIGN
TREASURER NAME** Kirfman, 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 ADDRESS** 615 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, Brian6 Contributor address; City; State; Zip Code
11205 Limoncillo Ct
Austin, TX 78750-36887 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)
Rancher10 Employer (See Instructions)
Beckham Ranch, Inc.

Date

10/27/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Beckham, KimberlyContributor address; City; State; Zip Code
11205 Limoncillo Ct
Austin, TX 78750-3688Amount 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# _____)
Brown, FrankContributor address; City; State; Zip Code
602 Coquina Ln
West Lake Hills, TX 78746-4536Amount 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

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown, JaniceContributor address; City; State; Zip Code
602 Coquina Ln
West Lake Hills, TX 78746-4536Amount 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 CounselorEmployer (See Instructions)
CAPSA

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Bunch, WilliamContributor address; City; State; Zip Code
1307 Oxford Ave
Austin, TX 78704-2825Amount 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, Claudia

6 Contributor address; City; State; Zip Code
1601 Forest Trl
Austin, TX 78703-3231

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)
Housewife

10 Employer (See Instructions)
Self-Employed

Date

11/04/2014

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

Burnett, Michael

Contributor address; City; State; Zip Code
1601 Forest Trl
Austin, TX 78703-3231

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

10/27/2014

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

Byars, Anne

Contributor address; City; State; Zip Code
2103 Schulle Ave
Austin, TX 78703-2141

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)
Farmer

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

Date

10/27/2014

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

Byars, Samuel

Contributor address; City; State; Zip Code
2103 Schulle Ave
Austin, TX 78703-2141

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

10/27/2014

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

Carlson, Michelle

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

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)
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, Patrick6 Contributor address; City; State; Zip Code
1609 Mohle Dr
Austin, TX 78703-19377 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

10/31/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chen, ShengContributor address; City; State; Zip Code
5000 Mission Oaks Blvd
Unit 24
Austin, TX 78735-6742Amount of
contribution (\$)

\$350.00

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

Date

10/30/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cody, BuckContributor address; City; State; Zip Code
5708 Highland Hills Dr
Austin, TX 78731-4233Amount 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, GopalContributor address; City; State; Zip Code
PO Box 200388
Austin, TX 78720-0388Amount of
contribution (\$)

\$350.00

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

Date

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# C00103903)
HDR, Inc. Political Action CommitteeContributor address; City; State; Zip Code
8404 Indian Hills Drive
Omaha, NE 68114Amount 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, Jeff

6 Contributor address; City; State; Zip Code
3700 Hillbrook Dr
Austin, TX 78731-4042**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)
Attorney**10** Employer (See Instructions)
Armbrust & Brown, PLLC

Date

10/27/2014

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

Hobbs, Lisa

Contributor 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, Annette

Contributor 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, Kenneth

Contributor 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, Gregg

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

11/04/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marsh, CharlesContributor address; City; State; Zip Code
2408 Windsor Rd
Austin, TX 78703-2413Amount of
contribution (\$)

\$350.00

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

Date

11/03/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marsh, WillContributor address; City; State; Zip Code
2117 W 12th St
Austin, TX 78703-3807Amount 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, RamiroContributor address; City; State; Zip Code
10009 Childress Dr
Austin, TX 78753-4333Amount 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 (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) 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 Pt Austin, TX 78746-1304	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) 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 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
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 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
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 (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****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	
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